COVID-19
Prevention Plan
Assessments, Checklists & Protocols

ICE SAFETY SOLUTIONS
IN CASE OF EMERGENCY

Let's get you reopened

This document serves as a resource for organizations to use as they **implement, design and train employees on their COVID-19 Prevention Plan**. Businesses around the globe have been mandated by local, state and governmental orders to close for all but essential work. As restrictions start to be lifted from country to country, and state to state, organizations **are now required by the Occupational Health and Safety Board to have a COVID 19 Prevention plan as part of your Illness & Injury Prevention Plan or as a stand alone Plan.**

With many staff now accustomed to working from home, and with expected requirements to comply with social distancing, temperature screening, and wearing of face coverings in the workplace, they can be expected to have genuine concerns about the safety and sustainability of return to work. Management is now faced with some tough questions. When is the appropriate timeframe to open up the workplace and start bringing staff back on-site?

The purpose of this document is to help organizations define the strategy, process and protocols that can be used to **develop your COVID-19 Plan while safely re-opening** the workplace, recover the business and implement practices to **mitigate the spread of SARS-COV-2.**

Use the checklists in this plan to determine **how to build your plan**
Or come up with your own unique ideas and add them directly into the plan.

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Glossary of Terms

Asymptomatic: a person who does not report or appear to have any symptoms or signs of illness. *Source: CDC*

Close Contact: Someone who was within 6 feet of an infected person for at least 15 minutes within a 24-hour period starting from 2 days before illness onset (or, for asymptomatic patients, 2 days prior to specimen collection) until the time the patient is isolated. *Source: CDC*

Contact Tracing: Fundamental activities that involve working with a patient who has been diagnosed with an infectious disease to identify and provide support to people (contacts) who may have been infected through exposure to the patient. This process prevents further transmission of disease by separating people who have (or may have) an infectious disease from people who do not. *Source: CDC*

COVID-19 Test – Viral Type: Viral tests check samples from your respiratory system, such as a swab from the inside of your nose, to tell you if you currently have an active infection with SARS-CoV-2, the virus that causes COVID-19. When testing negative is required as clearance to return to work – it must be a viral test. Please note: There are two types of viral tests available and it's important to understand the key differences between them.

- **Viral Type "PCR":** This is the most effective type of viral test. It looks for pieces of the actual virus that causes COVID-19 in the sample taken. This type of test is sent to a laboratory to be analyzed and the process may take several days once received by the lab based upon demand.

- **Viral Type "Antigen":** An antigen test can quickly confirm a positive infection by looking for certain proteins in a sample. However, a negative test does not necessarily rule out an infection. This type of test can provide "rapid results" at the testing site in less than an hour – but negative tests should be treated as presumptive only because the test is less sensitive. This means that a "false negative" may result. If an antigen test is used as clearance to return to work – results from two separate negative antigen tests, taken at least 24 hours apart, must be provided. If there is still a concern that a person has COVID-19 after a negative antigen test (because of symptoms or other factors) then than person should be tested again with a PCR test.

COVID-19 Test – Antibody Type: Antibody tests check your blood by looking for antibodies, which may tell you if you had a past infection with the virus that causes COVID-19. Antibodies are disease specific proteins that help fight off infections and can provide protection against getting that disease again (immunity). Except in instances in which viral testing is delayed, antibody tests should not be used to diagnose a current COVID-19 infection. An antibody test may not show if you have a current COVID-19 infection because it can take 1–3 weeks after infection for your body to make antibodies. To see if you are currently infected, you need a viral test. Please note: It is not known yet if people who recover from COVID-19 can get infected again. Scientists are working to understand this. *Source: CDC*

Deep Cleaning: See definition of *Level Three Cleaning*

Exposure (Person): Someone who has been in close contact with an infected/ symptomatic person – within 48 hours of the onset of symptoms. See definition for "Close Contact".

Exposure (Jobsite/Office): When an infected/ symptomatic person is on the jobsite or in the office either while symptomatic or in the 48 hours prior to the onset of their symptoms. Also consider factors such as close contact with others, social distancing, face covers and hygiene protocols when determining level of exposure to the jobsite or office. Other considerations include duration of time and exposure to bodily secretions (through cough or sneeze primarily) of the infected person. Work with your safety manger to conduct an appropriate Exposure/ Risk Assessment. Note: Any exposure or potential exposure to the jobsite or office requires that a Risk Alert be submitted.

Exposure Assessment: The process of characterizing, estimating, measuring, and modeling the magnitude, frequency, and duration of contact with an agent as well as the number and characteristics of the population exposed (See COVID-19 Exposure Risk Assessment Guide). *Source: Science Direct*

Face Covering: Any well-secured paper or cloth (like a bandana or scarf) that covers your nose and mouth. More on cloth face coverings here.

Glossary of Terms

Isolation: The separation of a person or group of people known or reasonably believed to be infected with a communicable disease and potentially infectious from those who are not infected to prevent spread of the communicable disease. Isolation for public health purposes may be voluntary or compelled by federal, state, or local public health order. (See *Quarantine*)
Source: CDC

Level 3 Cleaning: Also known as High-level Disinfection (HLD), the highest of the three levels of disinfection recognized by the Centers for Disease Control and Prevention (CDC). High-level disinfection is effected with a chemical germicide that has been cleared by the Food and Drug Administration (FDA) to be marketed as a sterilant. The HLD process kills all vegetative microorganisms, mycobacteria, lipid and nonlipid viruses, fungal spores, and some bacterial spores.

People at Increased Risk: Persons with underlying medical conditions or characteristics that may put them at increased risk for severe illness from COVID-19 and who should take extra precaution to prevent exposure to the virus.

Plan: Refers to the Swinerton COVID-19 Plan developed and published by the Swinerton COVID-19 Task Force. The initial Plan was published on March 18, 2020 with an updated 2.0 version published on April 6, 2020 with revisions made and published on May 1, 2020. The current Plan is version 3.0.

Prolonged Period of Time: Data are insufficient to precisely define the duration of time that constitutes a prolonged exposure. Recommendations vary on the length of time of exposure, but 15 minutes of close exposure can be used as an operational definition. *Source: CDC*

Quarantine: The separation of a person or group of people reasonably believed to have been exposed to a communicable disease but not yet symptomatic from others who have not been so exposed to prevent the possible spread of the communicable disease. Quarantine may be voluntary or compelled by federal, state, or local public health order.

Return to Office Plan: Refers to Swinerton's specific Return to Office Plans developed and published by each office location. Each plan identifies a specific Return to Office Coordinator for each location.

Return to Work: See COVID-19 Return to Work Guidelines for symptomatic and asymptomatic protocols.

Social Distancing: See COVID-19 Social Distancing Tips and Recommendations for definitions and helpful links.

Symptoms: Any indication of disease perceived by the patient. *Source: Medical Dictionary*

Travel (Domestic): Any travel outside of your home state but within the United States of America. Please be aware that some states (such as Hawaii and Washington) have specific restrictions on travel for workers from outside of the state and, in the case of Hawaii, inter-island travel has restriction. Please be aware of any local orders that may impact or restrict your travel or trigger a quarantine period.

Travel (International): Any travel from outside of the United States of America. Note: This does not include normal commute in areas where you normally cross a border to go to work.
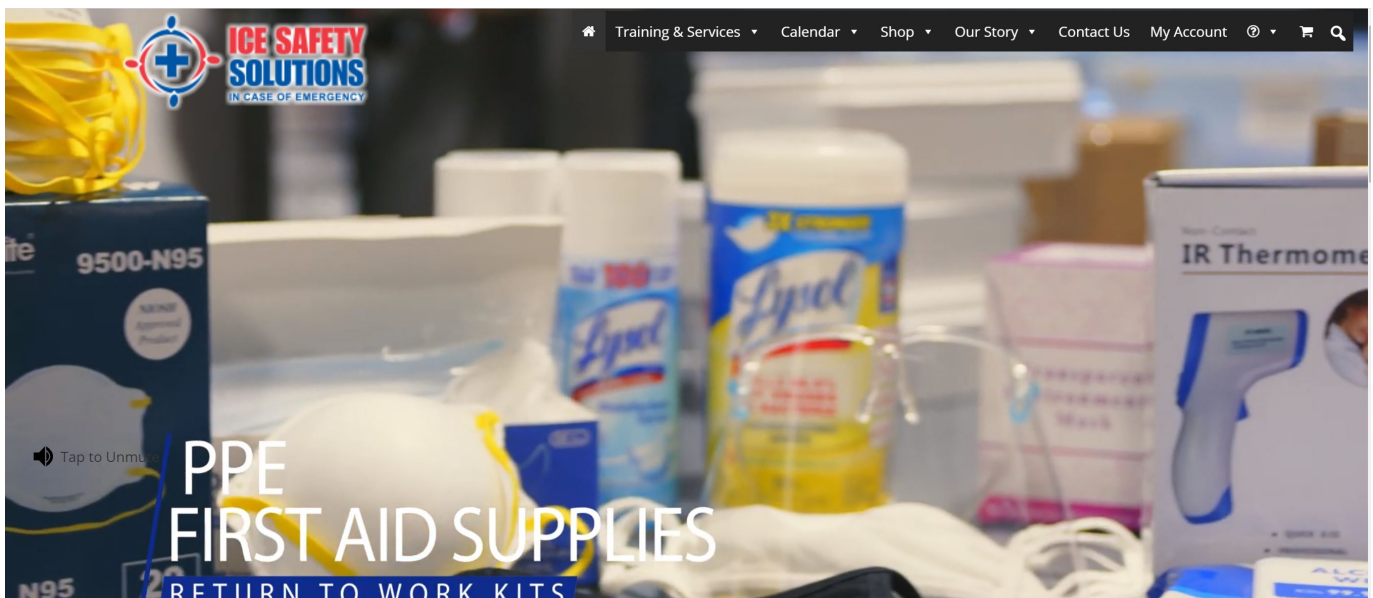
Return to Work
Organizational Risk Assessment

