**Using the Exposure Control Program Template**

The following document is a template for the development of a COVID-19 Exposure Control Program. Site-specific information may be required by policy, procedure, federal, state, and local requirements. Depending on the disease and the risk of exposure, it is important that the most up-to-date information is applied to this policy at the time of creation. As requirements change, this policy will need revision in order to remain current and effective.

To get started we need to personalize the policy to your organization.

The following text strings require updating.

Replace them by using the “Find and Replace” function of your word processing program. - *For Microsoft Office, use the (Ctrl Key + H) combination.*

|  |  |
| --- | --- |
| * COMPANYNAME
 | To be replaced with the Company Name. Make sure the company name is typed the way you want it to appear in the header.**Example:** replace COMPANYNAME with ‘Cutting Edge Contractors’ |
| * IDATE
 | To be replaced with the implementation date of the exposure control program. This is the date of creation or the date on which the employees were trained to the exposure control program.**Example:** replace IDATE with ‘Month DD, YYYY’ |
| * RDATE
 | To be replaced with the revision date of an existing exposure control program. The implementation date remains, the revision date is added or changed. If this is a new program you can either delete the revision date line or replace RDATE with N/A.**Example:** replace RDATE with ‘Month DD, YYYY or N/A’ as applicable |

**Site-specific Content**

Once those updates have been made, review the document and make any changes as necessary. If the existing content is acceptable, leave it. If it doesn’t apply, delete it. If site-specific or disease-specific changes are necessary, go ahead and make those changes. Proceed through the document until you are satisfied with the content.

You will see a yellow instruction box on the Title Page. This box instructs you to paste your company logo in its location and delete the box. If you do not have a company logo, delete the box and type your company name in its location.

You will see blue highlighted portions of the plan below. This indicates the updates made to the plan. Remove highlighting once changes have been reviewed.

Review the document one last time and verify that all included information is correct. As changes were made, it is possible that page breaks and paragraph spacing were affected. Make any necessary changes to eliminate unnecessary spacing (white space) and to ensure the pages line up correctly. For best results, print out the template prior to alteration so you can use the printed document as a reference on how it should look.

**Remember, whether you're double checking your understanding of local COVID-19 regulations, looking for quick safety answers or just want to bounce your ideas off safety professionals, the FCA Safety Helpline is available to contributing FCA members by phone at (844) 414-SAFE or by email at safetyhelpline@finishingcontractors.org.**

Finally, remove this instructional sheet and save a copy of the document where applicable.

**Delete this box, then insert the Company Logo in its place or type in the company name if no logo is available**

COVID-19
Exposure Control Program

 Implementation Date: IDATE

 Revision Date: January 10, 2022

**Disclaimer:**

|  |  |
| --- | --- |
| Logo, company name  Description automatically generated |  |

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# Implementation of Exposure Control Program

COMPANYNAME has implemented this exposure control program to provide guidance in the protection of our employees during exposure to a COVID-19 infectious disease event. COMPANYNAME will take proactive steps and define measures for implementation in an effort to protect the workplace from exposure to a COVID-19 outbreak.

Updated OSHA guidance addresses the recent increase in COVID cases due to the current COVID variants by advising that workers working in areas with substantial or high transmission rates resume wearing masks in indoor public settings. Additionally, workers should wear masks regardless of the level of transmission if they are at increased risk of infection or complication from infection or have someone in their household who is at increased risk and is not fully vaccinated.

Workers who have been exposed to someone with a confirmed infection should be tested at day five (5) after the exposure. The CDC recommends different isolation and quarantine times depending on the vaccination status of the person exposed. For people who are unvaccinated or are more than six (6) months out from their second mRNA dose (or more than two [2] months after the J&J vaccine) and not yet boosted, the CDC now recommends quarantine for five (5) days followed by strict mask use for an additional five (5) days. Alternatively, if a five-day quarantine is not feasible, it is imperative that an exposed person wear a well-fitting mask at all times when around others for ten (10) days after exposure. Individuals who have received their booster shot do not need to quarantine following an exposure, but should wear a mask for ten (10) days after the exposure.

Employers should still take steps to protect unvaccinated or otherwise at-risk workers in their workplaces or well-defined portions of their workplaces.

Employees are encouraged to report any COVID-19 hazards in the workplace, or to raise any other questions or concerns they may have concerning workplace safety and health, to their supervisor or to the COVID-19 Supervisor as soon as possible. COMPANYNAME will not retaliate against any employee for raising, in good faith, concerns regarding COVID-19 safety.

COMPANYNAME shall make every effort to operate effectively and ensure all essential services are continuously provided while keeping employees safe within the workplace.

Employees who believe they are at a higher risk of severe illness from COVID-19 are encouraged to discuss their concerns with their supervisors.

COMPANYNAME is committed to providing authoritative information about the nature and spread of COVID-19, including symptoms and signs to watch for, as well as required steps to follow in the event of an infectious disease outbreak.

This program addresses the following measures to reduce the risk of infection and disease spread in the workplace:

* + Signs and Symptoms of COVID-19 Infection
	+ Action Steps
	+ Limiting the Spread of Infection in the Workplace
	+ Reducing Transmission Among Employees
	+ Protecting Employees with Personal Protective Equipment
	+ Supervision of Protective Measures
	+ Evaluation of Employee Health Status
	+ Implementing Hazard Control Measures
	+ Medical Information
	+ Recordkeeping
	+ Training

# Signs and Symptoms of COVID-19 Infection

The following signs and symptoms are indicative of a serious infection. **Immediate Medical Attention** should be requested for anyone experiencing these signs and symptoms:

* + - Difficulty breathing or shortness of breath in severe cases
		- Persistent pain or pressure in the chest
		- New confusion or inability to arouse
		- Bluish lips or face due to breathing difficulty

**Call emergency medical services (911) for any medical emergency:** When calling, notify the operator that the emergency may be COVID-19 related. Have the patient don a facemask or face covering before medical help arrives.

Symptoms of COVID-19 infection may present two (2) to fourteen (14) days after exposure to the virus. Persons experiencing the following symptoms or combination of symptoms may be infected with COVID-19:

|  |  |
| --- | --- |
| * Fever or chills
 | * Sore throat
 |
| * Cough
 | * New loss of taste or smell
 |
| * Shortness of breath or difficulty breathing
 | * Congestion or runny nose
 |
| * Fatigue
 | * Nausea or vomiting
 |
| * Muscle or body aches
 | * Diarrhea
 |
| * Headache
 |  |

# Action Steps

## Staying Home When Ill

Many times, with the best of intentions, employees report to work even though they feel ill. During an infectious disease outbreak however, it is critical that employees not report to work while they are ill and/or experiencing symptoms of COVID-19.

The **Centers for Disease Control and Prevention (CDC)** recommends that people infected with COVID-19 should isolate for five (5) days if they are asymptomatic or their symptoms are resolving (without fever for 24 hours), followed by five (5) days of wearing a mask when around others to minimize the risk of spreading the infection. See the Home Isolation section below.

Employees who report to work ill will be sent home in accordance with these health guidelines. Anyone scheduled to work is required to stay home if they are sick, except to get medical care.

## Seeking Medical Attention

**If you are having trouble breathing seek medical attention; but call first.**

* Call your doctor or emergency room and inform them of your symptoms before going in. They will advise you of recommended actions.
* **Wear a facemask:** If available, put on a facemask before coming in contact with medical personnel including emergency medical technicians and ambulance personnel. If a facemask is not available don another face covering such as a bandana or scarf that can control the spread of fluid droplets when coughing.
* If you cannot put on a facemask or face covering, cover your coughs and sneezes. Try to stay at least six (6) feet away from other people. This will help protect the people in the office or waiting room.
* **Follow care instructions from your healthcare provider and local health department:** Your local health authorities may give instructions on checking your symptoms and reporting information.

## Home Isolation

Home isolation or self-quarantine is recommended for workers who experience signs and/or symptoms of infection or have been in close contact with someone who has been infected with COVID-19.

Close contact is defined as having:

* been within six (6) feet of a person or persons infected with the disease for a total of fifteen (15) minutes or more over a twenty-four (24) hour period. The fifteen minute exposure is cumulative across all possible exposures. A fifteen minute exposure may be shorter exposures across a number of contacts or multiple shorter-term exposures with the same person.
* provided care at home to someone infected with COVID-19
* direct physical contact with an infected person
* shared eating or drinking utensils
* been exposed to respiratory droplets by coughing or sneezing by an infected person.

The CDC has updated the recommended quarantine period for anyone in the general public who is exposed to COVID-19. For people who are unvaccinated, or are more than six (6) months out from their second mRNA dose (or more than two [2] months after the J&J vaccine) and not yet boosted, the CDC now recommends quarantine for five (5) days followed by strict mask use for an additional five (5) days. Alternatively, if a five-day quarantine is not feasible, it is imperative that an exposed person wear a well-fitting mask at all times when around others for ten (10) days after exposure.

Individuals who have received their booster shot do not need to quarantine following an exposure but should wear a mask for ten (10) days after the exposure. For all those exposed, best practice includes a test for SARS-CoV-2 at day five (5) after exposure. If symptoms occur, individuals should immediately quarantine until a negative test confirms symptoms are not attributable to COVID-19.

In all cases, **follow the guidance of your healthcare provider and local health department.** The decision to stop home isolation should be made in consultation with your healthcare provider and with state and local health departments. Local decisions depend on local circumstances.

## CDC Guidelines

**For Those Who Are Infected**

The CDC recommends the following actions for those who are infected or suspect they are infected with COVID-19. These steps can promote healing and protect others in your home and community from exposure.

* **Stay home:**
	+ Most people infected with COVID-19 experience mild illness and are able to recover at home without medical care.
	+ Do not leave your home, except to get medical care.
	+ Do not visit public areas.
* **Stay in touch with your doctor:**
	+ Call before you get medical care.
	+ Be sure to get care if you have trouble breathing, or have any other emergency warning signs, or if you think it is an emergency.
* **Avoid public transportation:** Avoid using public transportation, ride sharing, or taxis.
* **Stay away from others:**
	+ As much as possible, separate yourself from other people in your home, this is known as home isolation
	+ You should stay in a specific “sick room” if possible, and away from other people in your home.
	+ Use a separate bathroom, if available.
	+ When six (6) feet of separation cannot be maintained other mitigation practices should be used i.e., requiring all employees to use face coverings.

