Alliant

Loss Prevention & Control Resource Library

INFECTIOUS DISEASE PREPAREDNESS AND RESPONSE PLAN

Issued by:	Revision Date: 07.01.2020

[NOTE: All Yellow Highlighted text requires editing and development of company-specific procedures and protocol.]

1. Purpose

This policy and procedure sets forth **[Insert company name]**'s response and action plan for the protection of our employees and customers from aerosol transmitted diseases (e.g., SARS, Ebola, influenza, etc.) and the preparation for business continuity in the event of a regionally impacted or pandemic event such as the novel coronavirus known as SARS-CoV-2 that causes the COVID-19 illness. The procedures are based on traditional infection prevention and industrial hygiene practices and guidelines published by the United States Department of Health & Human Services-Centers for Disease Control (CDC), NIOSH, the World Health Organization (WHO) and OSHA.

This plan will be used by **[Insert company name]** to:
- Implement a process to monitor and track the threat and on-going status of a pandemic or regional infectious disease outbreak and execute the appropriate response strategy;
- Establish effective communication means to inform our employees and customers of community-specific directives and the effect of those orders that may change our company's operation status;
- Keep our employees informed of updates on evolving exposure prevention guidelines, risks and recommended safe work practices;
- Perform hazard assessments and implement exposure prevention measures using the hierarchy of controls methodology;
- Implement self-assessment & reporting procedures, screening, testing and contact tracing protocol;
- Develop return-to-work plans for those operations that were closed.

This plan addresses:
- Management and supervision necessary to ensure effective implementation of the plan;
- Hygiene and respiratory etiquette;
- Engineering and administrative controls for social distancing;
- Customer controls and protections;
- Housekeeping, including cleaning, disinfecting and decontamination;
- Prompt identification and isolation of sick persons; and
- Communications and training that will be provided to managers and workers.

This plan is designed to be dynamic and customizable and will change based on the stage of a pandemic or threat of an infectious disease and the orders or directives issued by jurisdictions having authority (e.g. national, state and local governments and public health districts). It is recognized that each pandemic may

have individual characteristics that warrant different response strategies. Accordingly, our company's Infectious Disease Preparedness & Response Work Team and senior management will be flexible in our response strategies based on the best information and advice of public health care professionals, epidemiologists, scientists, engineers and the above referenced agencies.

2. Scope

[Insert company name] places the scope of this policy and SOP at all company offices and associated facilities and includes work operations, face-to-face meetings and other activities at client, public or other business locations.

3. Infectious Disease Preparedness & Response Planning Work Team / Control Coordinator(s) &   Plan Development

- [Insert specific information on the organization of your company's disease preparedness planning & response work team. The work team should be multi-disciplinary including key workplace stakeholders and frontline employees and involving one or more members representing executive management, human resources, finance, business development/marketing and health, supplies procurement, safety & environmental (HSE) departments.]

- [Insert specific information on the assignment of a designated individual or title that will be responsible for monitoring and evaluating the implementation of the response plan in the workplace. {Note: Companies with multi-site operations should consider having a designated site-specific Disease Control Coordinator for each site and the name / title should be communicated to the workers at that site.}]

- Our workers are our most important assets and we are serious about protecting our employees and keeping them healthy. Employee involvement is essential in developing and implementing this Infectious Disease Preparedness & Response Plan. We have engaged our workforce by [Describe employee involvement in the work team, how employee concerns are being addressed, how employee suggestions and feedback have been processed, and how those suggestions have been integrated into revising the plan].

4. Preparation for Change in Operations Status

- [Insert company-specific procedures for the following:
    - Who will make the decision to slow or shut down operations and/or reduce to essential roles (e.g., based on change in community risk or government directives)?
    - How will this decision be made?
    - Who will communicate change in operations?
    - How will the change be communicated?
    - Who are the essential workers required for business continuity?
    - Who are the essential suppliers for business continuity?
    - Who are alternative suppliers based on potential supply chain disruption?
    - How will the information be disseminated throughout the organization?]