Areas for Consideration	Yes	No	N/A	Other (provide comment)
1. As soon as public health order (stay-at-home, shelter-in-place, other mandated requirement) is lifted				
2. Following the lifting of the public health order, on a date to be determined by the Crisis/Incident Management Team				
3. Only when organization has established criteria for temperature screening, social distancing, face coverings and other personal protective equipment, cleaning and disinfecting in accordance with State and local public health department requirements **Note:** Refer checklists: • Temperature and Other Screening • Common Areas/Rooms • Personal Protective Equipment • Cleaning Protocols				
4. Identification and verification by Risk Manager (in conjunction with insurance broker) that organization is able to comply with requirements its insurance underwriters may have for staff to return to work **a.** Align with public health department requirements				
5. Only when case numbers in the community fall below a certain level over a defined period of time **a.** Use reputable sources to gather trend data, e.g., deaths, hospitalizations				

Business Operational Risk

Areas for Consideration	Yes	No	N/A	Other (provide comment)
1. Develop return-to-work strategy. Strategy needs to include a phased approach with options for each phase				
2. Identify what work needs to be resumed **Note:** Identify priorities for returning to work (aligned with Business Impact Analysis). Have Business Impact Analysis requirements changed based on working in the "new normal" and/or new technologies that have been deployed to enable remote working. Experience during Work from Home can be used to revise the volume and kind of work needed to be performed in the workplace as it may have changed, especially early in the economic recovery				
3. Identify minimum (human and other) resources required to perform the work that needs to be resumed **Note:** Refer to your Business Impact Analysis. Have BIA requirements changed based on working in the "new normal" and/or new technologies that have been deployed to enable remote working. Experience during Work from Home can be used to revise the minimum resources and configuration of workers to establish requirements for the transition period between return to work and return to business				
4. Evaluate options for performing work at other locations given the circumstances **Note:** Refer to your Business Impact Analysis. Experience during Work from Home can be used to revise the minimum configuration of workplaces to establish requirements for the transition period between return to work and return to business. Return to work covers return of staff to the workplace Legal/General Counsel involvement may be necessary to assess the risk to the organization if (i) a staff member is required to work at a customer/client site and that staff member infects their staff; and (ii) organization's own staff member falls sick as a result of working at a customer/client site				
5. Identify when work can be performed (staggered shifts, alternate weeks, alternate days, revised hours, etc.) **Note:** Refer to your Business Recovery Plan. Experience during Work from Home can be used to revise working hours including shift hours to establish requirements for the transition period between return to work and return to business				

Facility & Workstation Risk Assessment

Areas for Consideration	Yes	No	N/A	Other (provide comment)
6. Identify what Facilities and Information Technology (IT) on-site services are needed to return the workplace to ready status, for re-occupancy purposes **Note:** It is likely that a ready crew will need to go in and post signage, re-arrange workstations to comply with social distancing requirements, coordinate with building management/other tenants etc. before the "first phase" of employees returns.				
7. Establish phased return to work of staff based on outcome of decisions made in steps 1-6 listed above **a.** Facilities/IT staff to ready the site for re-entry initially, then one third, then two thirds of staff, no pre-defined timeline **b.** Facilities/IT staff to ready the site for re-entry initially, then Phase 1 = 10%, Phase 2 = 25% after 30 days, Phase 3 = 50% after 60 days, Phase 4 = 75% after 90 days **c.** Consider "desks at rest" concept **Note:** Refer checklist: Common Areas/Rooms				
8. Identify issues that might delay the timeline for re-entry **a.** Workplace not appropriately set up or staffed **Note:** Refer checklist: • Team and Rotation • Temperature and Other Screening • Visitors • Common Areas/Rooms • Personal Protective Equipment • Cleaning Protocols				
9. Establish phased return to work by location **a.** "Sister" sites (alternate sites that perform critical work) will/will not be activated at the same time				
10. Adjust work schedules **a.** 9-hour workdays, for 9 days, alternate Fridays off **b.** 10-hour workdays, for 4 days, every Friday off				

Workforce Availability Assesment

Areas for Consideration	Yes	No	N/A	Other (provide comment)
1. Survey staff to establish (in conjunction with Human Resources (HR), people Managers, other):				
a. Who has a child/ren, family member, partner that requires ongoing care at home				
b. Who is classified "at high risk" **Note:** Recommend defining "high risk" per World Health Organization (WHO) or Centers for Disease Control and Prevention (CDC) guidelines Also check the Society for Human Resource Management (SHRM), and the Risk Management Society (RIMS) websites for information on who in the organization has a right to this information and how it is to be collected Due to privacy/HIPAA concerns, ask staff to self-identify if they are "high risk" Additionally, ask staff to self-identify if they live with someone who is "high risk"				
c. Who relies on public transportation during an early phased transition back to the workplace **Note:** Some staff may be at higher risk, e.g., from long commutes on public transport				
d. Who will volunteer to return when management resumes on-site work **Note:** To minimize the number of staff returning to the workplace and to reduce risk/exposure particularly in the initial phase, only ask this question of those with a business need to be on-site				
e. What hours staff are available to work both at home and on-site				
2. Determine if staff are allowed to choose the hours they may work				

TEAM ROTATION STRATEGY TO REDUCE RISK

Areas for Consideration	Yes	No	N/A	Other (provide comment)
1. Create teams (e.g., Blue Team, Green Team, Red Team, Yellow Team, or Team A, B, or C) **a.** Establish "Home Team" and "Away Team" **Note:** Home Team for those working in the primary location. Away Team for those working by remote access (e.g., from home) **b.** Utilize your Business Impact Analysis to identify minimum resources **Note:** Experience during Work from Home can be used to revise the minimum resources and configuration of staff and workplaces to establish requirements for the transition period between return to work and return to business Return to work covers return of staff to the workplace. The volume and kind of work needed in the workplace will have changed, especially early in the economic recovery				
2. Split small departments with few staff to avoid their being on-site at same time **Note:** An alternate to splitting small department is to perform work with a mix of "on-site" and "off-site" teams				
3. Stagger small departments that work across different time zones e.g., Dept A has 2 staff in New York, Paris, London. Assign one member to the Blue Team, one to the Green Team at each location **Note:** An alternate to splitting small department is to perform work with a mix of "on-site" and "off-site" teams				
4. Implement shift work				
5. Restrict badge access to relevant team members per their team color or name assignment				

PRO TIP! Transportation to/from Workplace

Areas for Consideration	Yes	No	N/A	Other (provide comment)
1. Determine need to adjust company Human Resources policy and staff compensation package to support staff traveling to/from workplace to help limit exposure to those sharing public transport				
a. Provide Personal Protective Equipment **Note:** Refer checklist: Personal Protective Equipment This may also apply to staff traveling on behalf of the company domestically and/or internationally				
b. Arrange for pickup and transportation to accommodate new work schedule				
c. Reimburse taxi, rideshare fares				
d. Reimburse parking costs				
e. Reimburse fuel costs				
f. Reimburse costs for Personal Protective Equipment, if purchased by staff				
g. Reimburse costs for Covid-19 diagnostic testing, if applicable				
2. Develop staff safe commuting guidelines **Note:** May be provided by transit companies				

Visitors

Areas for Consideration	Yes	No	N/A	Other (provide comment)
1. Establish visitor policy – will they be allowed, or not allowed, on-site				
a. Visitor access to the primary or alternate locations should be "need based"				
b. Visitors to adhere to same policy regarding temperature taking **Note:** Refer checklist: • Temperature and Other Screening				
2. Establish if visitors need additional sign-in instructions				
a. Require visitors to sign personal travel and health questionnaire prior to entry (shared copy, leverage online application, or amend workplace access control system terms) **Note:** Refer checklist: • Visitor Travel and Health Screening Form				
b. Request visitors provide their home numbers as well as after-hours contact numbers for follow-up **Note:** Determine who is responsible for keeping this information, e.g., Receptionist, person who visitor is meeting with, other. Add to Visitor Travel and Health Screening Form, as appropriate To minimize privacy concerns, destroy after specific period of time				
c. Log all visitor information into a database, together with where they went and who they visited				
d. Utilize mobile application for visitor check-in process				
3. Develop visitor communications (e.g., to let them know they will have their temperature taken, required to wear a face mask or face covering, no handshakes, other)				
4. Send copy of communication to visitors prior to their arrival on-site				