COVID-19 Variants

Due to the rate of spread of the Delta and Omicron variants of the COVID-19 virus, the CDC is recommending that workers, including those who are fully vaccinated, resume wearing masks in public indoor settings in regions where there are high rates of COVID infection, where workers cannot maintain social distancing due to the demands of the work, or if they have been exposed to someone known to have COVID-19 and have not been tested to confirm they are not infected.

Workers, even those who have been fully vaccinated, who have had close contact with those confirmed to be infected with COVID-19 should wear masks for up to ten (10) days after the contact unless they have been tested at day five (5) after the exposure and confirmed to be free of infection.

# Limiting the Spread of Infection in the Workplace

COMPANYNAME will ensure a clean workplace, including the regular cleaning of objects and areas which are frequently used. We require all employees to cooperate in taking steps to reduce the transmission of infectious disease in the workplace. The best strategy remains the most obvious—frequent hand washing with warm, soapy water; covering your mouth whenever you sneeze or cough; and discarding used tissues in wastebaskets.

Social distancing or physical distancing measures may be implemented based on recommendations and guidance from federal, state, and local authorities having jurisdiction.

Unless otherwise notified, our normal attendance and leave policies will remain in place.

Employees may face challenges in reporting to work during a COVID-19 outbreak. Affected employees should take steps to develop any necessary contingency plans. For example, employees may need to plan for alternative sources of family care or transportation, and/or speak with supervisors about the potential to work from home temporarily or on an alternative work schedule.

At this time, it is unknown whether COVID-19 vaccines prevent the transmission of the virus from person-to-person. Therefore, as COVID-19 vaccines become more widely available, employees must continue to follow infection control practices and social distancing measures even after they have become vaccinated in order to reduce the transmission of COVID-19 in the workplace.

## Hazard Assessment

A hazard assessment must be performed to identify where and how employees may be exposed to COVID-19 in the workplace. Conduct a thorough hazard assessment and, using the hierarchy of controls, implement appropriate control measures to limit the spread of the disease.

Conduct a thorough hazard assessment to determine if workplace hazards are present, or are likely to be present, and determine what type of controls or PPE are needed for specific job duties. When engineering and administrative controls cannot be implemented or are not fully protective, employers are required by OSHA standards to:

* Perform a PPE Hazard Assessment to determine what PPE is required for each specific task
* Select and provide appropriate PPE at no cost to the workers
* Train workers on the correct use, maintenance, and storage of the required PPE

Hierarchy of Controls

The following control methods are listed in order of effectiveness, from the most effective to the least effective. Controls should be implemented as much as feasible from the top down. For example, PPE usage should be implemented only when all other methods are infeasible.

* Elimination – Eliminating the exposure must always be the first consideration.
* Substitution – Controlling a hazard by using a less hazardous material or implementing a less hazardous process.
* Engineering Controls – Physical changes to the work area or process that effectively minimize a worker's exposure to hazards.
* Administrative Controls – Policy, procedure, series of steps, or method to control the hazards.
* Personal Protective Equipment – The last line of defense; to be used only when other measures fail to eliminate the hazard.

## Ventilation

If applicable, consider improving the engineering controls using the building ventilation system. This may include some or all of the following activities:

* Increasing ventilation rates
* Ensuring ventilation systems are working properly and providing acceptable indoor air quality for the current occupancy level for each space
* Increasing outdoor air ventilation, using caution in highly polluted areas. With a lower occupancy level in the building, this increases the effective dilution ventilation per person.
* Improving central air filtration to the MERV-13 or the highest compatible with the filter rack, and sealing edges of the filter to limit bypass.
* Checking filters to ensure they are within service life and appropriately installed.
* Keeping systems running longer hours, 24/7 if possible, to enhance air exchanges in the building space.

## Social Distancing

COMPANYNAME mayimplement the social distancing guidelines found at the end of this program to minimize the spread of the disease in the workplace. Determination of implementation and specific guidelines will be made in accordance with CDC Guidanceand federal, state, and local requirements. If implemented, the guidelines will remain in effect until rescinded by COMPANYNAME.

The purpose of social distancing is to reduce exposure to employees and others as much as possible to reduce the likelihood of COVID-19 disease transmission. Therefore, every feasible effort must be made to keep close contact to a minimum. As much as feasible, worker positioning will be staggered as necessary to reduce density and maintain a minimum six (6) foot separation between employees.

Where social distancing is infeasible, worker proximity restrictions must be maintained as much as possible and a Job Hazard Analysis and PPE Hazard Assessment must be performed by a qualified person to identify associated hazards, alternative control measures, and PPE requirements to prevent transmission of the disease. Any alternative measures and PPE choices implemented must be at least as effective in preventing the transmission of disease as those established by federal, state, and local requirements or guidance.

When employees are required to work closely together, masks, or other acceptable face coverings as recommended by CDC, federal, state, or local requirements must be worn. In all instances however, requirements set forth by federal, state, or local authorities having jurisdiction must be followed.

At fixed workstations where unvaccinated or otherwise at-risk workers are not able to remain at least six (6) feet away from other people, transparent shields or other solid barriers can be installed to separate these workers from other people. Barriers should block face-to-face pathways between individuals in order to prevent direct transmission of respiratory droplets, and any openings should be as small as possible and placed at the bottom of the barrier. The positioning of users and the safety of the work environment should be considered when designing and installing barriers, as should the need for enhanced ventilation.

‘Choke points’ and areas where high worker density is likely shall be identified and communicated to all employees. Communication can be accomplished through training or posting of signage in these areas reminding workers of the social distancing requirements. Areas of limited capacity should be identified with an occupancy limit, and occupancy monitored and enforced. Examples of high-risk areas include elevator lobbies, elevators and hoists, stairways, hallways, break areas, and other areas of limited space and high traffic.

## Visitors

A metered approach should be implemented to limit contact with outside visitors and vendors. In order to maintain business operations, it may not be advisable to implement a blanket ban on visitors, vendors, suppliers, contractors, or workers from outside the organization.

A policy should be established that identifies the purpose and necessity of the visit. If your business is authorized to remain in operation, then support services should be prioritized for access over non-essential activities such as a scheduled visit with a prospective client or sales representative.

Service technicians may need access to perform service, maintenance, or repairs on a piece of equipment necessary for operation and delivery personnel to drop off materials and pick up products. Other support personnel may include safety support services, inspectors, emergency services personnel, and other services that maintain and support essential operations.

Activities not related to business operations such as social visits or a group tour should be deferred until the epidemic/pandemic event has ended.

Visitors deemed essential to the performance of safe and efficient work activities should be granted access.

A visitor access authorization form is provided at the end of this document to assist in determining access priority and authorization.

In all cases, visitors must be informed of and comply with the established control measures including PPE usage and social distancing guidelines for the prevention of disease spread.

## Limiting Travel

All nonessential travel should be avoided. Employees who travel as an essential part of their job shall consult with management on appropriate actions. Employees should avoid crowded areas and maintain social distancing when using public transportation.

Telecommuting

One method of limiting travel is to work remotely when possible. Telework requests will be handled on a case-by-case basis. While not all positions will be eligible, all requests for temporary telecommuting should be submitted to your manager/supervisor, etc. for consideration. This approach is subject to change and may be modified to align with federal, state, and/or local guidance and proclamations.

Employees who are sent home or are isolating due to a possible COVID-19 infection or exposure are encouraged to speak to their supervisor or manager regarding the possibility/availability of telework during their quarantine period.

## Vaccination

The CDC has advised that persons who have been fully vaccinated and those who have been previously diagnosed with COVID-19 within the last three months may not need to quarantine. Full vaccination is considered to be:

* Two (2) weeks after the second dose of the Pfizer or Moderna vaccines, and within six (6) months of their second dose; OR
* Two (2) weeks after a single-dose vaccine such as the Johnson & Johnson vaccine, and within two (2) months of vaccination; OR
* Vaccinated with any of the three COVID vaccines and have received a booster

People who do not meet these criteria are NOT fully vaccinated and should continue following the precautionary measures established in this program until fully vaccinated.

When returning from international travel, employees should still get tested between three (3) and five (5) days after arriving in the United States.

Workers who have been fully vaccinated and who have had close contact with someone who has COVID-19 do not need to self-quarantine or get tested unless symptoms develop. Instead, fully vaccinated persons should wear a mask for ten (10) days after the exposure.

OSHA has established the COVID-19 Vaccination and Testing Emergency Temporary Standard which requires employers who reach a threshold of at least one hundred (100) employees at any point during a year, adopt policies requiring workers to be vaccinated or undergo regular COVID-19 testing in addition to wearing masks and maintaining physical distancing if they choose to remain unvaccinated.

Employers who had 100 or more employees on November 5, 2021 or have more than 100 employees at any time after November 5, 2021 fall within that threshold and the ETS applies to them until it is rescinded.

COMPANYNAME may develop and implement such policies depending on local, state, and federal requirements.

Vaccination Status Inquiry

Employers who choose to require vaccinations should do so in consultation with a human resources specialist and/or attorney. Federal, state, and local laws as well as bargaining agreements may have prohibitions and/or requirements that apply. Generally an employer who has made the decision to implement a vaccination mandate may ask employees if they have been vaccinated and may ask for proof of vaccination, but should not ask unvaccinated workers why they have not been vaccinated. When asking, remind the employee that they must not provide any other medical information that may be listed on their vaccination

Unvaccinated Workers

Workers who choose to remain unvaccinated or are unable to be vaccinated due to medical reasons or sincerely held religious beliefs should follow all COVID-19 recommendations including the wearing of masks, maintaining social distancing, and self-quarantine if symptoms appear, or they are exposed to someone known to be infected with the virus.

In order to protect workers who have not been vaccinated, the CDC is recommending that workers, including those who are fully vaccinated, resume wearing masks in public indoor settings in areas where there are high rates of COVID infection and where workers cannot maintain social distancing due to the demands of the work.