5. Educational Information on Aerosol Transmitted Diseases

- **Transmission of Respiratory Illness-General Facts:** Many respiratory diseases such as SARS, COVID-19, and the seasonal influenza flu are transmitted by small droplets or aerosols produced when an infected person coughs or sneezes, or when they shout or breathe hard. These droplets can enter

through the eyes or be inhaled by people in close proximity (≤ 6 feet) to an infected person. Another possible route of exposure to an individual is when that person touches a surface or object that is contaminated with a living virus and then subsequently touch their own mouth, nose, or their eyes. Each type of virus has varying life spans and capabilities of surviving on different types of surfaces or materials. Virus-containing droplet nuclei may also be spread through mechanical ventilation systems. Detailed information on how a virus is transmitted, its incubation time, signs and symptoms of the respiratory illness and available treatment options are best obtained from the CDC and WHO, community health agencies or your personal medical doctor.

- **Typical signs & symptoms of Aerosol Transmitted Diseases:** These respiratory diseases often have similar effects. The time that an infected person is contagious varies depending on the virus type. Some diseases are most contagious when the infected person is most symptomatic (i.e., experiencing fever, cough, and/or shortness of breath). Other diseases may be more contagious when the infected person is asymptomatic. Look for information released by the CDC and/or WHO on the characteristics and behavior of a specific viral disease. In general, these diseases will typically include the following signs & symptoms:

  - High fever (≥ 100.4° F) or feeling of high fever (chills);
  - Cough / sneezing, stuffy or runny nose;
  - Shortness of breath;
  - Muscle or body aches;
  - Fatigue (tiredness).

  COVID-19 symptoms may appear 2-14 days after exposure to the virus. People with these symptoms may have COVID-19 [Note: Check CDC website for updated information on symptoms associated with COVID-19]:
  - Fever or chills;
  - Cough;
  - Shortness of breath or difficulty breathing;
  - Fatigue;
  - Muscle or body aches;
  - Headache;
  - New loss of taste or smell;
  - Sore throat;
  - Congestion or runny nose;
  - Nausea or vomiting; and
  - Diarrhea.

Look for emergency warning signs for COVID-19. If someone is showing any of these signs, seek emergency medical care immediately:
  - *Trouble breathing;*
  - *Persistent pain or pressure in the chest;*
  - *New confusion;*
  - *Inability to wake or stay awake;*
  - *Bluish lips or face;*

- **Monitoring Public Health Alerts:** <mark>[Insert company name]</mark>' designated Infection Disease Control Coordinator(s) or Work Team will stay abreast of guidance from federal, state, local, tribal, and/or territorial health agencies, and consider how to incorporate their recommendations and resources into our workplace-specific plans including our business continuity plan, our emergency response plan, and all human resource policies addressing sick leave time off, remote work arrangements and other related employment benefits.

- **Education & Information Dissemination**: [Insert company name]'s designated Infection Disease Control Coordinator(s), Work Team or HR department will issue hazard alerts through our existing employee notification processes such as company intranet, emails, bulletin board postings, signs, posters and text messages. We will limit the source of these alerts and other related information to reliable organizations such as, but not limited to local or state health agencies, the CDC, WHO and OSHA.

  [Insert company name]'s EH&S department will issue toolbox topic documents that address the aerosol transmitted disease properties (e.g. routes of exposure, signs & symptoms, etc.) and refresher instruction or training on our company's exposure prevention plan and provide posters and signs to communicate social distancing recommendations, hygiene practices, wellness checks and other exposure prevention and control information.

6. Exposure Assessment and Action Plan to Prevent Exposure to Employees

- **Work-related exposure potential. [Insert company name]** will evaluate the potential sources of an infectious disease that could affect our employees. This includes where, how, and what sources of an infectious disease might our employees be exposed to, including:

  - The general public, customers, and coworkers;

  - Our business operations, worker interactions and proximity to each other, common areas of assembly & shared equipment use, etc.; and

  - Sick individuals or those at particularly high risk of infection (e.g., international travelers who have visited locations with widespread sustained (ongoing) infectious disease transmission, healthcare workers who have had unprotected exposures to people known to have, or suspected of having a respiratory illness caused by the known virus.

- **Non-work related exposures.** Non-occupational risk factors at home and in community settings will be identified and notices or hazard alerts will be distributed to our employees advising them of these risk factors and recommended practices to avoid exposure.

- **Employees' individual risk factors.** Notices or hazard alerts will be distributed to our employees advising them of risk factors that may affect them individually due to their social engagements, age, existing chronic medical conditions and immune-compromising conditions and pregnancy.