Health and Illness Assessment

Areas for Consideration	Yes	No	N/A	Other (provide comment)
1. Encourage staff to take their own temperature prior to coming to work; if sick request they remain at home and notify their Manager, Human Resources, another member of the organization's Management Team				
2. Adjust company Human Resources policy requiring staff to stay at home when sick, or get a doctor's clearance to be at work				
3. Investigate and implement use of telemedicine to support screening of employees who feel unwell				
4. Employ trained medical staff to be on-site to assist with temperature screenings, especially during first 3-6 months of return to work **a.** Future state: For staff required to be on-site, employ trained medical staff to administer Covid-19 diagnostic testing at the workplace				
5. Plan for temperature screening to remain in place during first 3-6 months of return to work				
6. For staff required to be on-site, arrange for Covid-19 diagnostic testing with medical provider or public health department to check if staff members have the coronavirus **Note:** People can transmit Covid-19 who are asymptomatic (i.e., have no symptoms)				
7. Future state: For staff required to be on-site, arrange for antigen testing with medical provider or Department of Health to check if staff members have had Covid-19 and built up immunity **Note:** If would seem, people can transmit Covid-19 who have had it and recovered because in some cases patients who have recovered have been found to have the virus in their system, and therefore, able to transmit it to others				
8. If antiviral medicine is available, consult with Medical Advisor to determine timeframes and establish protocols to start antiviral treatment				

Health and Illness Assesment

Areas for Consideration	Yes	No	N/A	Other (provide comment)
9. Ensure sufficient antivirals are on hand to treat the symptoms of infection for members of staff who must remain on-site				
10. Restrict workplace access points to only those where temperature screening can be administered				
11. Determine type of temperature screening to perform **a.** Use of thermometers **b.** Use of non-contact infrared scanners **c.** Use of self-declaration via mobile app				
12. Install non-contact infrared thermometers at workplace entry point(s)				
13. Establish manual temperature screening at workplace entry point(s) **Note:** This can be expensive and resource intensive **a.** Identify locations for temperature screenings indoors (e.g., lobby) or outdoors (tent), paying attention to local weather conditions				
14. Coordinate with building management and evaluate baseline workplace screening capabilities"				
15. Determine need to establish staggered entry hours to allow for processing of manual temperature screenings				

Workspace Hazard Assessment

Areas for Consideration	Yes	No	N/A	Other (provide comment)
1. Designate each workstation, office, or lab bench space for either a Green Team, Blue Team, other team member (ensure no members of the same team will be seated beside each other) with a physical distance greater than 6' or 2 meters between one member of staff on-site and the next **Note:** Refer checklist: • Re-entry Form **a.** Leave at least every other workstation vacant **b.** Leave at least every other office vacant **c.** Leave at least every other lab bench space vacant **d.** Establish "desk at rest" concept **Note:** Workspace should remain unoccupied for 48 hours between use				
2. Determine if common areas / rooms can be reallocated for use as individual workspaces **Note:** Refer checklist: • Common Areas/Rooms				
3. Establish open/closed floors on alternate days **Note:** Dependent on amount of time required to sanitize workspace (including deep cleaning) and frequency needed to support work required to meet business continuity objectives				
4. Determine if staff will be assigned to a seat or can sit in open seating **Note:** Assigned seating is preferable. It provides a better source of information for contact tracing				
5. Identify isolation room(s) for staff exhibiting symptoms of sickness				

Workspace Hazard Assessment

Areas for Consideration	Yes	No	N/A	Other (provide comment)
6. Place plexiglass where a physical barrier is needed, e.g., at reception, between workstations, lab benches, cashiering				
7. Allocate workspace only to those that need to be on-site to perform their work to meet 'new normal" post pandemic requirements for minimum resources and work to be performed on premise/off premise				
8. Assign Blue Team and Green Team (others if necessary) to workstations, offices, lab benches **a.** Track who sits where for easier tracing of their movements **Note:** Ensure staff name is easily visible				
9. Clean and disinfect all workstations, offices, lab space between use **Note:** Refer guidelines from Occupational Health and Safety and Health Administration (OSHA), Centers for Disease Control and Prevention (CDC), Building Owners and Managers Association (BOMA) and International Facility Management Association (IFMA)				
10. Institute clean desk (free of papers, personal belongings) policy to ease cleaning process				
11. Develop a 'virtual tour' of the post-pandemic workplace to walk returning employees through the re-engineered workspace to let them see the changes before coming on-site **Note:** Refer checklist: • Awareness and Education **a.** Include changes in workplace entry and exit point(s), allocation of workspace, etc.				

Worksite Hazard Assessment

Areas for Consideration	Yes	No	N/A	Other (provide comment)
1. General				
a. Change HVAC filters and air flows in accordance with Centers for Disease Control and Prevention (CDC) and Occupational Safety and Health Administration (OSHA) guidance				
b. Maintain social distancing protocols or close off common areas (e.g., cafeteria, dining area, gym/exercise room, recreation center, movie theater) **Note:** There may be a need / reason for keeping common areas open, e.g. to 'open up' the atmosphere at work. Post-pandemic, especially in the first 3-6 months of reopening, it will still be necessary to maintain distance and take precautions to avoid spreading infection by hand-to-hand contact				
c. Place signage to reinforce social distancing throughout common areas				
d. Place signage to reinforce good personal hygiene throughout common areas				
e. Color code rooms to indicate whether a room can be used or not (e.g., • Red = Not cleaned; not ready for use • Green = Cleaned and ready for use				
f. If Personal Protective Equipment (PPE) is to be disposed of at work, place special non-touch receptacles throughout the workplace, as PPE should be treated as medical waste **Note:** As medical waste, it will require special handling by janitorial staff and special pick up by waste/trash collection				
g. Ensure tissues in common areas				
h. Prop doors open, or remove doors from hinges to minimize high touch points				
2. Approve delivery of food ordered by staff from outside vendors				

Worksite Hazard Assessment

Areas for Consideration	Yes	No	N/A	Other (provide comment)
3. Reception and Reception Area				
a. Place alcohol-based hand sanitizer at reception and throughout reception area **Note:** Place alcohol-based hand sanitizers at reception and in reception area for first 3-6 months after return to work				
b. Place notice of new visitor sign-in instructions/ questionnaire, as needed to protect health and safety in the workplace				
4. Conference Rooms				
a. Make inaccessible (lock or caution tape)				
b. Adjust conference room capacity by 50% through online reservation system or notice placed outside; remove extra tables, remove excess tables and chairs				
c. Limit time allowed for meetings, e.g., 1 hour, 30 minutes				
d. Place alcohol-based hand sanitizer at entry				
e. Establish mechanism to flag usage				
f. Use color coding to indicate when a room is ready for use, including completion of cleaning/sanitization				
g. Clean and disinfect all conference rooms between use				
5. Huddle Rooms				
a. Make inaccessible/off limits (lock or caution tape)				
b. Adjust capacity by 50% through online reservation system or notice placed outside; remove excess chairs				
c. Limit time allowed in huddle room, e.g., 1 hour, 30 minutes				
d. Establish mechanism to flag usage				
e. Clean and disinfect between use				

Worksite Hazard Assessment

Areas for Consideration	Yes	No	N/A	Other (provide comment)
6. Break Rooms				
a. Remove coffee making machines **Note:** Consider the feasibility of individual serve coffee machines with instructions for wipe down after use				
b. Remove paper cups				
c. Provide individual wrapped mugs and utensils; require they be put in dishwasher after use				
d. Place alcohol-based hand sanitizer close by break room				
e. Maintain supply of soap and paper hand towels				
f. Provide individual wrapped snacks only				
g. Remove items from fridge, and clean refrigerator at end of day, daily				
h. Clean and disinfect break rooms between use				
7. Cafeteria				
a. Adjust capacity by 50%; remove excess tables and chairs				
b. Place alcohol-based hand sanitizer at entry				
c. Remove self-serve buffet options, e.g., salad bar, soup stations **Note:** Follow US Food & Drug Administration guidance				
d. Serve individual wrapped meals				
e. Request staff bring their own meals				
f. Remove utensils or have individually wrapped utensils				
g. Position cleaning attendant in cafeteria				
h. Remove items from fridge, and clean refrigerator at end of day, daily				
i. Clean and disinfect kitchen and seating areas between use				

Worksite Hazard Assessment

Areas for Consideration	Yes	No	N/A	Other (provide comment)
8. Copy Rooms				
a. Place alcohol-based hand sanitizer at entry				
b. Place alcohol-based wipes beside copiers				
c. Maintain cleaning schedule in each copy room				
d. Assign a person/team of people whose job it is to do the photocopying **Note:** This will reduce the exposure of all employees using the copier to the spread of infection from one to another				
9. Elevators				
a. Alternate elevator bank usage (e.g., one day on, one day off) **Note:** This will depend on number of elevators available and the number of people that need to use it to get up/down the building to do their work Follow National Elevator Industry Inc. (NEII) guidelines				
b. Limit number of passengers in elevator to 4; ask each to stand in one of the corners				
c. Large site may consider an elevator operator(s) ("floor number please")				
d. Cover elevator buttons with plastic; replace regularly				
e. Place alcohol-based hand sanitizer at entry and inside elevator				
f. Clean and disinfect elevator including inside/outside buttons				
g. Maintain cleaning schedule in each elevator				

Worksite Hazard Assessment

Areas for Consideration	Yes	No	N/A	Other (provide comment)
10. Restrooms				
a. Restrict the number of restrooms open				
b. Limit occupancy at any one time				
c. Close every other stall, urinal, sink				
d. Maintain supply of soap and paper hand towels				
e. Place trash can close to exit door either inside or outside restroom for staff to deposit paper towels on exit				
f. Maintain cleaning schedule in each restroom				