# Reducing Transmission Among Employees

COMPANYNAME will keep all employees informed as to the latest information available from the CDC and federal, state, and local authorities regarding the use of personal protective equipment, social distancing, good hygiene practices, and other measures to employ specific to the disease.

In order to reduce disease transmission between employees, all employees experiencing signs and/or symptoms of COVID-19 infection shall immediately inform their supervisor and stay home. If already at work, employees should inform their supervisors whereupon the employee will be immediately separated from others and sent home.

All employees have a responsibility to limit the spread of this disease. Continual vigilance should be exercised when monitoring your condition as well as the condition of others. If another worker is observed displaying possible signs or symptoms of infection, the supervisor must be informed so that protective actions can be taken. This is for the health and welfare of the worker showing signs of infection as well as all affected workers in the area.

Employees showing signs of infection should follow the steps recommended by the CDC in their *What to Do if You Are Sick* bulletin at:

https://www.cdc.gov/coronavirus/2019-ncov/if-you-are-sick/steps-when-sick.html

Employees who are not showing signs of infection but have a family member at home infected with COVID-19 (confirmed), should notify their supervisor, and follow the CDC recommendations at:

https://www.cdc.gov/coronavirus/2019-ncov/if-you-are-sick/index.html

If an employee is confirmed to be infected with COVID-19, employers should inform employees of the possible exposure to COVID-19 in the workplace but maintain confidentiality as required by the Americans with Disabilities Act (ADA). Exposed employees should self-monitor for symptoms.

## Hygiene Practices

Germ transmission is often accomplished through poor personal hygiene practices.

* Avoid touching your face, mouth, nose, or eyes. Unwashed hands or gloves may transfer germs from your hands to your face and from there into your mouth, nose, or eyes eventually leading to infection. If you are infected, even unknowingly, you could be transferring your germs to commonly touched surfaces leading to the infection of others.
* Cover all coughs and sneezes using a tissue if available, or the inside of your elbow rather than your hand. Properly discard all used tissues upon use; do not save them for later use or leave them laying around. Doing so can increase risk to others.
* Avoid phone to face contact to prevent germ transfer.
* Increase ventilation by opening windows or adjusting air conditioning.

## Hand Sanitation

Practicing hand hygiene is a simple yet effective way to prevent infections. Cleaning your hands can prevent the spread of germs, including those that are resistant to antibiotics and are becoming difficult, if not impossible, to treat.

* Wash your hands frequently with soap and water for at least twenty (20) seconds. This is especially important after blowing your nose, coughing or sneezing, using the restroom, and before eating or preparing food.
* If soap and water are not available, use an alcohol-based hand sanitizer that contains at least 60% alcohol content. Cover all surfaces of your hands and rub them together until they feel dry.
* Avoid touching your eyes, nose, and mouth with unwashed hands.

## Cross-contamination

Do not share dishes, cups, eating utensils, towels, food, or other objects that may have come in contact with the mouth and/or nose. For any commonly used appliances, wash them thoroughly with soap and water before restoring them for use.

## Cleaning and Disinfecting

You can reduce your risk of COVID-19 by cleaning and disinfecting frequently touched items and surfaces every day. Assign designated personnel to wipe down commonly touched surfaces at the end of the day prior to leaving the facility/premises.

Alcohol-based hand sanitizers, anti-bacterial wipes, and disinfectant cleaners will be made available in designated locations, but not limited to the break rooms and common areas in the workplace. Personal protective equipment (PPE) will be provided such as gloves, goggles, face shields and face masks as appropriate for the activity being performed.

Surfaces and objects that are commonly touched by others include (but limited to):

|  |  |
| --- | --- |
| * Telephones
 | * Keyboards, mice, and computer accessories
 |
| * Guard and handrails
 | * Printer/copier control panels
 |
| * Top edges of cubicle walls
 | * Shared tools and equipment
 |
| * Doorknobs and latch mechanisms
 | * Hand tools
 |
| * Window latches and mechanisms
 | * Machines and machine controls
 |
| * Light switches
 | * Toilets, flush handles, and toilet seats
 |
| * Elevator control buttons
 | * Sinks, faucets, and faucet handles
 |
| * Tables and countertops
 | * Towels and towel dispensers
 |
| * Desktops and chair armrests
 | * Other convenience dispensers
 |
| * Drawer pulls
 | * Other items
 |

Such items should be frequently sanitized with approved sanitizing products such as alcohol-based hand sanitizers, anti-bacterial wipes, and disinfectant cleaners.

Wear disposable impermeable gloves such as those made of latex or nitrile when cleaning and disinfecting. If the item is dirty, wash first with soap and water or another general cleaner and then use an approved disinfectant cleaner to kill germs. Follow the manufacturer’s instructions for application and proper ventilation for safely use of the product.

For phones or other electronics, follow the manufacturer’s instructions for cleaning and disinfecting. If no instructions are provided, use alcohol-based wipes or spray cleaners containing at least 70% alcohol and dry surfaces thoroughly.

Employers must protect employees from exposure to hazardous chemicals used in cleaning and disinfection. Common sanitizers and sterilizers may contain hazardous chemicals. Where employees are exposed to hazardous chemicals the Hazard Communication Standard (29 CFR 1910.1200) applies. Safety Data Sheets (SDS) must be available and reviewed to ensure all employees working with the chemicals are aware of the potential hazard exposure, the effects of exposure, and protective measures to employ to reduce or eliminate the negative effects of exposure.

# Protecting Employees with PPE

Personal Protective Equipment (PPE) can be an effective method of reducing risk of exposure to infectious disease. Depending on the type of exposure and the type of work being performed this may include the use of disposable medical or chemical protective gloves, splash shields, protective eyewear or goggles, and respirator masks.

COMPANYNAME will follow recommendations established by governmental guidance when requiring PPE use. Where guidelines are limited or lacking COMPANYNAME will perform a PPE Hazard Assessment to identify whether PPE is needed and what type will be used.

COMPANYNAME will refer to the latest information from the CDC and from federal, state, and local guidelines and instructions for proper PPE selection and usage. Currently, for workplaces other than the healthcare industry, the CDC is recommending only the use of face coverings when working in close proximity to others. State and local recommendations may also apply, and applicable health services should be consulted for more information. In all instances however, requirements set forth by federal, state, or local authorities having jurisdiction must be followed.

When employees are required to work in close proximity, masks or other acceptable face coverings as recommended by CDC, or federal, state, and local guidance must be worn.

Personal protective equipment (PPE) identified as necessary either by federal, state, or local requirements, or through Job Hazard Analysis and PPE Hazard Assessment for protection against disease exposure will be provided as appropriate for the activity being performed.

OSHA recommends employer provide unvaccinated and otherwise at-risk workers with face coverings or surgical masks unless their work task requires a respirator or other specific PPE. Face coverings should cover the nose and mouth to contain the wearer's respiratory droplets and be made of at least two layers of a tightly woven breathable fabric such as cotton, and should not have exhalation valves or vents. They should fit snugly over the nose, mouth, and chin with no large gaps on the outside of the face.

Employers should provide face coverings to unvaccinated and otherwise at-risk workers at no cost. Under federal anti-discrimination laws, employers may need to provide reasonable accommodation for any workers who are unable to wear or have difficulty wearing certain types of face coverings due to a disability or who need a religious accommodation under Title VII.

Unless otherwise provided by federal, state, or local requirements, unvaccinated employees working outdoors may opt to not wear face coverings unless they are at-risk, for example, if they are immunocompromised. Regardless, all workers should be supported in continuing face covering use if they choose, especially in order to safely work closely with other people.

When requiring the use of PPE in the workplace employers bear certain responsibilities including (but not limited to):

* PPE hazard assessment
* PPE selection
* Employee training:
	+ Selection of appropriate PPE
	+ Use and care of PPE
	+ Maintenance and storage of PPE.

If PPE recommendations established by governmental guidance prevent work operations or make work operations infeasible, an assessment must be made to identify alternative measures. A Job Hazard Analysis and a PPE Hazard Assessment will be performed to identify associated hazards, alternative control measures, and PPE requirements to prevent transmission of the disease. Any alternative measures and PPE choices implemented must be at least as effective in preventing the transmission of disease as those established by federal, state, and local guidance.

If alternative measures cannot be established, or do not provide an effective level of protection, it may be necessary to cease those operations until the emergency is over. For example, the alternative measure selected exposes employees to another risk, or necessary equipment such as recommended masks is not available.

## Respirator Masks

When required, an engineered respirator mask recognized to be effective against exposure should be used. Respirators may range from an N95-rated respirator mask to cartridge filter face masks to supplied air respirators and self-contained breathing apparatus. An N95-rated respirator is typical but always refer to federal, state, and local guidance when selecting PPE for breathing protection. When using N95-rated respirators, medical respirators are best and are available from medical supply sources.

**NOTE:** Some industrial N95/KN95 masks are equipped with one-way valves that allow the user’s exhaled air to be directed outside the mask without filtering. These masks are ineffective in keeping exhaled germs from being spread in the workplace. Use masks that filter exhaled air as well as inhaled air.

If an N95/KN95-rated medical mask is not available, then another N95-rated mask can be used. These masks can be acquired from business and home-supply stores, hardware stores, or online.

If an N95-rated mask is not available, then COMPANYNAME will provide alternative options designed to protect against fluid exposure following recommendations established by recognized agencies such as the CDC.

Voluntary Use of Respirator Masks

When used voluntarily, employees should be advised that if they experience any medical distress while wearing a respirator, they should discontinue use and seek medical attention before resuming respirator use.

Employees allowed to wear a respirator mask voluntarily must be provided with a copy of Appendix D of OSHA's Respiratory Protection Standard. This document advises of certain precautions you should take when wearing a respirator voluntarily.

Appendix D advises workers to:

* Read and follow the manufacturer's instructions provided with the respirator;
* Choose respirators that have been certified by NIOSH for protection against the contaminant of concern;
* Keep track of your respirator so that workers do not use someone else's respirator by mistake; and
* Not wear the respirator in areas with contaminants that the respirator is not designed to protect against.

