Additional Measures for MEs

Measures for the Premises

- i. Control access and use SafeEntry visitor management system to record the entry of all personnel (including staff and customers) entering the premises. The deployment of the SafeEntry visitor management system should be done <u>in</u> <u>addition</u> to the requirement for ME licensees to maintain a register of clients, as specified under Rule 14 of the ME Rules 2018.
- ii. Conduct temperature screening and checks for respiratory symptoms for all onsite staff (twice daily).
- iii. Adopt queue management measures to reduce physical interactions between staff and customers as well as amongst customers. This can include allowing customers to only visit the premises on an appointment basis, and having clear demarcation of the safe physical distances using floor markers or other means, at all common spaces where congregation or queuing of customers and/or staff might occur (e.g. at the entrances, counters, waiting areas).
- iv. Encourage the use of cashless or contactless payment and minimise need for physical touchpoints (e.g. deploying contactless access controls) to reduce contact between staff and customers. Where physical contact is needed, to adopt additional safeguards (e.g. frequent disinfection of touchpoints) to minimise the risk of cross infections.
- v. ME operators should adhere to the sanitation and hygiene advisories disseminated by the National Environment Agency (NEA) and they can be found at https://www.nea.gov.sg/our-services/public-cleanliness/environmental-cleaning-guidelines. In the event of an outbreak of COVID-19 in the ME, thorough cleaning and disinfecting of the premises should be carried out in accordance to NEA's guidelines.

Measures for Staff

- i. All staff should download and activate the TraceTogether app to help MOH to more quickly identify potential close contacts of COVID-19 patients and reduce disease transmission.
- ii. Ensure staff adhere to MOH's prevailing travel advisory.
- iii. **Staff should not socialise or congregate** at the workplace premises (including during break times).

- iv. Cancel or defer all events and activities which involve close and prolonged contact amongst staff at the workplace, such as social gatherings, birthday celebrations, team bonding activities, etc.
- v. **Pay special attention to vulnerable staff** (e.g. older or pregnant staff) and temporarily redeploy them to another role that is suitable for working from home, if possible.
- vi. **Stagger working and break hours** to reduce staff congregation at common spaces. If it is not feasible to implement this due to operational reasons, employers should implement other systems to achieve this outcome (e.g. arrange for different groups of employees to arrive/depart through different entrances/exits).
- vii. Implement shift or split team arrangements where possible, and ensure clear separation of staff on different shifts, split teams or ME outlets. There should be strictly no cross-deployment or interaction between staff in different shifts, teams or ME outlets, even outside of work.
- viii. **Encourage staff to observe good personal hygiene** (e.g. wash their hands regularly with soap and after completing each massage session). Signs should also be put up to remind staff on good social habits such as observing good personal hygiene and proper mask-wearing behaviour.

Management of ill / suspected cases

- i. Actively monitor the health status (including checks for respiratory symptoms) of all staff. Staff on MC must not return to work during the period of MC, and should monitor their health closely to ensure that they are no longer ill before they return to work. Furthermore, close contacts of these staff on MC should monitor their health more regularly.
- ii. Remind staff not to clinic-hop and where possible, ensure that each staff only visits one clinic for check-ups if unwell. Otherwise, the staff should inform the clinic of all recent doctor visits over past 14 days for any symptoms that may be related to COVID-19 (including but not limited to typical symptoms such as fever, cough and shortness of breath).
- iii. Prepare an evacuation plan for unwell or suspected cases to seek medical assistance, as well as for other onsite personnel. Any staff who is feeling unwell or showing symptoms of illness should be asked to leave the ME immediately to consult a doctor, even if the symptoms appear mild. These cases must be recorded and monitored as part of SMMs.