COVID-19 FREE

DAILY DISINFECTED AREA

USE HAND SANITIZER PLEASE

KEEP SAFE DISTANCE

WEAR MASK

WE ARE IN THIS TOGETHER

Cleaning & Disinfecting Protocols

Areas for Consideration	Yes	No	N/A	Other (provide comment)
1. Check with local contact for Building Owners and Managers Association (BOMA) / International Facility Management Association (IFMA) for protocols to use to clean and disinfect workplace including HVAC, airflows **Note:** Refer Centers for Disease Control and Prevention (CDC) and Occupational Safety and Health Administration (OSHA) guidance too				
2. Review contract with janitorial company for level of service provided **a.** Dependent on number of staff coming on-site, augment number of janitors if necessary				
3. Clean and disinfect high touch areas (doorknobs, handles, handrails, photocopiers, elevator buttons, faucets, countertops) • Twice per day • Multiple times per day				
4. Clean and disinfect workstations, office desks, lab benches, chairs, trash cans • Daily				
5. Wash linoleum floors • Daily • Weekly				
6. Deep clean carpets • Monthly • Quarterly				
7. Place notices in common areas after each clean using color coded system • Red = Not cleaned; not ready for use • Green = Cleaned and ready for use				

Cleaning & Disinfecting Protocols

Areas for Consideration	Yes	No	N/A	Other (provide comment)
8. Arrange for handling of the disposal of Personal Protective Equipment (PPE) from special non-touch receptacles throughout the workplace, as it should be treated as medical waste				
9. Arrange for special PPE pick up by waste/trash collection				
10. Provide employees with disinfecting agents, paper towels, and latex or vinyl gloves to reduce the spread of infection by direct contact with the virus				
11. Implement protocols to have workers wipe down their equipment and contact surfaces at the start and end of each shift				

Personal Protective Equipment

Areas for Consideration	Yes	No	N/A	Other (provide comment)

1. Assess Personal Protective Equipment (PPE) supplies (e.g., by country, county, site)
 	
• Masks
  - N95
  - 3-ply
  - Surgical
  - Cloth
• Alcohol-based hand sanitizer
• Alcohol-based towelettes/wipes
 	
• Gloves
  - Latex
  - Vinyl
• Goggles
• Gowns
• Additional PPE required for the type of work being performed				

2. Provide PPE appropriate to protect staff and ensure health and safety in the workplace **a.** Provide instructions for proper use and disposal of PPE				
3. Subject to availability, mail "care package" to staff before returning on-site to include • Cloth face covering • Individual alcohol-based hand sanitizer bottle • Alcohol-based towelettes / wipes				
4. Provide face masks or face coverings to staff before returning to work on-site **a.** Encourage staff to wear company-provided face masks or face coverings en-route to work **b.** Require staff and third parties (including visitors) to wear face masks or face coverings on-site **c.** Provide instructions on what constitutes appropriate face coverings **Note:** Refer Centers for Disease Control and Prevention (CDC). Recommend staff not to wear "skull and cross bones" type coverings on-site				

Personal Protective Equipment (cont.)

Areas for Consideration	Yes	No	N/A	Other (provide comment)
5. Place larger stand up alcohol-based hand sanitizer dispensers in high foot traffic areas e.g.,				
a. Workplace entry point(s)				
b. Lobby				
c. Reception and reception areas				
d. Outside and inside elevator				
e. Outside and inside cafeteria				
f. Break rooms				
g. Copy rooms				
6. Place alcohol-based hand sanitizer bottles in high density areas				
a. Conference/meeting/huddle room tables				
b. Cafeteria tables				
7. Provide gloves, if appropriate				
a. Latex				
b. Vinyl				
8. Provide goggles, if appropriate				
9. Provide gowns, if appropriate				
10. Place special non-touch receptacles throughout the workplace for disposal of PPE, as it should be treated as medical waste				
11. Establish policy or protocols for special handling of PPE by janitorial staff and special pick up by waste/trash collection				

Laptop, IT Accessories, Furniture

Areas for Consideration	Yes	No	N/A	Other (provide comment)
1. Clean and wrap all laptops, cables, headsets, keyboards and other peripherals, and pass on to shipping & receiving, or warehouse to coordinate pickup or delivery to staff working from home				
2. Require staff bring company provided headsets and laptops to the workplace, and take them home daily				
3. Identify company furniture for staff to use long-term (if working from home), and pass to shipping & receiving, or warehouse to coordinate pickup or delivery to staff working from home				
4. Provide alcohol-based towelettes / wipes for staff to wipe down laptops, keyboards, etc.				

Awareness and Education

Areas for Consideration	Yes	No	N/A	Other (provide comment)
1. Educate staff on what to expect when they return to the workplace through video to include: • Team assignment • Rotation • Staggered hours • Contact tracing • Personal hygiene and Personal Protective Equipment (PPE) • Workplace routes • Workplace etiquette				
2. Educate staff on what to expect when they return to the workplace through Intranet posting				
3. Educate staff on what to expect when they return to the workplace through email posting **a.** Use virtual tour, video clips, printed materials with photos, graphics, etc., to illustrate changes to the workspace **b.** Provide instructions on use of and disposal of PPE **c.** Provide instructions on new / enhanced cleaning protocols				
4. Develop a 'virtual tour' of the post-pandemic workplace to walk returning employees through the re-engineered workplace to let them see the changes before coming on-site **Note:** Consider making video accessible for viewing on mobile devices **a.** This video can be used to show staff changes in building entry and exit, allocation of workspace in the workplace, etc. **b.** Require staff to watch video as part of compliance training program before returning to the workplace				

Awareness and Education (cont.)

Areas for Consideration	Yes	No	N/A	Other (provide comment)
5. Develop soft opening guidelines				
a. Food - Delivery procedures, use of cutlery, utensils, dishwasher, refrigeration cleaning schedule, where to eat				
b. Clean desk - Personal items (e.g., laptop, mouse, cables) to be taken home at end of shift; cleanliness of area; cleaning protocols				
c. Personal health – Temperature and other screening requirements				
d. Visitors – No visitors without Manager approval				
e. Visitors – Signing of travel and health form; temperature screening, wearing of face coverings; no handshaking				
f. Travel – Commuter, domestic, and international travel				
g. Elevator usage – Social distancing				
h. Personal hygiene and PPE – Handwashing, use and disposal of PPE				

Post Exposure Return to Work

Areas for Consideration	Yes	No	N/A	Other (provide comment)
1. Review and understand public health department guidelines pertaining to handling sick staff				
2. Adjust company Human Resources policy requiring staff to stay at home when sick, or get a doctor's clearance to be at work				
3. Hire Medical Advisor for on-site or telemedicine advice for 3-6 months **a.** Medical Advisor may be able to assist with temperature and other screening				
4. Move staff member exhibiting signs of sickness to an isolation room if they cannot leave the premises immediately **a.** Arrange for Covid-19 diagnostic testing with medical provide or public health department				
5. Establish cleaning protocols based on type of illness or infection				
6. Clean and disinfect location where person was sitting and/or working in accordance with State and local public health department requirements **a.** Identify all locations where the person worked				

Handling Unwell Staff (cont.)

Areas for Consideration	Yes	No	N/A	Other (provide comment)
7. Clean and disinfect area in vicinity of where person was sitting and/or working				
8. Evacuate workplace, clean and disinfect prior to staff re-entering site **a.** Identify all locations where the person worked				
9. Revisit Employee Assistance Program policy and determine if services need to be increased **a.** On-site staff counselling **b.** Telecounselling services				
10. Establish mechanism for contact tracing **Note:** Provide support and documentation to public health department, as directed				

Reinfection Response Plan

Areas for Consideration	Yes	No	N/A	Other (provide comment)
1. Establish triggers that may necessitate workplace partial or total closure, and staff return to remote working				
a. An increase in the number of infections in the community				
Note: Use reputable sources to gather trend data, e.g., deaths, hospitalizations				
b. A single case in the workplace				
c. Multiple cases in the workplace				
2. Notify Crisis/Incident Management Team of suspected or actual Covid-19 case(s) in the workplace, at customer or client site				
3. Activate Management Team. Leverage lessons learned to date				
a. Consider timing of notification and workplace access issues				
b. Determine risk / exposure to staff at the workplace				
c. Assess risk / exposure of staff working at customer or client site				
d. Follow instructions of public health department				
4. Coordinate with Facilities or building management as applicable				
a. Ensure proper signage and access controls				
b. Conduct deep cleaning and disinfect work area, and common areas known to have been accessed. If necessary, close workplace for cleaning throughout **Note:** Refer checklist: • Cleaning Protocols				

Re-Infection Response Plan (cont.)