When permitting voluntary use of respirator masks, employers must establish and implement those elements of a written respiratory protection program necessary to ensure that any employee using a respirator voluntarily is medically able to use that respirator, and that the respirator is properly cleaned, stored, and maintained.

**Exception:** Employers are not required to include in a written respiratory protection program those employees whose only use of respirators involves the voluntary use of filtering facepieces (dust masks).

## Improvised Face Coverings

In some cases the CDC has recommended the use of improvised face coverings to reduce droplet spread for the protection of others from disease exposure when social distancing cannot be maintained. Improvised face coverings may be self-manufactured masks using common materials. Wearing a face covering over your mouth and nose may reduce your exposure as well as reduce exposure to others to any droplets you may expel.

**NOTE:** Follow all federal, state, and local guidance as it pertains to the use of face coverings.

When respirators or surgical masks are not available then improvised face coverings may be considered. The CDC has advised the use of simple cloth face coverings to slow the spread of the virus by providing a barrier against outside exposure and containing any droplets expelled by the infected person.

Improvised face coverings should fit snugly but comfortably against the sides of the face and be secured with ties or ear loops. They should be made with multiple layers of fabric and allow for breathing without restriction. Face coverings should be able to be laundered and machine dried without damage or change to the shape of the mask.

The use of respirators, masks, or face coverings may introduce other hazards into the workplace. Barrier device usage may lead to:

* **Obstructed vision** – face masks may obstruct vision or “fog up” safety glasses or glasses. If an employee is unable to resolve vision obstructions, especially for machine and equipment operation or driving activities, the face masks may create a greater hazard and should not be used.
* **Caught-in / entanglement hazards –** loose fitting barriers and/or their ties could become caught in moving machine parts. Extra care should be exercised to ensure the barrier device used is secure from entanglement.
* **Disease vector / respiratory hazards –** barrier devices (respirators, masks, face coverings) may become a growth environment for viruses and other pathogens.
	+ Employees must be trained to safely remove the barrier device without touching their eyes, nose, or mouth, and wash their hands and face after use.
	+ Barrier devices should be frequently cleaned or replaced to reduce contamination accumulation.
* **Asphyxiation hazards –** homemade face coverings or barrier devices that are not cleaned or replaced frequently may excessively limit an employee’s breathing. This restriction can place stress on the cardio-pulmonary system of the body. Employees with underlying respiratory or cardiac health conditions may be particularly susceptible to this hazard.
* **False sense of security –** employees may presume that they cannot spread or contract coronavirus while wearing a face mask. For example, the use of improvised face coverings is not intended to protect the wearer from exposure to infectious material but rather to keep the wearer from spreading the droplets further.

The CDC has provided additional information on improvised face coverings at their website: https://www.cdc.gov/coronavirus/2019-ncov/prevent-getting-sick/diy-cloth-face-coverings.html

## Barrier Device Usage

Barrier devices include respirators, masks, and improvised face coverings.

* If using a respirator or mask, read and follow the manufacturer provided directions for use.
* Wash your hands before donning and after removing the barrier device.
* Don the barrier device properly ensuring it completely covers your mouth and nose. Adjust it as necessary throughout the day without touching your face, mouth, or nose.
* Secure any ties or loose material and keep the barrier device away from running machinery or equipment to prevent entanglement.
* Don’t allow the barrier device to obstruct your vision or wear it if it causes your safety glasses or reading glasses to fog up and impair your vision. Adjustment or a different barrier device may be needed.
* After removing the barrier device clean and store it properly in a clean and dry location and wash your face. Do not lay the barrier device on any surface where it may contaminate or be contaminated.
* If the barrier device adversely affects your ability to breathe replace it. A different barrier device may be needed. If the problem persists, seek medical attention.
* When contaminated or unsanitary, replace or clean the device according to manufacturer recommendations.
* Don’t use the barrier device if it is damaged; replace the barrier device and dispose of it at the workplace, do not bring it home.

# Supervision of Protective Measures

COMPANYNAME will designate a COVID-19 Supervisor (workplace coordinator) to enforce this guidance. The designated COVID-19 Supervisor will be present at all times during work activities. The COVID-19 Supervisor may be any authorized employee designated to carry out this role.

The designated COVID-19 Supervisor will be responsible for ensuring the following guidelines in this policy are in compliance at all times:

 **Social Distancing** – If social distancing protocols are implemented, group size limitations may be in effect (see local, state, and federal guidelines), and each person must maintain a six (6) foot distance from each of the others.

 **Health Status** –During the safety briefing confirm that no one present is ill, displaying signs of being ill, or believed to have come in contact with someone that has tested positive for COVID-19.

 **Workplace Cleanliness** – Ensure that work areas are clean, organized, and sanitized.

Postings and guidelines identifying required hygienic practices including the Social Distancing Guidelines and COVID-19 Workplace Mitigation Guidelines listed above shall be posted in areas visible to all workers.

**The designated COVID-19 Supervisor and Alternate Supervisor are:**

|  |  |  |
| --- | --- | --- |
| **Role** | **Name** | **Phone** |
| **COVID-19 Supervisor:** |  |  |
| **Alternate COVID-19 Supervisor:** |  |  |
|  |  |  |
|  |  |  |
|  |  |  |
|  |  |  |

# Evaluation of Employee Health Status

If implementing in-person health checks, conduct them safely and respectfully. Employers may use social distancing, barrier or partition controls (preferred), or personal protective equipment (PPE) to protect the screener.

Complete health checks in a way that helps maintain social distancing guidelines, such as providing multiple screening entries into the building.

To prevent stigma and discrimination in the workplace, employee health screenings should be performed as privately as possible and be sure to maintain confidentiality of each individual’s medical status and history.

Prior to reporting to work each day, employees must perform the following health status evaluation.

* Do you currently have, or within the last twenty-four (24) hours have you had any signs or symptoms of infection to COVID-19 such as: fever or chills, cough, shortness of breath or difficulty breathing, fatigue, muscle or body aches, headache, new loss of taste or smell, nasal congestion or runny nose, nausea or vomiting, or diarrhea?
* In the past fourteen (14) days have you tested positive for COVID-19 infection?
* Are you currently awaiting the results of a COVID-19 test?
* Have you been in direct contact with someone known to have the novel COVID-19 (Corona) virus infection?
* Within the past fourteen (14) days, have you returned from international travel or from an area considered to be of widespread concern for corona virus according to the CDC?

Employees answering YES to any of the above questions are denied access to the work site/facility and shall report their health status to their supervisor immediately.

**If temperature check protocols are implemented, delete this box, and remove the green highlighting.**

**If not, delete the green-highlighted text.**

**(delete this box)**

Under certain circumstances temperature check protocols may also be advised.

In addition to the health assessment questions, COMPANYNAME is also implementing temperature check protocols. Employee body temperature should be checked using a ‘no-touch’ thermometer. If a ‘no-touch’ thermometer is unavailable another thermometer can be used but must be sanitized between uses. When using a thermometer that requires close proximity or contact, facemasks or improvised face coverings must be worn. The person taking the temperature should also wear latex or medical gloves and discard the gloves between contacts and after use.

Follow sanitizing procedures included in the thermometer operating manual. Temperatures can be taken by any person trained and familiar with its use.

An elevated temperature (temperature above 100.4° F [38° C]) indicates the presence of a fever and may be an indication of COVID-19 infection. This may warrant additional assessment including clearance from a medical professional to report to work. Access to the work site/facility is denied and your health status must be reported to your supervisor immediately.

**Reminder:** A normal temperature reading is not a confirmation that the subject is disease free, only that they are not currently experiencing fever. An infected person may be symptom free and still be a carrier/spreader of the disease. Report elevated temperature to your supervisor.

The CDC requirements must be covered in each daily safety briefing prior to the start of the shift. These topics should include social-distancing, hand-sanitizing, identifying symptoms of COVID-19, and the control measures identified for site-specific plans. See the COVID-19 Workplace Mitigation Guidelines at the end of the exposure control plan.

# Implementing Hazard Control Measures

Measures will be implemented to reduce and/or eliminate the dangers associated with COVID-19. This plan will be reevaluated on an on-going basis to ensure all applicable requirements can effectively and consistently be implemented. CDC requirements will be covered in each daily safety briefing prior to the start of the shift. These topics should include social-distancing, hand-sanitizing, identifying symptoms of COVID-19, and the control measures identified for site-specific plans. See the COVID-19 Workplace Mitigation Guidelines at the end of the exposure control plan.

## Suspected or Confirmed COVID-19 Infection

In the event an employee at work reports that they believe they are experiencing symptoms of COVID-19 infection the following steps should be taken.

* Provide the employee with a mask or face covering to reduce droplet spread when talking or coughing. Employees assisting the infected employee should be kept to a minimum and must also wear face masks to reduce risk of infection.
* Maintain minimum 6-foot distance between infected employee and others. Minimize employee interaction only to those employees necessary to process the employee out of the work area and to a safe area for evaluation.
* Evaluate the employee to determine whether emergency services need to be called.

The following signs and symptoms are indicative of a serious infection. **Immediate Medical Attention** should be requested for anyone experiencing these signs and symptoms:

* + - Difficulty breathing or shortness of breath in severe cases
		- Persistent pain or pressure in the chest
		- New confusion or inability to arouse
		- Bluish lips or face due to breathing difficulty

**Call emergency medical services (911) for any medical emergency:** When calling, notify the operator that the emergency may be COVID-19 related. Have the patient don a facemask or face covering before medical help arrives.