- **Implementation of Exposure Prevention Plan**. [Insert company name] will activate our exposure prevention plan in accordance to the hazard assessment procedure outlined in this policy section. Our company's business continuity plan will also be activated to address potential impacts related to employee absenteeism, disruptions to our supply chain, communication & delivery system challenges, resumption of work after any government order or directive requiring 'stay-at-home' conditions, and effects on delivering services or performing work for our clients and stakeholders. In addition, the business continuity plan will consider and prepare for orders or notices issued by federal and state, local, tribal, and/or territorial (SLTT) recommendations regarding contingency plans for situations that may arise such as:

  - Increased rates of worker absenteeism and loss of skilled workforce and critical services support and accommodating employee requests for time off to care for at-risk family members;

  - The need for social distancing, staggered work shifts, downsizing operations, providing services remotely, and other exposure-reducing measures;

- Options for conducting essential operations with a reduced workforce, including cross-training workers across different jobs in order to continue operations or deliver surge services; and

- Interrupted supply chains or delayed deliveries or interruption in transportation services needed to deliver our company's products.

Basic Infection Prevention Methods. The following steps and procedures will be communicated to our employees using options outlined in Section 5 of this policy.

- **Hygiene Practices:** **[Insert company name]** will implement good hygiene and infection control practices. We will promote and encourage our employees to frequently and thoroughly wash their hands. We will also provide workers, customers, and worksite visitors with a place to wash their hands. If soap and running water are not immediately available, we will provide alcohol-based hand rubs containing at least 60% alcohol.

- Encourage respiratory etiquette to our employees such as covering their coughs and sneezes using tissues or into their elbow sleeve.

- Provide customers and the public with tissues and trash receptacles and increase the frequency of disinfecting / sanitizing surfaces and trash collection.

- Our human resource department has established policies for some designated positions that may use flexible worksites (e.g., telecommuting work) and flexible work hours (e.g., staggered shifts), to increase the physical distance among employees and between employees and others if state and local health authorities recommend the use of social distancing strategies.

- Our employees will be discouraged from using other employees' phones, desks, offices, or other work tools and equipment, when possible.

- **Cleaning and Disinfecting:** Increase housekeeping activities based on CDC guidelines, including cleaning of common areas and disinfecting surfaces, equipment, and other elements of the work environment.

  - When choosing cleaning chemicals, our EHS department will obtain information on EPA-approved disinfectants (N-List) effective against emerging viral pathogens. Follow the manufacturer's instructions for use of all cleaning and disinfection products (e.g., concentration, application method and contact time, PPE, etc.).

  - **[Insert applicable company procedures for cleaning & disinfecting with the following considerations:**

    - **Does the current cleaning schedule allow for daily (or more frequent) cleaning and disinfecting of high-touch surfaces (e.g., handles, handrails)? If not, how will cleaning schedule be adjusted to account for increase in cleaning needs?**

    - **Do employees have available cleaning supplies to wipe down workspaces and shared spaces (if shared space is unavoidable)? If not, what is the plan to procure appropriate supplies or to reduce risk of exposure in other ways?**

    - **How will the areas where symptomatic employees have had contact be cleaned and disinfected?**

    - **Will there be additional cleaning between shifts? If so, how will the cleaning and disinfection be conducted?]**

- **Illness Reporting**. **[Insert company name]** encourages our employees to self-monitor for signs and symptoms of a viral infection if they suspect possible exposure. Refer to Appendix A of this policy for a self-assessment checklist that employees are to use to evaluate any symptoms they may be experiencing as well as a contact risk evaluation assessment.

- **Employee Notification Process:** **[Insert site-specific reporting protocol here. The actual process of notification after a confirmed COVID case will vary depending on organizational structure. What follows is a recommended notification structure:**

    – **Human Resources or COVID management team contacts employee to confirm the date of symptoms and dates when they were at the worksite. Employee identifies close contacts at work while symptomatic and indicates areas where s/he worked.**

    – **HR or management team contacts employee supervisor about confirmed COVID case.**

    – **Supervisor notifies site manager and individual department leads to make necessary changes in operations and initiate site cleaning/disinfection.**

    – **Supervisor or HR or management team informs the identified close contacts of employee using organizational talking points without disclosing the identity of employee.]**

- **Notification to Co-Workers of possible contact with COVID-19 positive individual**. **[Insert company specific instruction or guidance on notifying employees who may have been in close contact with a confirmed positive COVID-19 co-worker. Guidance for Communication with Other Employees:**

