*This plan shall remain in effect until superseded by a newer revision or canceled in whole or in part due to a significant change in the pandemic situation.*

Due to widespread community transmission in the United States and Canada, [COMPANY] is implementing mitigation activities to help slow the spread of respiratory virus infections including the novel coronavirus COVID-19. These approaches are being implemented to protect our employees, families, customers, and communities, to minimize the morbidity and mortality of COVID-19, to protect the healthcare system, and minimize the social and economic impacts.

This mitigation strategy adheres to the recommendations the U.S. Centers for Disease Control (CDC) current “Interim Guidance for Businesses and Employers”.

[COMPANY] has implemented a COVID-19 Preparedness and Response Team, consisting of Senior Management, Risk Management, Environmental Safety and Health, and Human Resources personnel from [COMPANY] to monitor and manage this situation – and this COVID-19 Pandemic Response Plan. This team meets [frequency] and provides regular updates and contact information for employees to stay abreast and involved.

This COVID-19 Pandemic Response Plan is divided into several categories, as follows:

1. Environmental and Personal Hygiene
	1. Personal Considerations
	2. Routine Enhanced Cleaning
2. Social Distancing
	1. Meetings & Functions
	2. Meal and Rest Breaks
	3. Office Work
	4. Working from Home
	5. Production Facility and Field Work Environments (Reference Work Site Safety Protocols)
3. Visitors
4. Travel
5. Response to School or Care Facility Closure
6. If You May Have Been Exposed
7. If You or a Member of Your Household Experience Symptoms
8. Isolation vs Quarantine
9. Telemedicine
10. Employee Assistance Programs
11. Adhering to Customer and Public Health Policy
12. Appendix A – Cleaning and Disinfecting Surfaces
13. Appendix B – Work Site Safety Protocols
14. Appendix C – Visitor, Returning, & New Employee Questionnaire
15. Appendix D – Potential Exposure Assessment

**ENVIRONMENTAL AND PERSONAL HYGIENE**

**Personal Considerations**

**Clean your hands often**

* Wash your hands often with soap and water for at least 20 seconds especially after you have been in a public place, or after blowing your nose, coughing, or sneezing.
* If soap and water are not readily available, use a hand sanitizer that contains at least 70% alcohol. Cover all surfaces on your hands and rub them together until they feel dry.
* Avoid touching your eyes, nose, and mouth with unwashed hands.

**Cover coughs and sneezes**

* Cover your mouth and nose with a tissue when you cough or sneeze or use the inside of your elbow.
* Throw used tissues in the trash.
* Immediately wash your hands with soap and water for at least 20 seconds. If soap and water are not readily available, clean your hands with a hand sanitizer that contains at least 70% alcohol.

**Stay home if you’re sick**

If you experience any respiratory illness symptoms (including fever, cough, sore throat, difficulty breathing, or shortness of breath), please call your supervisor and STAY HOME. You MUST STAY HOME from work if you have any respiratory illness symptoms. If you present to work with respiratory illness symptoms you will be immediately sent home.

If you have a member of your household that has these symptoms and you need to care for them - please STAY HOME with them.

Consult the “IF YOU OR A MEMBER OF YOUR HOUSEHOLD EXPERIENCE SYMPTOMS” section (page 8) of this Pandemic Response Plan for more information.

**Routine Enhanced Cleaning**

**Fixed Facilities**

In our fixed facilities we have implemented routine enhanced cleaning protocols, including disinfecting all shared touch surfaces such as light switches, doorknobs, vending machines, counters, tables, and other shared surfaces. These surfaces are now disinfected daily using a disinfectant and cleaning practices adhering to the CDC’s “Environmental Cleaning and Disinfection Recommendations”.

<https://www.cdc.gov/coronavirus/2019-ncov/community/organizations/cleaning-disinfection.html>

**Production Facilities and Field Work Environments**

In production facilities and field work environments the routine enhanced cleaning protocols of fixed facilities shall also be utilized for production equipment and work area controls, touch screens, shared tools, vehicle controls, and other frequently touched surfaces.

**SOCIAL DISTANCING**

Social distancing is a public health practice that aims to prevent sick people from coming in close contact with healthy people in order to reduce opportunities for disease transmission. It can include large-scale measures like canceling group events or closing public spaces, as well as individual decisions such as avoiding crowds or creating space between yourself and others.

According to the Public Health Agency of Canada (PHAC) and the U.S. Centers for Disease Control (CDC) it is recommended to establish approximately 6 feet or two meters between individuals when actively practicing social distancing.