* Make note of employee information, date and time of day, and area in which the employee was working.
* When information is obtained, the employee may be released to return home. If necessary, assist the employee to their vehicle or in obtaining transportation. In no case should the employee be allowed to drive if in obvious distress. If employee is in medical distress, call emergency services. If the employee is showing signs of anxiety or other psychological distress, arrangements should be made for alternative transport. A household member is recommended for this task.
* Advise the employee to seek medical attention for medical evaluation and treatment and provide them with the CDC Guidelines for COVID-19 Infection guidance document informing them of the actions they should take until they are free of symptoms of infection.
* Identify all employees in the area who were working in close proximity (less than six feet) to the infected employee and record their names for future monitoring. Inform them of their possible exposure and review the signs and symptoms of COVID-19 infection with them. Advise them to seek medical advice and testing to rule out infection.
* Stop work in the area in which the infected employee was working until the area can be sanitized. In most cases the virus will die within seventy-two (72) hours but sanitizing measures should still be exercised, especially on commonly touched surfaces. Special attention should be focused on the tools, equipment, controls, etc. that the employee was using or was likely to have used.
* The affected area should be secured and isolated to restrict access to cleaning personnel and informed and protected workers who require access to secure and shut down the area. Signage, barrier tape, and secured access points can be used to identify and control the area.

## Sanitizing the Work Area After Possible Exposure

In the event a worker has been confirmed to be COVID-19 positive the work area will need to be sanitized to prevent spread of the disease.

Current CDC guidelines indicate that if it has been more than seven (7) days since the person with suspected/confirmed COVID-19 visited or used the facility, additional cleaning and disinfection is not necessary.

For facilities that do not house people overnight, areas visited by the infected person(s) should be closed off and ventilated by opening outside doors and windows and using ventilation fans. Wait twenty-four (24) hours or as long as practical before beginning the cleaning/disinfection process.

Cleaning staff or an outside cleaning service should clean and disinfect all common areas that may have been used by the infected person including offices, restrooms, breakrooms, elevators and stairways, etc.

Special attention should be placed on shared equipment such as phones, keyboards and computer controls, tablets, touch screens, remote controls, and other items known or likely to have been used by the infected person.

Dirty surfaces should be cleaned with soap and water prior to disinfection.

For specific steps and PPE recommendations for cleaning personnel, see the CDC guidance at https://www.cdc.gov/coronavirus/2019-ncov/community/organizations/cleaning-disinfection.html

## Return to Work / Discontinuing Home Isolation

**For Workers Who Experience Symptoms**

The CDC has established the following strategy for determining eligibility for discontinuing isolation when the worker HAS experienced symptoms of infection with COVID-19. Workers infected with COVID-19 or who take time off work because they believe they are infected may return to work after the following criteria are met:

**Workers who have tested positive for COVID-19**

Regardless of vaccination and symptomatic status, quarantine or self-isolation may be discontinued ONLY if:

* At least five (5) days have passed since symptoms first appeared; AND
* No fever (body temperature consistently below 100° F [37.8° C]) for at least twenty-four (24) hours (one [1] full day) without the use of fever-reducing medicines; AND
* Other symptoms have improved (for example, coughing or shortness of breath has ceased)

Upon return to work, wear a mask when around others for five (5) additional days

**For workers who were exposed to a COVID-19 infected person:**

Quarantine or self-isolation may be discontinued depending on vaccination status:

**For those who have:**

* Completed the primary series of Pfizer or Moderna vaccine within the last six (6) months; OR
* Completed the primary series of J&J vaccine within the last two (2) months; OR
* Received either series and have been boosted, then the following measures apply:
* Quarantine is not required
* Wear a mask around others for ten (10) days.
* Test on day five (5), if possible.

If you develop symptoms get tested and stay home until the test confirms the symptoms are not COVID-related.

**For those who have:**

* Completed the primary series of Pfizer or Moderna vaccine more than six (6) months ago and are not boosted; OR
* Completed the primary series of J&J vaccine more than two (2) months ago and are not boosted; OR
* Are unvaccinated, then the following measures apply:
	+ Stay home for five (5) days. Afterwards, continue to wear a mask around others for five (5) additional days.
	+ If you cannot quarantine you must wear a mask for ten (10) days.
	+ Test on day five (5) if possible.

If you develop symptoms get tested and stay home until the test confirms the symptoms are not COVID-related.

After Stopping Quarantine

* Watch for symptoms for at least fourteen (14) days after the last exposure
* Follow COVID-19 protocols including wearing a mask, maintaining social distancing, frequently washing hands, avoiding crowds, and taking other steps to prevent further spread of the disease.

**NOTE:** Because of the absence of symptoms, it is not possible to gauge where these individuals are in the course of their illness. There have been reports of prolonged detection of RNA without direct correlation to viral culture.

The CDC recommends five (5) days of quarantine AFTER EXPOSURE based on the time it takes to develop illness (including symptoms) if infected, and science demonstrating that the majority of SARS-CoV-2 transmission occurs early in the course of illness, generally in the one to two days prior to onset of symptoms and the two to three days after.

Workers may also return to work if they can provide certification by a physician or licensed health care professional that the worker is free from infection and able to return to work.

In all cases, **follow the guidance of your healthcare provider and local health department.**

# Medical Information

## Requests for Medical Information and/or Documentation

If you are out sick due to possible or confirmed COVID-19 infection for more than three (3) days, it may become necessary to request information from you and/or your health care provider. In general, we would request medical information to confirm your need to be absent, to show whether and how an absence relates to the infection and to know when it is appropriate for you to return to work. As always, we expect and appreciate your cooperation when medical information is sought.

## Confidentiality of Medical Information

Our policy is to treat any medical information as a confidential medical record. In furtherance of this policy any disclosure of medical information is in limited circumstances with supervisors, managers, first aid and safety personnel and government officials as required by law.

# Recordkeeping

Under OSHA’s recordkeeping requirements, COVID-19 is a recordable illness, and employers are responsible for recording cases of COVID-19, if:

* The case is confirmed as a COVID-19 illness; AND
* The case is work-related; AND
* The case involves one or more of the general recording criteria in 29 CFR 1904.7, such as medical treatment beyond first-aid, or days away from work.

## Determining Work Relatedness

Employers, especially small employers, are not expected to undertake extensive medical inquiries, given employee privacy concerns and most employers' lack of expertise in this area. They are however required to make a good faith effort in determining whether the illness is work-related.

Upon learning of an employee's COVID-19 illness, the employer may:

1. Ask the employee how they believe they contracted the COVID-19 illness;
2. While respecting employee privacy, discuss with the employee their work and out-of-work activities that may have led to the COVID-19 illness; and
3. Review the employee's work environment for potential COVID-19 exposure. The review should be informed by any other instances of workers in that environment contracting COVID-19 illness.
* COVID-19 illnesses are likely work-related when several cases develop among workers who work closely together and there is no alternative explanation.
* An employee's COVID-19 illness is likely work-related if it is contracted shortly after lengthy, close exposure to a particular customer or coworker who has a confirmed case of COVID-19 and there is no alternative explanation.
* An employee's COVID-19 illness is likely work-related if their job duties include having frequent, close exposure to the general public in a locality with ongoing community transmission and there is no alternative explanation.
* An employee's COVID-19 illness is likely NOT work-related if they are the only worker to contract COVID-19 in their vicinity and their job duties do not include having frequent contact with the general public, regardless of the rate of community spread.
* An employee's COVID-19 illness is likely NOT work-related if they, outside the workplace, closely and frequently associate with someone (e.g., a family member, significant other, or close friend) who:
* has COVID-19;
* is not a coworker; and
* exposes the employee during the period in which the individual is likely infectious.

The employer should give due weight to any evidence of causation, pertaining to the employee illness, at issue provided by medical providers, public health authorities, or the employee herself.

## Reporting the Illness

Where the determination is made that the COVID-19 infection is work-related and the case results in a fatality or hospitalization for treatment, the illness must be reported to OSHA using one of the following reporting methods:

* Online at: https://www.osha.gov/pls/ser/serform.html
* Calling OSHA's free and confidential number at 1-800-321-OSHA (6742).
* Calling your closest Area Office during normal business hours.

**NOTE:** Employers with ten (10) or fewer employees and certain employers in low-hazard industries need only report work-related COVID-19 illnesses that result in a fatality, or in-patient hospitalization.

For a list of partially exempt industries identify your North American Industry Classification System (NAICS) code and check the list available at: https://www.osha.gov/recordkeeping/ppt1/RK1exempttable.html

Employers should also report workplace outbreaks to their local and state health departments as required to support contact tracing efforts.

A work-related confirmed case of COVID-19 that triggers any of OSHA’s recordkeeping requirements will need to be recorded on the OSHA 300 log just as any other work-related illness.

# Training

COMPANYNAME understands the importance of providing a safe and healthful work environment. This is done only through the building of a positive culture of safe work practices.

It is understood that this type of culture must be visible from the beginning of a workers’ experience with the organization. Therefore, COMPANYNAME will engage its employees and sub-contractors in training to the COVID-19 Exposure Control Plan. The training serves to familiarize all employees to the organization, its culture, and its programs and practices as they relate to everyone’s safety.

All employees must be trained on this COVID-19 Exposure Control Program using accessible formats and in a language they understand. Managers must be trained on how to implement COVID-19 policies established in this program.

Training should be directed at employees, contractors, and any other individuals on site, as appropriate, and should include:

* Basic facts about COVID-19, including how it is spread and the importance of physical distancing (including remote work), ventilation, vaccination, use of face coverings, and hand hygiene.
* Workplace policies and procedures implemented to protect workers from COVID-19 hazards.

In addition, ensure that workers understand their rights to a safe and healthful work environment, whom to contact with questions or concerns about workplace safety and health, and their right to raise workplace safety and health concerns free from retaliation. This information should also be provided in a language that workers understand. Ensure supervisors are familiar with workplace flexibilities and other human resources policies and procedures.

Please pay attention to posted Operations and Workplace Safety Regulations. Using the Exposure Control Plan Training Checklist, employees will mark off each item as understood once that topic is discussed. If you have any questions or concerns, please discuss them with the COMPANYNAME representative.

Once you have completed the training, sign and date the Exposure Control Plan Checklist and submit the form to the COMPANYNAME representative.

Social Distancing Guidelines

COMPANYNAME has implemented the social distancing guidelines found below to minimize the spread of the disease among the staff. Determination of social distancing requirements has been made in accordance with CDC Guidance and federal, state, and local requirements. These guidelines will remain in effect until rescinded by COMPANYNAME.