Areas for Consideration	Yes	No	N/A	Other (provide comment)
5. Establish communications				
a. To staff on status, and any actions they should take, e.g., temporary evacuation from primary to alternate worksite, return to working from home, or a combination of the two				
b. To visitors and other third parties regarding access controls				
c. To broader community, if warranted				
6. Coordinate actual or suspected cases through Human Resources **Note:** This may include a staff member who has had exposure through close contact with another confirmed Covid-19 case				
a. Track and manage cases				
b. Perform contact tracing				
c. Provide staff support and outreach **Note:** Additional support may be provided through Employee Assistance Program or equivalent				
d. Monitor situation and identify concerns				
e. Communicate with travelers who may have been notified of exposure				
7. Ensure staff abide by organization protocols				
a. Daily temperature screening and reporting **Note:** Refer checklist: • Temperature and Other Screening				
b. Wearing and disposal of Personal Protective Equipment in the workplace				
c. Workspace guidelines **Note:** Refer checklist: • Workspace • Common Areas/Rooms				
d. Customer or client protocols				
e. Quarantine guidelines				

COVID 19 EXPOSURE RISK ASSESSMENT GUIDE

COVID-19 EXPOSURE RISK ASSESSMENT GUIDE

IF YOU ARE:	AND HAVE HAD EXPOSURE TO:	THESE ACTIONS APPLY:

RECOGNIZED EXPOSURE
• A household member
• An intimate partner
• An individual providing care in a household without using recommended CDC infection control precautions
• An individual who has had close contact[2] for a prolonged period of time [1]
• Travel[4] from a country with widespread ongoing transmission, which as of 3/27/20, includes all countries
• Travel on cruise ship or river boat
	A person with symptomatic COVID-19 (either laboratory-confirmed or a clinically compatible illness) during the period from 48 hours before symptoms onset and until they meet current criteria from the CDC for discontinuing home isolation as defined below:
	
	• At least 3 days (72 hours) have passed since recovery defined as resolution of fever without the use of fever-reducing medications **and** improvement in respiratory symptoms (e.g. cough, shortness of breath); **and**,
	• At least 10 days have passed since symptoms first appeared
		• Stay home until 14 days after last exposure and maintain social distance (at least 6 feet) from others at all times
		• Self-monitor for symptoms
		  ○ Check temperature twice a day
		  ○ Watch for fever[3], cough, or shortness of breath
		  ○ Avoid contact with people at higher risk for severe illness (unless they live in the same home and had same exposure)
		• Follow CDC guidance if symptoms develop

UNRECOGNIZED POSSIBLE EXPOSURE
• All U.S. residents, other than those with a known risk exposure
	Possible unrecognized COVID-19 exposures in U.S. communities	• Be alert for symptoms
		  ○ Watch for fever[3], cough, or shortness of breath
		  ○ Take temperature if symptoms develop
		• Practice social distancing
		  ○ Maintain 6 feet of distance from others
		  ○ Stay out of crowded places
		• Follow CDC guidance if symptoms develop

(1) Data are insufficient to precisely define the duration of time that constitutes a prolonged exposure of 15 minutes within a 24-hour period; see prolonged period of time definition in this plan. Brief interactions are less likely to result in transmission; however, symptoms and the type of interaction (e.g. did the person cough directly into the face of the individual?) remain important.

(2) Data are limited to define close contact. Factors to consider when defining close contact include proximity, the duration of exposure (e.g. longer exposure time likely increases exposure risk), whether the individual has symptoms (e.g. coughing likely increases exposure risk) and whether the individual was wearing a face covering (which can efficiently block respiratory secretions from contaminating others and the environment).

(3) For the purpose of this guidance, fever is defined as subjective fever (feeling feverish) or a measured temperature of higher than 99F (37.2C). Note that fever may be intermittent or may not be present in some people, such as those who are elderly, immunosuppressed, or taking certain medications (e.g. NSAIDs).

(4) Travel does not include normal "commute" driving.

EXAMPLE: Office Re-entry Decision Tree
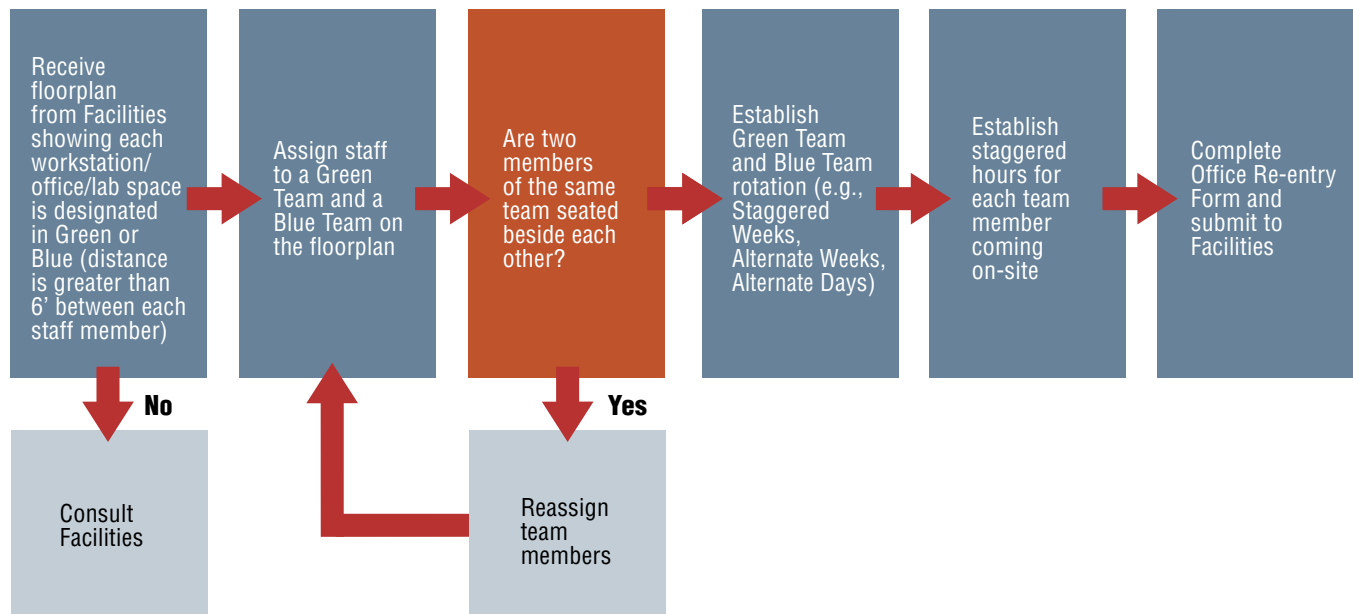
Guidance for Completing Office Re-entry

Facilities tasks:
- On a floorplan, designate each workstation, office, or lab bench space for either a **Green Team** or **Blue Team** member (ensure no members of the same team will be seated beside each other) with a physical distance greater than 6' (or 2 meters) between one member of staff on-site and the next, e.g.,
  — Leave at least every other workstation vacant
  — Leave at least every other office vacant
  — Leave at least every other lab bench space vacant
- Provide each Department Head with the marked up floorplan

Business Function tasks:
- Receive marked up floor plan from Facilities
- Complete Office Re-entry Form (next page) based on phased re-entry for 1/3 and 2/3 of staff:
- Establish two teams: **Green Team** and **Blue Team**
  — No **Green Team** member is to be on-site at same time as **Blue Team** member
- If necessary, assign each team member to a workstation, office or lab bench space according to their team assignment, or let them select a space according to their team color
- Establish the frequency when either the **Green Team**, or **Blue Team** may come on-site.
  — Staggered Weeks (e.g., Weeks 1 & 2: **Green Team** on-site M-F; Weeks 3 & 4 **Blue Team** on-site M-F)
  — Alternate Weeks (e.g., Week 1: **Green Team** on-site M-F | Week 2: **Blue Team** on-site M-F)
  — Alternate Days (e.g., Week 1: **Green Team** on-site M,W,F; **Blue Team** on-site T, Thu | Week 2: **Blue Team** on-site on M,W,F and **Green Team** on T, Th)
- Establish and assign staggered hours when each team member should arrive on-site e.g., every 30 minutes
- Submit completed form to Facilities (XYZ@email.com)

EXAMPLE: Office Re-entry Form

Complete and submit this form to [XYZ] by [date]

Business Function: _____ Department Name: _____

Proposed By (Name): _____ Date: _____

Approved By (Name): _____ Date: _____

Note: This form is intended to be completed at the departmental level in consultation with Facilities. The number (or percentage of staff) required for return to work will depend on business continuity objectives and the number of personnel required to achieve those objectives. The number of personnel required to be "in place" at the primary workplace is likely to be different post pandemic than it was pre-pandemic.

Floor Number and Location (Workstation, Office, Lab Space) Identifier	One Third of Staffing Levels (33%) Assume 'X' staff, so max X people to return to work with X on Green Team, Xon Blue Team			Two Thirds of Staffing Levels (66%) Assume X staff, so max X people to return to work with X on Green Team, X on Blue Team		
		Green Team Members	**Blue Team Members**		**Green Team Members**	**Blue Team Members**
	Staggered Entry Hours NAME	**Rotation Frequency:** E.g.,: Staggered Weeks —	**Rotation Frequency:** E.g.,: Staggered Weeks —	**Staggered Entry Hours**	**Rotation Frequency:** E.g.,: Alternate Days—	**Rotation Frequency:** E.g.,: Alternate Days -

Visitor Travel and Health Screening Form

An example Visitor Travel and Health Screening Form is provided on the next page for all visitors to complete prior to entering the workplace. If appropriate, add space to capture home contact numbers as well as after-hours contact numbers for follow-up.