* **ESTABLISH AND MAINTAIN AT LEAST 6 FEET OF SPACE BETWEEN INDIVIDUALS AT ALL TIMES. THIS IS ESSENTIAL TO YOUR SAFETY, PUBLIC SAFETY, AND OUR INDUSTRY.**
* Stop physical interactions such as shaking hands or other physical greetings.
* Meals and rest breaks should be taken while practicing social distancing.
* Essential meetings such as pre-shift safety job briefings and operational meetings should continue to occur, with 6 foot employee spacing incorporated.
* PPE such as safety glasses, gloves, respiratory protection, and hearing protection should not be shared between employees.
* Employees should not carpool to and from work in order to maintain appropriate distancing between employees.

**Team Activities**

* Employees conducting team activities that require individuals to work closer than 6 feet from each other shall consult their supervisor and perform a Job Hazard Analysis before performing such work.
* If an activity requires individuals to work closer than six feet from each other – such as when a “team lift” is required – wear appropriate PPE to prevent the respiratory droplets of one employee from contacting the other’s mucus membranes. This could include employees wearing:
	+ A face shield and safety glasses or goggles
	+ A “cloth face cover” (as per CDC guidance) and safety glasses or goggles
	+ An N-95 “dust mask” style respirator (when available and there is no shortage for healthcare and first responder workers) and safety glasses or goggles
	+ Another form of effective containment for potential respiratory emissions and safety glasses or goggles, to be identified in the Job Hazard Analysis
* DO NOT touch your face while conducting a team activity.
* Employees performing team activities shall immediately clean their hands after the activity is completed.
* If the handling of documentation or tickets create a team activity, perform a Job Hazard Analysis with your supervisor to determine methods such as e-tickets, a drop box, etc. that would limit the need to be within 6 feet of each other for document and ticket gathering.

**Meetings and Functions**

* We are currently restricting employees from attending non-essential business meetings, functions, or conferences.
* Where possible, internal meetings should be conducted by phone or videoconferencing to limit large meetings.
* Avoid large group events and crowds outside of work as well.
* Where in-person meetings will be conducted, ensure meeting spaces are large enough to establish at least a 6-foot spacing between participants.

**Meal and Rest Breaks**

While this COVID-19 Pandemic Plan is in effect employees are encouraged to take their meal and rest breaks in areas that are subject to routine enhanced cleaning and while practicing social distancing. This includes designated break areas, but could also include other areas inside or outside facilities as long as there is no elevated risk to the safety & health of the employee while resting, eating, or drinking in the area. (For example, work areas where chemicals and other potentially hazardous materials were used still remain unacceptable break areas.)

**Office Work**

Office environments should enact measures to allow for spacing of a minimum of 6 feet (approximately 2 meters) between individuals or allow for physical separation (such as walls or cubicle dividers) between workers to actively practice social distancing.

**Working From Home**

Some facilities may find that non-operational office functions can be effectively completed while “telecommuting” – working from home. However, this is only if the essential functions of the position can be satisfactorily completed at home and while regular business communications during normal business hours can be maintained. All managers of personnel who could potentially telecommute shall evaluate and develop a work-from-home plan to the degree necessary to create – at a minimum – clearly effective social distancing between team members.

Some facilities may choose to extend telecommuting to a rotational schedule to reduce the number of employees in the office at any given time during the pandemic. An example of a telecommuting rotation could include:

* A weekly rotation could consist of about 50% of employees in the office and 50% of employees working from home.
* Each week, the department will alternate who is in the office and who is working from home.
* It will be up to each business unit/department and their management to establish the teams and the rotation and make any adjustments that are necessary for optimal business continuity.

Working from home or “telecommuting” will not be available for functions that cannot successfully be completed remotely on a consistent basis.

**Production Facility and Field Work Environments**

* Please consult **Appendix B – Work Site Safety Protocols**.
* Employees conducting activities in production and field work environments should establish spacing of a minimum of 6 feet (approximately 2 meters) between individuals when actively practicing social distancing.
* Essential meetings such as pre-shift safety job briefings and operational meetings should continue to occur, with increased employee spacing incorporated.
* PPE such as safety glasses, gloves, respiratory protection, and hearing protection should not be shared between employees.

**VISITORS**

While this COVID-19 Pandemic Response Plan is in effect facilities shall restrict any non-essential visitors to [COMPANY] facilities. Any potentially essential visitors shall complete the [COMPANY] Visitor Health Screening Questionnaire and submit it to their [COMPANY] employee host - preferably prior to their arrival.