**Work Activities**

During the workday, employees are requested to:

1. Avoid meeting face-to-face. Employees are encouraged to use the telephone, online conferencing, email, or instant messaging to conduct business as much as possible even when participants are in the same building.
2. Preclude gatherings and whenever two or more people must meet, ensure a minimum six (6) foot separation. If face-to-face meetings are unavoidable minimize the meeting time, choose a large meeting room, and sit at least three (3) feet from each other if possible. Avoid person-to-person contact such as shaking hands.
3. Avoid any unnecessary travel and cancel or postpone nonessential meetings, gatherings, workshops, and training sessions.
4. Stagger work activity, shift changes, and break times as necessary to reduce density and maintain a minimum six (6) foot separation.
5. Do not congregate in the break room or any other areas where people socialize.
6. Bring your lunch and eat at your desk or away from others (avoid lunchrooms and crowded restaurants).
7. Encourage members and others to request information via phone and e-mail in order to minimize person-to-person contact. Have materials and information ready for fast pick-up or delivery.
8. Using other workers’ phones, desks, oﬃces, tools, and equipment is highly discouraged. If necessary, clean and disinfect them before and after use.
9. Anyone with a family member at home infected with COVID-19 must inform the COVID-19 Supervisor.

**Outside Activities**

Employees are encouraged to adhere to the following guidelines to the extent possible when engaging in all outside activities:

1. Avoid public transportation (train, bus, taxi) and walk, cycle, or drive your own car. If the use of public transportation is required, consider beginning your commute early or late to avoid rush-hour crowding.
2. Avoid recreational or other leisure classes, meetings, activities, etc., where employees might meet people contagious with the infectious disease. When out in public consider covering your mouth and nose with a mask.

**Employee Reporting of Confirmed Exposure**

If an employee of COMPANYNAME tests positive for the COVID-19 virus, have been exposed to a known case of COVID-19, have traveled to or through a country the CDC has recommended not visiting, or they have been in contact with someone from another contractor or supplier who thinks they may have COVID-19 **they will follow current CDC Guidelines for isolation**.

Following ADA requirements for patient confidentiality, COMPANYNAME will report this potential exposure to any site contact and other trades that may have been in contact with the employee.

COVID-19 Workplace Mitigation Guidelines

COMPANYNAME has implemented the following measures to reduce and/or eliminate the dangers associated with infectious disease. This plan will be reevaluated on an on-going basis to ensure all applicable requirements can effectively and consistently be implemented. CDC requirements will be covered in each daily safety briefing prior to the start of the shift. These topics should include social-distancing, hand-sanitizing, identifying signs and symptoms of the disease, and the items identified for site-specific plans.

**Hygiene – Best practices**

* Avoid touching face, mouth, nose, or eyes with unwashed hands or with gloves.
* Routinely wash your hands with soap and water for at least twenty (20) seconds. If soap and water are unavailable use a hand sanitizer having at least 60% alcohol content.
* Refrain from shaking hands - use other non-contact methods of greeting.
* Wear gloves appropriate for your job tasks to reduce skin contact exposure.
* Routinely disinfect frequently touched surfaces such as: telephones, guard and handrails, machines and machine controls, shared tools, elevator control buttons, tables, doorknobs, light switches, countertops, desks, keyboards, toilets, faucets, sinks, handles, and hand tools etc.
* Cover coughs and sneezes using the inside of your elbow rather than your hand.
* Avoid phone to face contact.
* Increase ventilation by opening windows or adjusting air conditioning.

**Meetings and Travel**

* Practice social distancing. Maintain a minimum six (6) foot distance from others.
* Use phones or other electronic methods such as video chat to meet rather than engaging in face-to-face conversations.
* Avoid sitting in close proximity to others. Keep a minimum of six (6) feet distance from others as much as possible.
* Use a handkerchief or tissue when coughing, sneezing, or blowing your nose. Then wash your hands with soap and water for at least twenty (20) seconds. If soap and water are unavailable use a hand sanitizer having at least 60% alcohol content.
* Avoid close contact with people who are sick or are displaying signs and/or symptoms of illness.
* Take responsibility for yourself, your work area, and your co-workers as much as achievable.
* Where workers are forced to stand together in ‘choke points’ and high-risk areas such as in hallways, hoists and elevators, break areas, and buses; they must maintain social distancing.
* Minimize interactions when picking up or delivering equipment or materials, maintaining a minimum six (6) foot separation.
* When six (6) feet of separation cannot be maintained other mitigation practices should be used i.e., requiring all workers to use face coverings.

**Food Handling**

Handle food carefully:

* Wash hands before eating food.
* Limit food sharing.
* Prepare meals at home for consumption.
* Eat separately, maintain social distancing of at least six (6) feet from others rather than congregating in groups, and stagger break times to minimize worker exposure potential.

**Illness**

Stay home if…

* you are feeling ill
* you have an ill family member in your home

Visitor Access Authorization Form

Access to the work area is restricted to essential employees. Essential employees are defined as employees performing duties essential to the safe and efficient performance of operations including (but not limited to) those listed below.

In order to maintain safe and efficient operations, access will be granted to the following persons.

(check all that apply)

|  |  |
| --- | --- |
| ❑ | Company employees and sub-contractor/vendor employees engaged in activities essential to the performance of operations.  |
| ❑ | Transport personnel delivering tools, equipment, and materials essential for continued operation including fuel delivery services necessary to keep equipment running. |
| ❑ | Transport personnel removing waste, surplus materials, non-essential equipment |
|  | Support Personnel Including: |
|  | ❑ | Technicians performing emergency service, maintenance, or repair essential to resume or maintain continued operation. Equipment service and maintenance not essential at the time of the visit should be deferred until after the epidemic/pandemic event unless doing so would lead to an equipment failure or an unsafe condition. |
|  | ❑ | Consultant services for the purpose of maintaining safe operations including safety program development, site safety surveys, job hazard analysis, PPE hazard assessments, and other services intended to promote and maintain employee safety. |
|  | ❑ | Inspectors requiring access to inspect and approve work prior to proceeding to the next phase of operation. Other inspectors requiring access may include safety inspectors and investigators, health inspectors, building inspectors, etc. |
|  | ❑ |  |
| ❑ | Training personnel to provide on-site training for new equipment, hazardous work activities, non-routine tasks, etc. necessary for safe production. |
| ❑ | Utility services such as electric, water, gas, utility locate services, etc. to secure distribution systems for safe operations. |
| ❑ | Emergency services personnel. |
| ❑ |  |

Authorization:

 (name) (signature)

 Date: Time:

COVID-19 Employee Health Status Evaluation

Prior to reporting to work each day, employees must perform the following health status evaluation.

|  |  |  |
| --- | --- | --- |
|  | **YES** | **NO** |
| Do you currently have, or within the last twenty-four (24) hours have you had any signs or symptoms of infection to COVID-19 such as:* Fever or chills
* Cough

**If temperature check protocols are implemented, delete this box, and remove the green highlighting.****If not, delete the green-highlighted text.****(delete this box)*** Shortness of breath or difficulty breathing
* Fatigue
* Muscle or body aches
* Headache
* New loss of taste or smell
* Sore throat
* Nasal congestion or runny nose
* Nausea or vomiting; or
* Diarrhea
 | ❑ | ❑ |
| In the past fourteen (14) days have you tested positive for COVID-19 infection? | ❑ | ❑ |
| Are you currently awaiting the results of a COVID-19 test? | ❑ | ❑ |
| Have you been in direct contact with someone known to have the COVID-19 virus infection? | ❑ | ❑ |
| Within the past fourteen (14) days, have you returned from international travel or from an area considered to be of widespread concern for COVID-19 according to the CDC? | ❑ | ❑ |
| **Temperature check** (If applicable)**Reminder:** A normal temperature reading is not a confirmation that the subject is disease free, only that they are not currently experiencing fever. An infected person may be symptom free and still be a carrier/spreader of the disease. Report elevated temperature to your supervisor. |  ° **F / C** |

Employees answering YES to any of the above questions are denied access to the work site/facility and shall report their health status to their supervisor immediately.

If temperature check protocols are in effect, a temperature reading of 100.4° F (38° C) or above indicates the presence of fever and possible infection to COVID-19. Access to the work site/facility is denied and your health status must be reported to your supervisor immediately.

Individual seeking access:

 (name) (signature)

 Date: Time: AM/PM

Checklist for Assisting Infected Employee – COVID-19

In the event an employee at work reports that they believe they are experiencing symptoms of COVID-19 infection the following steps should be taken.

|  |  |
| --- | --- |
| ❑ | Provide the employee with a mask or face covering to reduce droplet spread when talking or coughing. Employees assisting the infected employee should be kept to a minimum and must also wear face masks to reduce risk of infection. |
| ❑ | Maintain minimum 6-foot distance between infected employee and others. Minimize worker interaction only to those employees necessary to process the employee out of the work area and to a safe area for evaluation. |
| ❑ | Evaluate the employee to determine whether emergency services need to be called. The following signs and symptoms are indicative of a serious infection. **Immediate Medical Attention** should be requested for anyone experiencing these signs and symptoms: * Difficulty breathing or shortness of breath in severe cases
* Persistent pain or pressure in the chest
* New confusion or inability to arouse
* Bluish lips or face due to breathing difficulty

**Call emergency medical services (911) for any medical emergency:** When calling, notify the operator that the emergency may be COVID-19 related. Have the patient don a facemask or face covering before medical help arrives. |
| ❑ | Make note of employee information, date and time of day, and area in which the employee was working.Employee Name: Date: Time: AM/PM Work Area:  |
| ❑ | When information is obtained, the employee may be released to return home. If necessary, assist the employee to their vehicle or in obtaining transportation. In no case should the employee be allowed to drive if in obvious distress. If employee is in medical distress, call emergency services. If the employee is showing signs of anxiety or other psychological distress, arrangements should be made for a family member to pick them up. |
| ❑ | Advise the employee to seek medical attention for medical evaluation and treatment and provide them with the CDC Guidelines for COVID-19 Infection guidance document informing them of the actions they should take until they are free of symptoms of infection. |
| ❑ | Identify all employees in the area who were working in close proximity (less than six feet) to the infected employee and record their names for future monitoring. Inform them of their possible exposure and review the signs and symptoms of COVID-19 infection with them. Advise them to seek medical advice and testing to rule out infection. (attach additional sheets if necessary)**Affected Employees:**Name: Name: Name: Name: Name: Name:  |
| ❑ | Stop work in the area in which the infected employee was working until the area can be sanitized. In most cases the virus will die within seventy-two (72) hours but sanitizing measures should still be exercised, especially on commonly touched surfaces. Special attention should be focused on the tools, equipment, controls, etc. that the employee was using or was likely to have used. |

CDC Guidelines for COVID-19 Infection

**Provide to the employee being sent home due to possible infection by COVID-19**

**If you are sick with COVID-19, or suspect you are infected with the virus that causes COVID-19, follow the steps below to help prevent the disease from spreading to people in your home and community.**

The CDC recommends the following actions for those who are infected or suspect they are infected with COVID-19. These steps can promote healing and protect others in your home and community from exposure.