    – **We have been made aware that one of our coworkers has tested positive. This person is no longer in the workplace.**

    – **While you most likely were not in close contact or in the same area as this person for a sustained period of time, we are asking all employees to proactively self-assess their health before reporting to work, including taking their temperature before leaving home. You may want to seek the advice of a medical contact.**

    – **We have been increasing our common surface disinfecting for the past few weeks, and we will be closing off areas to allow even more time for cleaning.**

    – **All workers should continue to cover their nose and mouth with a tissue or the crook of their arm when they cough or sneeze. Refrain from touching your face. Continue to maintain social distancing. Do not come to work if you are feeling ill or exhibiting symptoms that are consistent with COVID-19.**

    – **If you feel ill or are exhibiting symptoms that are consistent with COVID-19, please follow the normal call off procedures and do not come to work. We are exercising flexibility in our handling of attendance related to COVID-19.**

    – **We'll do our best to answer your questions.**

- **Isolation of Potentially Infected Personnel.** Immediately isolate people who have signs and/or symptoms of a respiratory disease based on the instruction we have provided in our employee training. Move a potentially infectious person to a location away from other employees, customers, and other workers/visitors. Although our worksites do not have specific isolation rooms, designated areas with closable doors may serve as a temporary isolation room until a potentially sick person can be removed from the worksite and transported to a hospital or other medical clinic, or sent home.

- **Reduce the spread of aerosol contamination.** Take steps to limit spread of the respiratory secretions of a person who may have a viral disease. Provide a surgical face mask, if feasible and

available, and ask the person to wear it, if tolerated. This type of mask may be included in our first aid kits. Note: Surgical masks or otherwise known as a procedure mask used on a patient or other sick person should not be confused with the respiratory dust mask (filtering facepiece) that we provide as per our company's personal protective equipment SOP. These surgical masks contain potentially infectious respiratory secretions at the source (i.e., the infected person's nose and mouth) and are worn by the affected person to prevent the spread of the virus.

- **Separation of Potentially Infected Persons.** If possible, isolate people suspected of having a virus infection separately from those with confirmed cases of the virus to prevent further transmission— particularly in worksites where medical screening, triage, or healthcare activities occur, using either permanent (e.g., wall/different room) or temporary barrier (e.g., plastic sheeting).

- **Restricted Access.** Restrict the number of personnel entering isolation areas.

- **Protection for Personnel.** Protect workers in close contact with (e.g. within 6 feet) a sick person or who have prolonged or repeated contact with such persons by using additional engineering and administrative controls, safe work practices, and PPE as outlined in Section 7 of this policy that covers work spaces classified at medium and very high or high exposure risk.

7. **Hazard Controls & Assessment**

- **Hierarchy of Controls.** [Insert company name] uses a hazard control framework known as the "hierarchy of controls" to select the means of controlling workplace hazards. This hierarchy is utilized in all of our operational hazard assessment processes including our personal protective equipment (PPE) needs assessments. The best way to control a hazard is to systematically remove it from the workplace, rather than relying on workers actions and decision-making to reduce their exposure. During a virus outbreak, when it may not be possible to eliminate the hazard, the most effective protection measures are (listed from most effective to least effective): engineering controls, administrative controls, safe work practices (a type of administrative control), and PPE. There are advantages and disadvantages to each type of control measure when considering the ease of implementation, effectiveness, and cost. In most cases, a combination of control measures will be necessary to protect workers from exposure to these viruses.

- **Engineering Controls.** Engineering controls involve protecting employees from work-related hazards via mechanical systems or barriers. In workplaces where they are appropriate, these types of controls reduce exposure to hazards without relying on worker behavior and can be the most cost-effective solution to implement. Engineering controls for SARS-CoV-2 type viruses include:

  - Use of mechanical ventilation equipment with high-efficiency particulate air (HEPA) filters.

  - Increase ventilation rates supplying fresh air in the work environment.

  - Install physical barriers, such as clear plastic sneeze guards.

  - Specialized negative pressure ventilation in some settings, such as for aerosol generating procedures (e.g., airborne infection isolation rooms used in healthcare settings).