Visitor Travel and Health Screening Form

Complete and submit this form to [XYZ]

Your Full Name: _____   Your Employer Name: _____

Your Work Number: _____   Your Cell Number: _____

Your Email Address: _____   Person/Department Visiting: _____

Travel and Health Screening		
1. I have visited the following countries in the previous 14 days (list all): ➡️		
	YES	**NO**
2. I have been in close contact or cared for someone with Covid-19 in the past 14 days: ➡️		
3. I I have had one or more of these symptoms within the past three days: (1) fever with temperature above 37.6 "C or 99.7°F 99 F, (2) dry cough, (3) fatigue, (4) body aches and pains, (5) sore throat, (6) trouble breathing or (7) shortness of breath ➡️		

If the answer to any of the questions is "Yes", you will not be allowed entry to the facility at this time

Signature: _____   Date (mm/dd/yyyy): _____

COVID-19 ILLNESS/HEALTH ASSESSMENT

PLEASE USE THE FOLLOWING QUESTIONS WHEN PRE-SCREENING STAFF FOR ENTRY INTO THE WORKPLACE:

1. **Are you experiencing any symptoms such as a cough, shortness of breath or difficulty breathing? Or any two of the following symptoms: fever, chills, repeated shaking with chills, muscle pain, headache, sore throat, new loss of taste or smell, fatigue, body aches, congestion or runny nose, nausea or vomiting, diarrhea?**

   Yes ☐   No ☐   Comment: _____

2. **Have you been in close contact* with anyone who has been diagnosed with COVID-19?**

   (*) Data are limited to define close contact. Factors to consider when defining close contact include proximity, the duration of exposure (e.g. longer exposure time likely increases exposure risk), whether the individual has symptoms (e.g. coughing likely increases exposure risk) and whether the individual was wearing a face covering (which can efficiently block respiratory secretions from contaminating others and the environment).

   Data are insufficient to precisely define the duration of time that constitutes a prolonged exposure of 15 minutes within a 24-hour period; see prolonged period of time definition in this plan. Brief interactions are less likely to result in transmission; however, symptoms and the type of interaction (e.g. did the person cough directly into the face of the individual?) remain important.

   Yes ☐   No ☐   Comment: _____

3. **Have you been in close contact with anyone, such as a friend or family member who may have COVID-19 or is showing any of the symptoms listed in question 1 above, but is YET to be confirmed?**

   Yes ☐   No ☐   Comment: _____

4. **Have you currently been in close contact with anyone, such as a family member, who is experiencing symptoms or has been confirmed positive with COVID-19?**

   Yes ☐   No ☐   Comment: _____

5. **Have you traveled internationally in the last 14 days?**

   Yes ☐   No ☐   Comment: _____

6. **Have you traveled outside your home state in the last 14 days?**

   Yes ☐   No ☐   Comment: _____

By answering YES to any of the above questions, the worker will be asked to complete a secondary screening where potential Risk Exposure will be determined based on the affirmative answer.

All necessary precautions will be taken to protect the worker and others on the jobsite. Any worker who is not eligible to enter the site will be asked to work with their supervisor and their company to implement appropriate protocols for managing the situation.

COVID-19 SECONDARY SCREENING QUESTIONS

If an employee has answered YES to any of the questions on the initial Illness/Health Assessment, please use the relevant questions below to assist in determining potential Risk Exposure in more detail.

Please note this is not a comprehensive list of questions. If, based on responses received, a determination still cannot be made, please contact your HR Partner or Safety Manager for further assistance.

Symptoms (Question 1)

- Are there any other factors that we should be aware of that may be causing your symptoms (e.g. allergies, recent vaccination, asthma, food poisoning, etc.)?
- In the two weeks before you began experiencing these symptoms, did you have contact with someone diagnosed with COVID-19?
- Have you visited or volunteered in a hospital, long term care, or other medical facility or volunteered as a first responder in the last two weeks?

Close Contact (Questions 2-4)

- How long would you estimate you were in contact with this individual?
- Was appropriate social distancing observed at all times during the contact period?
- Were you and the other individual wearing face coverings at all times during the contact period?
- Have you visited or volunteered in a hospital, long term care, or other medical facility or volunteered as a first responder in the last two weeks?

Travel - Domestic & International (Questions 5-6) *

- While traveling were you, at all times, able to observe all safety precautions that have been recommended by the CDC (face covering, social distancing, hand washing)?
  - If you were not able to follow these precautions consistently, in what instances were they not followed?
  - If you were not able to follow these precautions consistently, for what duration were they not followed?
- While traveling did you come in close contact with another person who has tested positive for COVID-19 or has clinically compatible symptoms?

(*) Normal commutes for work are not classified as "travel" for the purposes of the Plan or assessment.

COVID-19 RETURN TO WORK GUIDELINES (POST ILLNESS)

Symptomatic

Per the recommendations* of the Centers for Disease Control and Prevention (CDC), Persons with COVID-19 who have symptoms and were directed to care for themselves at home may discontinue home isolation under the following conditions:

- They have a negative COVID-19 viral test result (from a sample collected after the onset of symptoms) allowing them to return to work **and** have not knowingly been exposed to any potential source of infection since the test was conducted; or have been medically cleared by their healthcare provider

or

- At least 3 days (72 hours) have passed *since recovery* defined as resolution of fever without the use of fever-reducing medications and improvement in respiratory symptoms (e.g. cough, shortness of breath); and
- At least 10 days have passed *since symptoms first appeared*.

The above guidelines are to be utilized in determining when a worker may return to work following illness. Please note that if a person is out sick with any of the listed COVID-19 related symptoms but was never tested, these guidelines still apply. It is preferred that a worker be medically cleared by their healthcare provider prior to returning to work. Please consult with your HR representative for additional assistance or with any questions.

Asymptomatic/Tested Positive

Persons with COVID-19 who are asymptomatic with a positive test result may discontinue home isolation under the following conditions:

- At least 14 days have passed since the date the positive COVID-19 test *was taken* or, a follow up COVID-19 PCR viral test has a negative result.

Please consult with your HR representative for additional assistance or with any questions.

COVID-19 TIPS FOR SOCIAL DISTANCING (AT WORK AND HOME)

Limiting close face-to-face contact with others is the best way to reduce the spread of COVID-19.

What is social distancing?

Social distancing, also called "physical distancing," means keeping a safe space between yourself and other people who are not from your household. To practice social or physical distancing, stay at least 6 feet (about 2 arms' length) from other people who are not from your household in both indoor and outdoor spaces. Social distancing should be practiced in combination with other everyday preventive actions to reduce the spread of COVID-19, including wearing cloth face coverings, avoiding touching your face with unwashed hands, and frequently washing your hands with soap and water for at least 20 seconds.

Tips for Effective Social Distancing

Consider the following tips for practicing social distancing when you decide to go out in public:

- **Know Before You Go:** Before going out, know and follow the guidance from local public health authorities where you live.

- **Prepare for Transportation:** Consider social distancing options to travel safely when running errands or commuting to and from work, whether walking, bicycling, wheelchair rolling, or using public transit, rideshares, or taxis. Follow these additional tips to protect yourself while using transportation.

- **Limit Contact When Running Errands:** Only visit stores selling household essentials in person when you absolutely need to, and stay at least 6 feet away from others who are not from your household while shopping and in lines. If possible, use drive-through, curbside pick-up, or delivery services to limit face-to-face contact with others.

- **Choose Safe Social Activities:** It is possible to stay socially connected with friends and family who don't live in your home by calling, using video chat, or staying connected through social media. If meeting others in person (e.g. at small outdoor gatherings, yard or driveway gathering with a small group of friends or family members), stay at least 6 feet from others who are not from your household. Follow these steps to stay safe if you will be participating in personal and social activities outside of your home.

- **Keep Distance at Events and Gatherings:** It is safest to avoid crowded places and gatherings where it may be difficult to stay at least 6 feet away from others who are not from your household. If you are in a crowded space, keep 6 feet of space between yourself and others at all times, and wear a cloth face covering. Cloth face coverings are especially important in times when physical distancing is difficult. Pay attention to any physical guides, such as tape markings on floors, directional arrows, or signs on walls.

- **Stay Distanced While Being Active:** If you decide to visit a nearby park, trail, or recreational facility, first check for closures or restrictions. If open, consider how many other people might be there and choose a location where it will be possible to keep at least 6 feet of space between yourself and other people who are not from your household.

COVID-19 FREQUENTLY ASKED QUESTIONS

TESTING & RETURN TO WORK

1. Should I get Tested?

Testing in most cases is a personal choice. If you are symptomatic, we encourage you to contact your medical professional and get tested if possible. Always follow the advice of your medical professional. If you are out sick, we will require you to follow the Return to Work Guidelines and be medically cleared before you can come back to work. As always, if you have any questions, you should contact your HR representative for guidance and support.

2. Should everyone on in the department get tested?

It is not recommended that everyone in the department or area be tested for COVID-19. Please remember that these tests are designed to detect active virus. If your department does test, they must stay off site until they have negative results. Also remember that if the results come back negative and then they become symptomatic, they will have to be retested as
it is possible to become infected anytime following the time at which the test specimen is taken, and negative results are invalid at that point.

**3. I can't get a test because I have no symptoms, what should
I do?**

As this global pandemic continues, tests have become more available across the country. If you are having a difficult time getting a test in your area, please contact your safety manger or your HR representative who can assist you.