* **Stay home:**
	+ Most people with COVID-19 experience mild illness and are able to recover at home without medical care.
	+ Do not leave your home, except to get medical care.
	+ Do not visit public areas.
* **Stay in touch with your doctor:**
	+ Call before you get medical care.
	+ Be sure to get care if you have trouble breathing, or have any other emergency warning signs, or if you think it is an emergency.
* **Avoid public transportation:** Avoid using public transportation, ride-sharing, or taxis.
* **Stay away from others:**
	+ As much as possible, separate yourself from other people in your home; this is known as home isolation.
	+ You should stay in a specific “sick room” if possible, and away from other people in your home.
	+ Use a separate bathroom, if available.
	+ When six (6) feet of separation cannot be maintained, other mitigation practices should be used such as wearing face coverings or masks.

**Stay home except to get medical care**

Restrict activities outside your home, except for getting medical care. Do not go to work, school, or public areas. Avoid using public transportation, ride-sharing, or taxis.

**Monitor your symptoms**

Seek prompt medical attention if your illness is worsening (e.g., difficulty breathing). **Before** seeking care, call your healthcare provider and advise them you are, or suspect you may be infected with COVID-19. Put on a facemask before you enter the facility. These steps will help the healthcare provider’s office keep other people in the office or waiting room from getting infected or exposed.

Ask your healthcare provider to call the local or state health department. Persons who are placed under active monitoring or facilitated self-monitoring should follow instructions provided by their local health department or occupational health professionals, as appropriate.

If you have a medical emergency and need to call emergency medical service (911), notify the dispatch personnel that you have, or are being evaluated for COVID-19. If possible, put on a facemask before emergency medical services arrive.

**Call ahead before visiting your doctor**

If you have a medical appointment, call your healthcare provider, and inform them you have or may have COVID-19. This will help the healthcare provider’s office take steps to keep other people from getting infected or exposed.

**Separate yourself from other people and animals in your home**

* **People:** As much as possible, you should stay in a specific room and away from other people in your home. Also, you should use a separate bathroom if available.
* **Animals:** Do not handle pets or other animals while sick.

**Wear a facemask**

Wear a facemask when you are around other people or pets and before you enter a healthcare provider’s office. If you are unable to wear a facemask (for example, because it causes trouble breathing), then people who live with you should not stay in the same room with you, or they should wear a facemask if they enter your room.

**Clean your hands often**

Wash your hands frequently with soap and water for at least 20 seconds. Avoid touching your eyes, nose, and mouth with unwashed hands.

**Cover coughs and sneezes**

Cover your mouth and nose with a tissue when you cough or sneeze. Throw used tissues in a lined trash can; immediately wash your hands with soap and water for at least 20 seconds or clean your hands with an alcohol-based hand sanitizer that contains at least 60-95% alcohol.

**Avoid sharing personal household items**

Do not share dishes, drinking glasses, cups, eating utensils, towels, or bedding with other people or pets in your home. After using these items, they should be washed thoroughly with soap and water.

**Clean all “high-touch” surfaces every day**

High-touch surfaces include counters, tabletops, doorknobs, bathroom fixtures, toilets, phones, keyboards, tablets, and bedside tables. Also, clean any surfaces that may have blood, stool, or body fluids on them. Use a household cleaning spray or wipe, following label instructions. Labels contain instructions for safe and effective use of the cleaning product including precautions you should take when applying the product, such as wearing gloves and making sure you have good ventilation during use of the product.

**Discontinuing home isolation**

Patients with confirmed COVID-19 should remain under home isolation precautions until the risk of secondary transmission to others is thought to be low. The decision to discontinue home isolation precautions should be made on a case-by-case basis, in consultation with healthcare providers and state and local health departments.

Pautas del CDC para la Infección por el COVID-19

**Se proporcionará al empleado que se envía a casa debido a una posible infección por el COVID-19.**

**Si está enfermo con el COVID-19 o sospecha que está infectado con el virus que causa el COVID-19, siga los pasos a continuación para ayudarlo a prevenir que la enfermedad se propague a las personas en su hogar y la comunidad.**

El CDC recomienda las siguientes acciones para quienes están infectados o sospechan que están infectados con el COVID-19. Estos pasos pueden promover la recuperación y proteger a otros en su hogar y comunidad de la exposición.

* **Quédese en casa:**
	+ La mayoría de las personas que tienen el COVID-19 experimentan enfermedades leves y pueden recuperarse en casa sin atención médica.
	+ No salga de su hogar, excepto para recibir la atención médica
	+ No visite áreas públicas
* **Mantengase en contacto con su doctor:**
	+ Llame antes de recibir la atención médica.
	+ Asegúrese de recibir atención si tiene problemas para respirar, o si tiene otras señales que advierten por una emergencia, o si cree que es una emergencia.
* **Evite el Transporte Público:** Evite el uso de transporte público, viajes compartidos o taxis.
* **Manténgase Alejado de los Demás:**
	+ En la medida de lo posible, separarse de otras personas en su hogar, esto se conoce como aislamiento del hogar.
	+ Debe permanecer en una específica "habitación para enfermos", si es posible, y lejos de las otras personas en su hogar.
	+ Cuando no se pueden mantener los seis (6) pies de separación, se deben usar otras prácticas de mitigación, es decir, exigir que todos los empleados usen coberturas faciales.

**Quedarse en Casa excepto para recibir Atención Médica**

Restrinja las actividades fuera de su hogar, excepto para obtener la atención médica. No vaya al trabajo, la escuela o las áreas públicas. Evite el uso de transporte público, viajes compartidos o taxis.

**Controle sus Sintomas**

Busque la atención médica inmediata si su enfermedad está empeorando (por ejemplo, dificultad para respirar). **Antes** de buscar el cuidado, llame a su proveedor de atención médica e infórmele que está, o sospeche que puede estar infectado con el COVID-19. Póngase una máscara facial antes de ingresar a las instalaciones. Estos pasos lo ayudarán a que el consultorio del proveedor de atención médica evite que otras personas en la oficina o en la sala de espera se infecten o se expongan.

Pídale a su proveedor de atención médica que llame al departamento de salud local o estatal. Las personas que se someten a el monitoreo activo o autocontrol facilitado deben seguir las instrucciones proporcionadas por su departamento de salud local o profesionales de salud ocupacional, según corresponda.

Si tiene una emergencia médica y necesita llamar al 911, notifique al personal de despacho que tiene o está siendo evaluado por el COVID-19. Si es posible, póngase una mascarilla antes de que lleguen los servicios médicos de emergencia.

**Llame con anticipación antes de visitar a su médico.**

Si tiene una cita médica, llame a su proveedor de atención médica e infórmeles que tiene o puede tener el COVID-19. Esto ayudará a que el consultorio del proveedor de atención médica tome medidas para evitar que otras personas se infecten o se expongan.

**Separarse de otras personas y animales en su hogar**

* **Las Personas**: En la medida de lo posible, debe permanecer en una habitación específica y lejos de otras personas en su hogar. Además, debe usar un baño separado, si está disponible.
* **Los Animales**: no manipule mascotas u otros animales mientras esté enfermo.

**Use una máscara facial**

Use una máscara facial cuando esté cerca de otras personas o mascotas y antes de ingresar al consultorio de un proveedor de atención médica. Si no puede usar una máscara facial (por ejemplo, porque causa problemas para respirar), las personas que viven con usted no deben permanecer en la misma habitación que usted, o deben usar una máscara facial si entran en su habitación.

**Limpie sus manos con frecuencia**

Lávese las manos con frecuencia con agua y jabón durante al menos 20 segundos. Evite tocarse los ojos, la nariz y la boca con las manos sin lavar.

**Cúbrase la tos y los estornudos**

Cúbrase la boca y la nariz con un pañuelo cuando tosa o estornude. Tire los pañuelos usados en un bote de basura forrado; lávese inmediatamente las manos con agua y jabón durante al menos 20 segundos o lávese las manos con un desinfectante para manos a base de alcohol que contenga al menos 60-95% de alcohol.

**Evite compartir artículos personales del hogar**

No comparta platos, vasos para beber, tazas, utensilios para comer, toallas o ropa de cama con otras personas o mascotas en su hogar. Después de usar estos artículos, se deben lavar a fondo con agua y jabón.

**Limpie todas las superficies de "alto contacto" todos los días**

Las superficies de alto contacto incluyen mostradores, mesas, manijas de las puertas, accesorios de baño, inodoros, teléfonos, teclados, tabletas y mesitas de noche. Además, limpie cualquier superficie que pueda tener sangre, heces o líquidos corporales. Use un aerosol o toallita de limpieza doméstica, siguiendo las instrucciones de la etiqueta. Las etiquetas contienen instrucciones para el uso seguro y efectivo del producto de limpieza, incluidas las precauciones que debe tomar al aplicar el producto, como usar guantes y asegurarse de tener una buena ventilación durante el uso del producto.

**Descontinuar el aislamiento del hogar**

Los pacientes con el COVID-19 confirmado deben permanecer bajo precauciones de aislamiento en el hogar hasta que se considere que el riesgo de transmisión secundaria a otros es bajo. La decisión de suspender las precauciones de aislamiento en el hogar debe tomarse caso por caso, en consulta con los proveedores de atención médica y los departamentos de salud estatales y locales.