- **Administrative Controls.** Administrative controls require action by the worker or employer. Typically, administrative controls are changes in our company work policies or procedures to reduce or minimize exposure to a hazard. Examples of administrative controls for SARS-CoV-2 type of viruses include:

  - Implementing a self-monitoring & reporting protocol and encouraging sick workers to stay at home;

- Minimizing contact among employees, clients, and customers by replacing face-to-face meetings with virtual communications and implementing telework if feasible;

- Establishing alternating days or extra shifts that reduce the total number of employees in a facility at a given time, allowing them to maintain distance from one another while maintaining a full onsite work week.

- Discontinuing non-essential travel to locations with ongoing virus outbreaks. Regularly check CDC travel warning levels which are published on their website, https://www.cdc.gov/.

- **[Insert company name]** will implement our existing emergency communications plan that includes a forum or procedure for answering employees' concerns and internet-based communications.

- Provide our employees with up-to-date education and training on the virus risk factors and good exposure prevention behaviors (e.g., cough etiquette and care of PPE).

- Our employees who need to use PPE and equipment will receive training on how to put it on, use/wear it, and take it off correctly, including in the context of their current and potential duties.

- **Safe Work Practices.** These are types of administrative controls that include procedures for assigning and performing work in a manner that reduces the duration, frequency, or intensity of exposure to a hazard. Examples of safe work practices for SARS-CoV-2 type viruses include:

  - Provide resources and a work environment that promotes personal hygiene. This includes posting signs that communicate key CDC recommendations such as frequent hand washing, providing tissues, no-touch trash cans, hand soap, alcohol-based hand rubs containing at least 60 percent alcohol, disinfectants, and disposable towels for workers to clean their work surfaces.

  - Include exposure prevention tips and procedures in all tailgate safety meetings and pre-shift job safety analysis (JSA) sessions. That instruction should include employees to clean their hands often with an alcohol-based hand sanitizer that contains at least 60-95% alcohol, or wash their hands with soap and water for at least 20 seconds. Soap and water should be used preferentially if hands are visibly dirty. The practice of maintaining a 6-foot separation from co-workers and avoidance of large gatherings (more than 10) should also be reinforced.

- **Personal Protective Equipment**

  - While engineering and administrative controls are considered more effective in minimizing exposure to SARS-CoV-2 viruses, PPE may also be needed to prevent certain exposures. While correctly using PPE can help prevent some exposures, it should not take the place of other prevention strategies. Examples of PPE include gloves, goggles, face shields, filtering facepieces (dust masks), and other respiratory protection, when appropriate and based on **[Insert company name]**'s personal protective equipment SOP and our respiratory protection SOP that include medical screening, fit testing and equipment maintenance and cleaning procedures.

  - Workers, including those who work within 6 feet of individuals known to be, or suspected of being, infected with an infectious virus disease and those performing aerosol-generating procedures, need to use respirators. The National Institute for Occupational Safety and Health (NIOSH) guidelines recommend the use of an approved N95 filtering facepiece respirator or better. When disposable N95 filtering facepiece respirators are not available, consider using other respirators that provide greater protection and improve worker comfort. Other types of acceptable respirators include: R/P95, N/R/P99, or N/R/P100 filtering facepiece respirator; an air-purifying elastomeric (e.g., half-face or full-face) respirator with appropriate filters or cartridges; powered air purifying respirator (PAPR) with high-efficiency particulate (HEPA) filter; or supplied air respirator (SAR).

- **Multi-employer worksites:** For those operations and locations involving multiple employer activities (e.g., construction, well completions projects, etc.), steps should be taken to separate individuals at the recommended distance of 6 feet or greater.

  – Avoid hosting large group meetings. CDC recommends gatherings of no more than ten (10) people; and when meeting, that workers keep a 6 foot distance between each other. Tailgate safety meetings and JSA sessions may need to be conducted in smaller groups.

  – Discourage hand-shaking and other contact type of greetings.

  – Perform meetings online or via conference call whenever possible.

  – Do not congregate in lunch areas or small rooms.

  – Do not share tools.

  – Do not share PPE.

  – Sanitize reusable PPE per manufacturer's recommendation prior to each use and ensure used PPE is disposed of properly.

  – Utilize disposable gloves where appropriate; Instruct workers to wash hands after removing gloves.

  – Disinfect reusable supplies and equipment.

  – Identify specific locations and practices for daily trash such as: paper, hand towels, food containers, etc. Instruct workers responsible for trash removal in proper PPE and hand washing practices.