4. How long does my employee have to stay home?

It depends. The details of each case are unique and a number of factors must be considered when determining how long someone needs to be home-isolated to prevent the potential spread of COVID in the workplace. In general, a 14-day quarantine will be used for potential exposures. This allows enough time for symptoms to develop.

For SYMPTOMATIC cases: The return to work following illness "clock" starts when symptoms first present. Typically, at least 10 days must have passed since the initial onset of symptoms and you must be 72 hours fever-free without the use of fever reducing medications before returning to work.

For ASYMPTOMATIC cases: These cases are trickier. The full 14-day quarantine is necessary, and the clock typically starts from the date on which the test was taken (not the date results are received). Following the 14-day quarantine, the employee may only return to work after having received a negative follow up test result. NOTE: The second test must be a viral test and not an antigen or antibody test.

**5. Do I have to have a negative test result before I come back
to work?**

Our organization asks that you be medically cleared to return to work. This means either a negative result from a test taken after the date when you became symptomatic (as outlined in Question 4) or a release from your healthcare provider allowing you
to return to work. Please consult your HR representative for assistance with the Return to Work process.

6. My family member is sick, should I get tested?

If you were in close contact with someone who has tested positive please do not come to work. Contact your manager and let them know. Your manager or HR contact will work with you to determine an appropriate course of action to ensure you and your teammates are healthy and safe at work.

**7. I was around someone who said they were positive, should
I get tested?**

If you were in close contact with someone who has tested positive please do not come to work. Contact your supervisor and let them know. Your manager or HR contact will work with you to determine an appropriate course of action to ensure you and your teammates are healthy and safe at work.

**8. Why doesn't my organization automatically require a COVID-19
test if a person displays symptoms?**

Many of the symptoms of COVID-19 are also common to any number of other illnesses, including seasonal allergies. We always encourage you to contact your medical provider if you have any questions or concerns and if you believe you should be tested. They are best equipped to determine if a test is appropriate or not and if the symptoms you are reporting to them are compatible with COVID or not.

HEALTH ASSESSMENTS/
WORKPLACE PROTOCOLS

1. Do we have to do a "deep cleaning" on site?

This will depend on the details of the situation and the results of the Exposure/Risk Assessment that must be completed with your Manager, Facilities or HR for every potential exposure. Things that will be considered are the areas of potential exposure (office areas, specific floors or rooms, etc.) duration, symptoms reported, etc. By completing the assessment, we can get more comprehensive understanding of any potential exposure to the site and, as appropriate, deploy a team who is trained in deep cleaning and disinfection.

2. When do I have to submit a Risk Alert?

When: Exposure and risk to our Operations only, if the person has not been in the office for the 14-day period prior to onset of symptoms the Risk Alert is not necessary.

It is important that we are tracking these events as they occur so please be sure to submit your Risk Alert no later than the end of the shift.

Confirmed Positive – an individual has been medically confirmed to have COVID-19

Presumed Confirmed – an individual is exhibiting COVID-19 symptoms and has been in close contact/prolonged exposure with others who have been confirmed as positive

Potential Positive – an individual has symptoms but is uncertain where they may have had close contact/prolonged exposure with others confirmed as positive

Recognized Exposure – an individual has had prolonged exposure to another who is confirmed positive or presumed confirmed but currently showing no symptoms

If you have questions or need assistance, please contact your HR contact.

3. What happens if I answer YES to a question on the Health Assessment?

Answering YES to one of the Health Assessment questions simply means that you need to speak with your supervisor for a "secondary assessment" to evaluate the existence of any potential exposure and to determine what, if any, appropriate measures need to be taken to ensure the health and safety of everyone on the job.

4. Can we take temperatures at our office location?

In some locations, temperature taking is required by local orders. Where this is not the case, temperature taking is an option that is available at the discretion of the local office. If your site or office location implements temperature taking as a part of the health assessment process, you must follow the Temperature Taking Guidelines included in this Plan. Contact your HR contact or safety liason for assistance or any questions.

5. Will there be disciplinary actions pertaining to COVID19 issues?

Enforcing all health and safety protocols is a critical piece of any program. The COVID protocols are no different. One of the most important parts of ensuring a successful program is consistency in the application. If appropriate disciplinary action is needed, consult your manager, safety liason, or your HR contact.

6. What is the period of time we should evaluate when determining if an employee or employees have been exposed?

Based on CDC guidelines, we are looking at potential exposure to the site and other workers beginning 48-hour prior to the onset of symptoms in the affected individual. Some of the critical factors in determining potential exposure include use of face coverings and following the appropriate social distancing protocols. When these protocols are followed strictly, the risk of exposure remains low. When they are not followed, it increases the potential for exposure to others in the company.

7. Can we tell people who are high risk to stay home? What options do we have?

You cannot discriminate against anyone for what you may perceive as a "high risk" category. If you have concerns, please contact your HR representative immediately to discuss your concerns and to take appropriate action.

8. If I get my temperature taken, should I still do the Health Questionnaire?

Yes. Temperature taking, where implemented, is not in lieu of the health assessment but rather a part of the screening process. If you are having your temperature taken, you still must complete the health assessment/screening process to be eligible for access to the site.

9. I'm feeling mild symptoms, such as a runny nose, but I also have seasonal allergies. Do I still have to report this while answering the Questionnaire?

Yes. COVID-19 is still a new illness and the healthcare and scientific community are still learning about it. As such, any symptoms that are compatible with COVID-19 need to be reported as part of the health assessment. If your condition is in fact seasonal allergies, manager or safety liason will be able to help guide you through the process to get yourself cleared to be at work.

FACE COVERINGS/SOCIAL DISTANCING

1. Do I have to wear my face covering in my office/cubicle?

It depends, though it is a good idea – especially if there are other people in or around your office/cubicle. You need to speak with your supervisor about the site-specific or Return to Office Plan that has been established. Protocols have been established for each location and need to be followed. These protocols take into consideration things like distance, capacity of personnel, staggered shifts, potential exposure areas, etc. If you need assistance with this, please contact your Safety Manager. If you are not sure, you should wear a face covering until an appropriate assessment is completed.

2. What if I have a medical condition that makes it hard for me to wear a face covering?

If you are unable to wear a face covering due to a medical condition, please contact your HR representative immediately for assistance.

3. Do I need to wear face covering in a conference room if we are social distancing?

YES. If you are in the same room with other people you are required to wear your face covering. If you are not sure, please contact your manager or HR to assist with a risk/exposure assessment. Also, remember that all meetings should continue to be done virtually unless it is absolutely necessary to have the meeting in person. If you are having a meeting in person, be sure to observe the maximum capacity limits for the room that you are in. It's also important to make sure you thoroughly clean the conference room after use.

4. Do I need to wear face covering in an open area if we are social distancing?

Yes. You need to speak with your supervisor about the site specific or Return to Office Plan that has been established. Protocols have been established for each location and need to be followed. These protocols take into consideration things like distance, capacity of personnel, staggered shifts, potential exposure areas, etc. If you need assistance with this, please contact your manager. If you are not sure, you should wear a face covering until an appropriate assessment is completed.

5. If I'm wearing a face covering, should I also practice social distancing?

Absolutely. Face coverings are not a substitute for social distancing. Both are requirements that all workers must follow.

TRAVEL/VACATIONS

1. I just got back from my out-of-state vacation; do I need to quarantine?

The answer is likely "no" to needing to quarantine for 14 days... with these considerations:

- While traveling it's important to continue to observe all recommended safety precautions (face coverings, social distancing, hand washing) that have been recommended by the CDC.
  - If you have not been able to follow these precautions consistently, we would need to evaluate possible exposure. For example:
    - » I sat directly next to someone on the plane but we both wore face coverings and were cautious during the entire flight (probably low risk).
    - » At the hotel I did not keep my face covering on while in the hotel room but, while in public areas I had my face covering on, kept an appropriate distance, and washed my hands (probably low risk).
    - » I participated in the hotel's pool party with 50 other people who were not consistent in social distancing and face coverings (probably high risk and need for quarantine).

- » My family member began exhibiting symptoms on our 7-hour drive home (possibly a high exposure risk and need for quarantine).

- If while traveling, you come into close contact with another person who has tested positive for COVID we would need to evaluate the contact and whether or not quarantine would be necessary.

2. I'm planning to take a vacation in the near future that is out of state or country, is there anything I should plan for upon my return?

Yes. Please see the Travel Guidance page of the Swinerton COVID-19 Plan for additional information on travel recommendations. Please coordinate with your HR rep and Safety Manager ahead of time to discuss your travel plans. Please remember that, based on an overall assessment of your activities while traveling, you may be asked to quarantine upon your return.

GENERAL QUESTIONS

1. I have some concerns about how COVID-19 Plan is being implemented at my worksite what should I do?

Our organization has established a COVID-19 Plan and is available to provide support. It is always advised that you talk to your Manager or your HR representative for assistance.

2. Someone at my project tested positive for COVID-19, but now I see they've recovered and are back at work. Am I safe?

Yes. our organization is carefully managing each case as they come, and we are taking every precaution to ensure that our locations are healthy and safe every day. If you have any concerns.

3. My city or state has local public health orders that don't seem to match up with Swinerton's COVID-19 plan, what should I do?