COVID-19 Exposure Control Plan Training Checklist

|  |  |  |  |
| --- | --- | --- | --- |
| **Name:** |  | **Date:** |  |
| **Company:** |  | **Foreman/Supervisor** |  |
| **This checklist is to certify that I have reviewed or had the following items discussed with me, and that I understand the requirements of the Exposure Control Plan.** |
|  | **Item** | **YES** | **NO** |
| **1** | **Implementation of Exposure Control Plan** | ❑ | ❑ |
| **2** | **Signs and Symptoms of COVID-19 Infection** | ❑ | ❑ |
| **3** | **Action Steps** |
|  | Staying Home When Ill | ❑ | ❑ |
|  | Seeking Medical Attention | ❑ | ❑ |
|  | Home Isolation | ❑ | ❑ |
|  | CDC Guidelines | ❑ | ❑ |
| **4** | **Limiting the Spread of Infection in the Workplace** |
|  | Hazard Assessment | ❑ | ❑ |
|  | Ventilation | ❑ | ❑ |
|  | Social Distancing | ❑ | ❑ |
|  | Visitors | ❑ | ❑ |
|  | Limiting Travel and Telecommuting | ❑ | ❑ |
| **5** | **Reducing Transmission Among Employees** |
|  | Hygiene | ❑ | ❑ |
|  | Hand Sanitation | ❑ | ❑ |
|  | Cross-contamination | ❑ | ❑ |
|  | Cleaning and Disinfecting | ❑ | ❑ |
| **6** | **Protecting Employees with PPE** |
|  | Respirator Masks and Voluntary Use of Respirator Masks | ❑ | ❑ |
|  | Improvised Face Coverings | ❑ | ❑ |
|  | Barrier Device Usage | ❑ | ❑ |
| **7** | **Supervision of Protective Measures (COVID-19 Supervisor)** | ❑ | ❑ |
| **8** | **Evaluation of Employee Health Status** | ❑ | ❑ |
| **9** | **Implementing Hazard Control Measures** |
|  | Suspected or Confirmed COVID-19 Infection | ❑ | ❑ |
|  | Sanitizing the Work Area After Possible Exposure | ❑ | ❑ |
|  | Return to Work | ❑ | ❑ |
| **10** | **Medical Information** |
|  | Requests for Medical Information and/or Documentation | ❑ | ❑ |
|  | Confidentiality of Medical Information | ❑ | ❑ |

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|  |  |  |  |
| --- | --- | --- | --- |
| **11** | **Recordkeeping** | ❑ | ❑ |
| **12** | **Training** | ❑ | ❑ |
| **13** | **Forms and Handouts** | ❑ | ❑ |

Employee Signature: Date:

COVID-19 Exposure Control Plan Supervisor Training Checklist

|  |  |  |  |
| --- | --- | --- | --- |
| **Name:** |  | **Date:** |  |
| **Company:** |  |
| **This checklist is to certify that I have reviewed or had the following items discussed with me and, that I understand the requirements of the Exposure Control Plan.** |
|  | **Item** | **YES** | **NO** |
| **1** | **Implementation of Exposure Control Plan** | ❑ | ❑ |
| **2** | **Signs and Symptoms of COVID-19 Infection** | ❑ | ❑ |
| **3** | **Action Steps** |
|  | Staying Home When Ill | ❑ | ❑ |
|  | Seeking Medical Attention | ❑ | ❑ |
|  | Home Isolation | ❑ | ❑ |
|  | CDC Guidelines | ❑ | ❑ |
| **4** | **Limiting the Spread of Infection in the Workplace** |
|  | Hazard Assessment | ❑ | ❑ |
|  | Ventilation | ❑ | ❑ |
|  | Social Distancing | ❑ | ❑ |
|  | Visitors | ❑ | ❑ |
|  | Limiting Travel and Telecommuting | ❑ | ❑ |
| **5** | **Reducing Transmission Among Employees** |
|  | Hygiene | ❑ | ❑ |
|  | Hand Sanitation | ❑ | ❑ |
|  | Cross-contamination | ❑ | ❑ |
|  | Cleaning and Disinfecting | ❑ | ❑ |
| **6** | **Protecting Employees with PPE** |
|  | Respirator Masks and Voluntary Use of Respirator Masks | ❑ | ❑ |
|  | Improvised Face Coverings | ❑ | ❑ |
|  | Barrier Device Usage | ❑ | ❑ |
| **7** | **Supervision of Protective Measures (COVID-19 Supervisor)** | ❑ | ❑ |
| **8** | **Evaluation of Employee Health Status** | ❑ | ❑ |
| **9** | **Implementing Hazard Control Measures** |
|  | Suspected or Confirmed COVID-19 Infection | ❑ | ❑ |
|  | Sanitizing the Work Area After Possible Exposure | ❑ | ❑ |
|  | Return to Work | ❑ | ❑ |
| **10** | **Medical Information** |
|  | Requests for Medical Information and/or Documentation | ❑ | ❑ |
|  | Confidentiality of Medical Information | ❑ | ❑ |

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| --- | --- | --- | --- |
| **11** | **Recordkeeping** | ❑ | ❑ |
| **12** | **Training** | ❑ | ❑ |
| **13** | **Forms and Handouts** | ❑ | ❑ |
| **14** | **COVID-19 Supervisor Responsibilities**  |
|  | Daily Attendance Log for Workers and Visitors  | ❑ | ❑ |
|  | COVID-19 Daily Supervisor Checklist  | ❑ | ❑ |
|  | Supplies, PPE, workers, and workplace (Review and Corrective Actions)  | ❑ | ❑ |

Supervisor Signature: Date:

COVID-19 Supervisor Inspection Checklist

This checklist is used to aid in ensuring the health and well-being of employees and availability of all listed applicable measures, and to identify measures not applicable for implementation. Continually monitor the CDC website for current data and changing conditions, recommendations, and requirements.

|  |  |  |  |
| --- | --- | --- | --- |
| **Name:** |  | **Date:** |  |
| **Company:** |  |
|  |
| ❑ | Copies of this Protocol have been distributed to all employees. |
| The Social Distancing Protocol must be posted at each public entrance to the facility and at all ‘choke points’ and high-risk areas such as hallways, elevators, break areas, etc. |
| **Signage must be posted at each entrance that informs all entrants that they must:** |
| ❑ | not enter the facility if they have a cough or fever; |
| ❑ | maintain a minimum six-foot distance from one another; |
| ❑ | sneeze and cough into a cloth or tissue, or if not available, into one’s elbow; |
| ❑ | not shake hands or engage in any unnecessary physical contact. |
| **Corrective Actions for Deficiencies:** |  |
| **Measures to Protect Employee Health (Facility)**  |
| ❑ | Everyone who can carry out their work duties from home has been directed to do so. |
| ❑ | All employees have been told not to come to work if sick. |
| ❑ | Symptom checks are being conducted before employees may enter the workspace. |
| ❑ | Work activities are separated by at least six (6) feet. |
| ❑ | Daily Attendance Log is being maintained. |
| ❑ | Break rooms, bathrooms, handles, desks, phones, switches, and other commonly touched surfaces are being disinfected frequently. |
| **Corrective Actions for Deficiencies:** |  |
| **The Following Guidelines are Being Followed by All Workers:**  |
| ❑ | Workers are routinely washing hands with soap and water and/or hand sanitizer. |
| ❑ | No handshaking – use other noncontact methods of greeting. |
| ❑ | Gloves and face coverings are being worn to reduce risk of infectious exposure as deemed appropriate for job tasks. |
| ❑ | Hand tools and work areas are routinely cleaned. |
| ❑ | Face touching is avoided. |
| ❑ | Workers are covering coughs and sneezes. |
| ❑ | Phone-to-face contact is avoided. |
| ❑ | Workers are asked daily if they are sick or have someone at home that is sick.If YES, steps outlined in the Exposure Control Plan are being followed. |
| ❑ | Ventilation is increased in work areas by opening windows or adjusting air conditioning. |
| **Corrective Actions for Deficiencies:** |  |

|  |
| --- |
| **Meetings and Work Areas - Measures to Prevent Crowds from Gathering**  |
| ❑ | Social distancing is maintained at a minimum six (6) foot distance from others. |
| ❑ | Phones or other electronic methods such as video chat are being utilized to communicate or conduct meetings rather than engaging in face-to-face conversations. |
| ❑ | Sitting and/or working in close proximity to others is being avoided. |
| ❑ | Close contact with people who are sick and/or showing symptoms are avoided. |
| ❑ | Worker density is limited where workers are forced to stand together in ‘choke points’ and high-risk areas such as in hallways, hoists and elevators, break areas, and buses. |
| ❑ | Interactions when picking up or delivering equipment or materials are minimized by maintaining a minimum six (6) foot separation. |
| **Corrective Actions for Deficiencies:** |  |
| **Food Handling** |
| ❑ | Employees are washing hands before eating food. |
| ❑ | Employees are not sharing food. |
| ❑ | Employees are eating separately and maintaining social distancing of at least six (6) feet from others rather than congregating in groups. |
| **Corrective Actions for Deficiencies:** |  |
| **Supplies** |
| Soap and water, hand sanitizer, disinfectant, and related supplies are available to all employees at the following location(s): |
| ❑ | Break rooms |
| ❑ | Restrooms |
| ❑ | Other:  |
| **Corrective Actions for Deficiencies:** |  |
| **Inventory of Available Supplies** |
| An adequate inventory of each item must be maintained for employee use. Monitor supply usage to identify replacement schedule. Any time an item gets low request replenishment supplies. |
| ❑ | Disinfectant spray and paper towels |
| ❑ | Disinfectant wipes |
| ❑ | Hand sanitizer |
| ❑ | Respirators, face masks, face coverings, face shields |
| ❑ | Gloves |
| **Corrective Actions for Deficiencies:** |  |

Supervisor Signature: Date:

Daily Attendance Log

|  |  |  |  |  |  |  |
| --- | --- | --- | --- | --- | --- | --- |
| **Date** | **Print Name** | **Signature** | **Company** | **Contact Information** | **Time In** | **Time Out** |
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