  – Provide routine environmental cleaning (doorknobs, keyboards, counters, and other common area surfaces).

  – Do not use a common water cooler. Provide individual water bottles or instruct workers to bring their own.

  – Instruct workers to change work clothes prior to arriving home and to wash clothes in hot water with laundry sanitizer.

  – Utilize disposable hand towels and no-touch trash receptacles.

  – Request additional/increased sanitation (disinfecting) of portable toilets.

  – Avoid cleaning techniques, such as using pressurized air or water sprays that may result in the generation of bio-aerosols.

  – **[Insert company specific / site-specific screening procedures here, including any use of non-contact temperature checks, controlled site access, etc. Supervisors should ask the following questions to all employees prior to entering the jobsite. If they answer "yes" to any, they should be asked to leave the jobsite immediately. Anyone asked to leave should not return to work until 24-hours after they are free from a fever or signs of a fever without the use of fever-reducing medication.**

    - **Have you, or anyone in your family, been in contact with a person that has tested positive for the suspected virus?**

    - **Have you, or anyone in your family, been in contact with a person that is in the process of being tested for the suspected virus?**

    - **Have you, or anyone in your family traveled outside of the U.S. within the last two weeks (if the threat is a pandemic event with known 2 weeks incubation period).**

    - **Have you been medically directed to self-quarantine due to possible exposure to the suspected virus?**

- **Are you having trouble breathing or have you had flu-like symptoms within the past 48 hours, including: fever, cough, shortness of breath, sore throat, runny/stuffy nose, body aches, chills, loss of taste and smell, or fatigue?**

8. **SARS-CoV-2 Virus Contact Tracing & Return to Work Strategy**

[Insert company name] will implement the following procedures to conduct contact tracing investigations when an employee has been confirmed to have been infected with COVID-19 and the protocol that will be used to determine the end of isolation and safe return of that employee to the workplace. These procedures are based upon CDC guidelines, https://www.cdc.gov/coronavirus/2019-ncov/community/worker-safety-support/hd-testing.html?deliveryName=USCDC_2067-DM30653. The following CDC website discusses the various types of tests that may be used to determine whether or not an employee is infected with COVID-19 or has antibodies indicated they were infected but no longer carrying an active SARS-CoV-2 virus. https://www.cdc.gov/coronavirus/2019-ncov/hcp/testing-overview.html?deliveryName=USCDC_2067-DM30653

- [Insert company-specific procedures for the actions that will be taken when an employee has been tested and confirmed positive for COVID-19. These procedures should include notification to the CDC or local health departments for the purpose of tracking the spread of the virus and the public health threat and response tactics. Refer to CDC site: https://www.cdc.gov/coronavirus/2019-ncov/php/open-america/contact-tracing-resources.html

- [Insert site-specific or company-specific procedures here. Return to work strategies include symptom-based criteria or viral test-based strategies. These instructions will guide management in determining when an infected employee is no longer carrying an active virus and may return to work at no risk to co-workers.

9. **Remote Telework Policy & Procedures**

The following policies have been established to address those circumstances involving a government order to quarantine or our company's voluntary actions to shut down our offices as a means to reduce the community spread of an infectious virus. These represent temporary measures that may be necessary to address *an active virus infection event* and would be subject to change as a situation evolved and would be revoked after such time that the threat of the community-spread virus has been determined to no longer exist or the government order has been rescinded.

- Office closures will be determined based on the recommendation of federal and local government agencies.

- **[Insert company name]**'s Human Resource department or Executive Management will take the lead on communicating/approving all messaging related to official announcements on voluntary telework options and potential office closures.

- We will make voluntary telework available as positions and resources allow in cases of possible exposures, school closures, quarantines, upon the establishment of containment areas, or based on local government recommendations. Employees without the ability to work from home, either due to the nature of their role or due to resource constraints, will be expected to work from a company office or use personal leave time off. Alternative or staggered scheduling will be made available, as is feasible.

- We will mandate telework scenarios upon **official office closures** for those employees able to work remotely. If the nature of an employee's role or resource constraints prevent an employee from working remotely and their home office is officially closed, we will provide up to a maximum of **[*insert allowed time*]** weeks of base pay continuation. Should an office closure extend beyond this time period, employees without the ability to telework may be required to use PTO.