This COVID 19 Prevention Plan is a general guideline establishing the minimum requirements set forth by the company. If there is a local or state order that is *more stringent*, that is the order we will follow. If the local or state order is *less stringent*, you are required to follow our organization's protocols as established.

Construction based Worksites
COVID-19 SAFE JOBSITE CHECKLIST

Always incorporate proper hygiene protocols on your job. As part of your regular cleaning and disinfection of your jobsite, use this checklist to focus on the following areas as applicable to your project:

- ☐ Handrails in stairways and walkways
- ☐ Gang box handles
- ☐ Entry gates
- ☐ Doors
- ☐ Handles
- ☐ Interior and exterior doorknobs
- ☐ Locks
- ☐ Lunch areas
- ☐ Conference rooms
- ☐ Tables/chairs (including backs and arms)
- ☐ Call boxes for elevators/personnel hoists
- ☐ Light switches
- ☐ Plan tables
- ☐ Shared hand/power tools, battery charging stations, etc.
- ☐ Restrooms – including handles, seats, locks, hand-wash stations, and soap dispensers
- ☐ Other shared/common areas

In addition to the above preventative cleaning and disinfecting measures, in the event of a suspected or laboratory-confirmed case of COVID-19 on the project, please follow these guidelines as established by the CDC to clean and disinfect your jobsite:

- ☐ Temporarily close off areas used by the ill individual
- ☐ Use appropriate PPE – disposable gloves and gowns
- ☐ Wait as long as practical before cleaning and disinfecting to minimize potential for exposure to respiratory droplets
- ☐ Open outside doors and windows to increase air circulation in the area
- ☐ Clean and disinfect all areas used by the ill individual, focusing on frequently touched surfaces

Remember to make sure to maintain social distancing of 6' whenever possible.

GENERAL RECOMMENDATIONS FOR ROUTINE CLEANING AND DISINFECTION ON JOBSITES

The health and safety of everyone on our projects is our number one priority. As we continue to responsibly manage the evolving COVID-19 situation, we encourage all team members to support and assist in routine cleaning of frequently touched surfaces on our jobsites with household cleaners and EPA-registered disinfectants that are appropriate for the surface. **Remember to always follow label instructions and the Safety Data Sheet (SDS) for proper handling and personal protection while using the selected chemicals.** 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. *REMEMBER, NEVER MIX CHEMICALS!!!*

DEFINITIONS

- Cleaning refers to the removal of dirt and impurities, including germs, from surfaces. Cleaning alone does not kill germs. But by removing the germs, it decreases their number and therefore any risk of spreading infection.

- Disinfecting works by using chemicals to kill germs on surfaces. This process does not necessarily clean dirty surfaces or remove germs. But killing germs remaining on a surface after cleaning further reduces any risk of spreading infection.

REGULARLY CLEAN & DISINFECT HIGH-TOUCH SURFACES SUCH AS:

- Door Handles
- Interior and exterior doorknobs, locks
- Lunch areas, conference rooms and other tables/chairs (including backs and arms)
- Light switches
- Plan tables
- Restrooms – including handles, seats, locks, hand-wash stations, and soap dispensers
- Other shared/common areas
- If applicable, Shared hand/power tools, cords, battery charging stations, etc.

HOW TO CLEAN AND DISINFECT SURFACES

Wear disposable gloves when cleaning and disinfecting surfaces. Gloves should be discarded after each cleaning. If reusable gloves are used, those gloves should be dedicated for cleaning and disinfection of surfaces for COVID-19 and should not be used for other purposes. Consult the manufacturer's instructions for cleaning and disinfection products used. Clean hands immediately after gloves are removed.

If surfaces are dirty, they should be cleaned using a detergent or soap and water prior to disinfection.

For disinfection, use only products that are listed on EPA's List N: Disinfectants for Use Against SARS-CoV-2. Follow the manufacturer's instructions for all cleaning and disinfection products (e.g. concentration, application method, contact time, etc.)

Your help in preventing the spread of illness is critical.

BEST PRACTICE RECOMMENDATIONS FOR COVID-19 MITIGATION IN OFFICES AND CONSTUCTION SITES

GENERAL RECOMMENDATIONS FOR BOTH CONSSTRUCTION SITES AND OFFICES

1. Designate a COVID-19 Supervisor per construction site responsible for monitoring and enforcing Plan
2. Establish a regular cleaning schedule for high touch areas.
3. Discourage carpooling where possible unless workers are coming from the same household
4. Discourage employees from sharing tools and equipment
5. Discourage employees from using other's desks, phones, tablets, computers, pens, etc.
6. Re-evaluate work processes to eliminate multiple people working within 6 feet of one another, where possible
7. Focus on truly Critical Work and consider, when possible, delaying non-essential work activities
8. Ensure desks and other workstations are separated by at least 6 feet
9. Eliminate handshaking and other unnecessary person-to-person contact in the workplace
10. If an in-person meeting is truly essential, ensure that all participants remain separated by at least 6 feet, including when entering and exiting meeting space
11. Always demonstrate leadership to team members and business partners by following all mitigation recommendations and recognizing others who also follow these guidelines

TRAINING

1. Ensure all Swinerton employees have been trained and are familiar with the Plan
2. Provide training on Prevention Protocols including:
   - Sanitation, hand washing and proper hygiene
   - Social Distancing requirements and compliance expectations
   - The various administrative controls and tools being used
   - Signs and symptoms to be aware of and how to report signs of illness
   - If You are Sick – Stay at Home Policy
   - Stop Work Authority

SOCIAL DISTANCING

1. Coordinate deliveries to ensure workers on site are not exposed to delivery personnel
2. Where possible, require delivery drivers to remain in their vehicles
3. Eliminate all unessential visitors to the worksite
4. Adjust entrance to the office and construction site to ensure a minimum of 6 feet between those exiting and entering
5. Reduce the size of staff where possible
6. Stagger start times to help decrease number of staff arriving and departing site at same time where possible
7. Minimize interaction between staff.
8. Eliminate or minimize worker exposure to public and visitors to work areas
9. Install physical barriers where possible to limit staff exposure to general public or others in a shared facility
10. Eliminate access to shared lunch areas with the general public (where applicable)
11. Remove large seating areas for lunch and break periods on site; ensure workers take their breaks and lunch periods while maintaining appropriate social distance
12. Ensure personnel room capacity is restricted to accommodate distancing recommendations
13. Establish "one-way" traffic if necessary, in areas that cannot accommodate the recommended 6 feet between workers (for example in stairways – dedicate one stairway for travel up and the other for down)
14. Eliminate community water coolers, microwaves, and other shared food related items from site

SIGNAGE

1. Increase Signage
   - At Entrances and Doors – No Public Access
   - Social Distancing Signage
2. Post hand washing and social distancing reminder signage on/near temporary toilet facilities

COVID-19 TEMPERATURE TAKING GUIDELINES

TAKING A EMPLOYEE TEMPERATURE IN THE EVENT OF JURISDICTIONAL MANDATE

When required, taking temperatures is not to be done in-lieu of utilizing the COVID-19 Illness/Health Assessment tool for daily screening of workers. In the event we are required to take temperatures, the procedure should be conducted by an authorized third-party medical provider, or when a third party is not available, by designated and trained personnel on site.

When taking temperatures is required, the following guidelines will be utilized:

- The office or jobsite will establish appropriate entry point(s), as well as a reasonable period of time that allows for staggered shifts, and other appropriate social distancing requirements.
- Acceptable forms of temperature taking include:
  - Infra-red "no touch" forehead thermometers
  - Other approved methods noted in governing orders
- Employees who register a temperature higher than 99 degrees will need to complete and clear a secondary assessment prior to being allowed on site. (See Secondary Screening Questions).
- If a client or government mandated temperature level is more stringent, that stricter standard shall apply.
- If an employee has a temperature equal to or above the established level, they will be asked to complete a secondary (verification) temperature check. If temperature is confirmed, the worker will not be allowed onsite and advised to contact their physician.
- If the employee does not meet screening requirements they will not be allowed back onsite until cleared by their physician or otherwise able to Return to Work following the guidelines from the CDC and the Plan.
- Ensure all employees maintain a 6' distance from each other as they move through the screening process.

This policy is subject to change at any time based upon updated guidelines, requirements or industry best practices.

References

Many of the checklists contained in this plan reference various sources of information. It is recommended the reader consult the specific Covid-19 page on the respective websites for further guidance

References

1. Building Owners and Managers Association (BOMA) — **www.boma.org**

2. Centers for Disease Control and Prevention (CDC) — **www.cdc.gov**

3. Health Insurance Portability and Accountability Act (HIPAA) — **www.hhs.gov/hipaa**

4. International Facility Management Association (IFMA) — **www.ifma.org**

5. National Elevator Industry (NEI) — **www.nationalelevatorindustry.org**

6. Occupational Safety and Health Administration (OSHA) — **www.osha.gov**

7. The Risk Management Society (RIMS) — **www.rims.org**

8. The Society for Human Resource Management (SHRM) — **www.shrm.org**

9. U.S. Food and Drug Administration (FDA) — **https://www.fda.gov/home**

10. World Health Organization (WHO) — **https://www.who.int**

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47703 Fremont Blvd | Fremont, CA 94583 | 510.252.0423 | getice.com | info@getice.com