- Employees who are ill are strongly encouraged to stay home. Those with infectious virus symptoms should consult their medical provider. Employees who test positive for a known virus are requested to contact HR immediately. Appropriate steps will be taken to support the health and safety of all employees while protecting the identity of the employee(s) diagnosed.

- An employee who tests positive or has a family member in their household test positive for a known virus will receive up to a maximum of **[*insert allowed time*]** weeks of base pay continuation and may qualify for state and/or federal job protected leave. Employees with absences related to a known virus diagnosis which extend beyond **[*insert allowed time*]** weeks may be required to use PTO.

Appendix A: Self-Reporting Questionnaire for COVID-19 Screening

The safety of our employees is our overriding priority. Please respond to each question truthfully and to the best of your ability. In order to prevent the spread of the coronavirus and reduce the potential risk of exposure to our workforce, we are asking everyone to take this health screening before leaving for the office each day.

Representations		
1	Are you currently experiencing, or have you experienced in the past 14 days, any of the following symptoms? Yes ☐ No ☐ Fever of 100.4°F/37.8°C or greater (as taken on an oral thermometer) Yes ☐ No ☐ Cough or sore throat Yes ☐ No ☐ Shortness of breath or difficulty breathing Yes ☐ No ☐ New loss of taste or smell Yes ☐ No ☐ Nausea, diarrhea, vomiting, chills Yes ☐ No ☐ Head or muscle aches	
2	In the past 14 days, have you been in close proximity to anyone who was experiencing any of the above symptoms or has experienced any of the above symptoms since your contact?	Yes ☐ No ☐
3	In the past 14 days, have you been in close proximity to anyone who has tested positive for COVID-19?	Yes ☐ No ☐
4	Have you been tested for COVID-19 and are waiting to receive test results?	Yes ☐ No ☐
5	Have you have tested positive for COVID-19, or are you presumptively positive for COVID-19 based on your healthcare provider's assessment or your symptoms? *NOTE: If you have tested positive for COVID-19 or have been presumptively positive for COVID-19 based on your healthcare provider's assessment or your symptoms, please contact your manager or Human Resources representative when: (1) you have had no fever for at least 72 hours (three full days), without the use of fever-reducing medications; (2) your other symptoms have improved; **and** at least 7 days have elapsed since your symptoms first appeared.*	Yes ☐ No ☐
6	In the past 14 days, have you been in close proximity to anyone who has been on a commercial flight or traveled outside of the United States?	Yes ☐ No ☐
7	Is there any reason why you feel you are at higher risk of contracting COVID-19 or experiencing complications from COVID-19 by entering the facility?	Yes ☐ No ☐

If you answered <u>YES</u> to any of these questions, please stay home and notify your manager that you will not be coming into the office.

CDC Guidance for Preventing COVID-19 at Work:

- Stay home if you are sick, except to get medical care.
- Inform HR if you have a sick family member at home with COVID-19.
- Wash your hands often with soap and water for at least 20 seconds. Use hand sanitizer with at least 60% alcohol if soap and water are not available.
- Avoid touching your eyes, nose, and mouth with unwashed hands.
- Cover your mouth and nose with a tissue when you cough or sneeze or use the inside of your elbow. Throw used tissues in the trash and immediately wash hands or use hand sanitizer.
- Clean AND disinfect frequently touched objects and surfaces such as workstations, keyboards, telephones, handrails, and doorknobs.
- Avoid using other employees' phones, desks, offices, or other work tools and equipment.
- Practice social distancing by avoiding large gatherings and maintaining distance (approximately 6 feet or 2 meters) from others when possible.

Please Be Aware*: Older adults and those who have severe underlying chronic medical conditions such as heart or lung disease or diabetes seem to be at higher risk for developing more serious complications from COVID-19 illness.*
For more information, visit https://www.cdc.gov/coronavirus/2019-ncov/need-extra-precautions/people-at-higher-risk.html

Any questions should be directed to your manager or your Human Resources representative.

I have read, understand, and agree to adhere to all provisions of our Company's Infectious Disease Preparedness & Response Plan and the requirements of self-monitoring and reporting of any COVID-19 related symptoms, potential exposure, or confirmed infection (e.g. test results) until our Company notifies me that one or more of the policy practices are no longer in effect.

_____   _____

EMPLOYEE SIGNATURE   **DATE**

Employee Printed Name: _____

Employee ID#: _____

(Signed and dated copy to be kept in employee file)

Appendix B – Guidance for developing a COVID-19 Preparedness Plan

General
CDC Coronavirus (COVID-19) – www.cdc.gov/coronavirus/2019-nCoV
CDC COVID-19 Newsletter & Alerts: https://tools.cdc.gov/campaignproxyservice/subscriptions.aspx

Businesses
CDC Resources for businesses and employers –
www.cdc.gov/coronavirus/2019-ncov/community/organizations/businesses-employers.html

CDC General Business frequently asked questions –
www.cdc.gov/coronavirus/2019-ncov/community/general-business-faq.html

Federal OSHA – https://www.osha.gov/SLTC/covid-19/

OSHA Frequently Asked Questions: https://www.osha.gov/SLTC/covid-19/covid-19-faq.html

OSHA QuickTakes COVID Alerts Newsletter Subscription: https://www.osha.gov/quicktakes/

Handwashing
- www.cdc.gov/handwashing/when-how-handwashing.html
- www.cdc.gov/handwashing
- https://youtu.be/d914EnpU4Fo

Respiratory etiquette: Cover your cough or sneeze
- www.cdc.gov/coronavirus/2019-ncov/prevent-getting-sick/prevention.html
- www.cdc.gov/healthywater/hygiene/etiquette/coughing_sneezing.html

Social distancing
- https://www.cdc.gov/coronavirus/2019-ncov/community/guidance-business-response.html#more-changes

Housekeeping
- www.cdc.gov/coronavirus/2019-ncov/community/disinfecting-building-facility.html
- www.cdc.gov/coronavirus/2019-ncov/prevent-getting-sick/disinfecting-your-home.html
- www.epa.gov/pesticide-registration/list-n-disinfectants-use-against-sars-cov-2
- www.cdc.gov/coronavirus/2019-ncov/community/organizations/cleaning-disinfection.html

Facial Coverings vs. Respirators (e.g., N95)
- https://www.cdph.ca.gov/Programs/CID/DCDC/Pages/Face-Coverings-Guidance.aspx
- https://www.cdc.gov/coronavirus/2019-ncov/prevent-getting-sick/cloth-face-cover-guidance.html
- https://www.osha.gov/SLTC/covid-19/covid-19-faq.html#cloth-face-coverings
- https://www.cdc.gov/niosh/npptl/respirators/testing/NonNIOSHresults.html

Employees exhibiting signs and symptoms of COVID-19

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

- https://www.osha.gov/SLTC/covid-19/medicalinformation.html#exposed_infected

Planning & Response

- www.cdc.gov/coronavirus/2019-ncov/community/guidance-small-business.html

- www.osha.gov/Publications/OSHA3990.pdf

Return-to-Work Procedures & Strategies

- https://www.assp.org/news-and-articles/2020/04/02/covid-19-when-to-return-to-work

- https://www.nsc.org/work-safety/safety-topics/safe-actions-for-employee-returns-safer

- https://www.osha.gov/Publications/OSHA4045.pdf

- https://docs.google.com/spreadsheets/d/1HyOtS2WQnVc8x9sETxgk10lF_YRBgro6VVrHMjZ1xSI/edit#gid=1917118704

- https://www.nsc.org/work-safety/safety-topics/safe-actions-for-employee-returns-safer/safer-playbooks

- https://safety.nsc.org/organization-vulnerability-tool

Testing & Contact Tracing

- https://www.cdc.gov/coronavirus/2019-ncov/community/worker-safety-support/hd-testing.html?deliveryName=USCDC_2067-DM30653

- https://www.cdc.gov/coronavirus/2019-ncov/community/strategy-discontinue-isolation.html

- https://www.cdc.gov/coronavirus/2019-ncov/hcp/testing-overview.html?deliveryName=USCDC_2067-DM30653

- https://www.cdc.gov/coronavirus/2019-ncov/php/open-america/contact-tracing-resources.html

- https://www.cdc.gov/coronavirus/2019-ncov/php/contact-tracing/identify-primary-components-of-contact-tracing.html

Training Resources

- https://tools.niehs.nih.gov/wetp/covid19worker/index..cfm

- http://covid.elcosh.org/search/category-4/Training+Resources

- https://www.who.int/emergencies/diseases/novel-coronavirus-2019/training/online-training

- https://www.osha.gov/video/