**TRAVEL**

Employees shall immediately suspend all nonessential travel. Currently all work-related travel requires management evaluation and approval, which shall include:

* An evaluation of the necessity of the travel
* Considering any employee concerns
* An evaluation of technology options to conduct the business remotely
* CDC travel recommendations
* Customer requirements and limitations

**RESPONSE TO SCHOOL OR CHILDCARE FACILITY CLOSURE**

We recognize the need to partner with employees to find effective ways to deal with childcare needs in light of school and childcare facility closures. We will be working with employees that have concerns about childcare to explore options such as:

* Is there a trusted contact that could watch your children while you’re at work?
* What are your childcare plans for spring and summer break and can those be implemented in some way now?
* Could you, your significant other, and/or another trusted contact inquire about modifying your work hours to allow for an effective childcare schedule?

We will work to implement flexible ways to assist employees to meet their childcare needs.

We will also implement any employee leave and/or childcare policies developed by government and/or public health agencies in jurisdictions that have such policies or laws.

**IF YOU MAY HAVE BEEN EXPOSED**

The following strictly adheres to the U.S. Centers for Disease Control (CDC) “*Public Health Recommendations for Community-Related Exposure*” published March 30, 2020.

<https://www.cdc.gov/coronavirus/2019-ncov/php/public-health-recommendations.html>

If you currently have no symptoms of respiratory illness, but you may have been exposed to someone who is known to have COVID-19 or is medically suspected to have COVID-19, please review and complete the following:

|  |  |
| --- | --- |
| Step 1 | Have you potentially been exposed to someone who is now displaying or was previously displaying symptoms such as fever, cough, and shortness of breath and has been diagnosed with COVID-19 or is medically suspected of potentially having COVID-19? |
|  | [ ]  YES – Continue to Step 2. | [ ]  NO – Skip to Step 5. |
| Step 2 | If you answer YES to any of the following, continue to Step 3. If you answer NO to all of the following, skip to Step 5. |
|  | Were you exposed to them when they had they symptoms?  | [ ]  YES / [ ]  NO |
|  | Were you exposed to them within 2 days (48 hours) before they had the symptoms? | [ ]  YES / [ ]  NO |
|  | Were you exposed to them within 3 days (72 hours) after their symptoms and fever\* disappeared? | [ ]  YES / [ ]  NO |
|  | Were you exposed to them within 7 days after their symptoms first appeared?  | [ ]  YES / [ ]  NO |
| Step 3 | If you answer YES to any of the following, continue to Step 4. If you answer NO to all of the following, skip to Step 5. |
|  | If you answered YES to #1 and #2 above, is this person a member of your household? | [ ]  YES / [ ]  NO |
|  | If you answered YES to #1 and #2 above, is this person an intimate partner? | [ ]  YES / [ ]  NO |
|  | If you answered YES to #1 and #2 above, is this person someone who you are providing care for without using CDC recommended infection control precautions? | [ ]  YES / [ ]  NO |
|  | If you answered YES to #1 and #2 above, is this person someone who you have had close contact with (within 6 feet)\*\* for a prolonged period of time\*\*\* without utilizing additional approved protective measures such as a face mask? | [ ]  YES / [ ]  NO |
| Step 4 | Employer and CDC Recommended Precautions |
|  | * Contact your supervisor and health care provider immediately, and- based on your supervisor and health care provider recommendations, choose either:
	+ 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\*, cough, shortness of breath, OR:
	+ Follow the CDC Safety Practices for returning to work including pre-screening, regular monitoring, wearing a mask at all times, social distancing, and cleaning and disinfecting work spaces – only with supervisor approval.
* Avoid contact with people at higher risk for severe illness (unless they live in the same home and had same exposure) (See CDC web page “People who are at higher risk for severe illness”)
* Follow CDC guidance if symptoms develop (See CDC web page “What To Do If You Are Sick”)
* Contact your company Human Resources contact for information about Sick and Family Leave policies.
 |
| Step 5 | All U.S. residents, other than those answering YES above |
|  | * Are considered as possible unrecognized COVID-19 exposures in U.S. communities.
* Should be alert for symptoms, including
	+ Watch for fever\*, cough, or shortness of breath
	+ Take temperature if symptoms develop
* Should practice social distancing
	+ Maintain 6 feet of distance from others
	+ Stay out of crowded places
* Should follow CDC guidance if symptoms develop (See CDC web page “What To Do If You Are Sick”)
 |

\*For the purpose of this guidance, fever is defined as subjective fever (feeling feverish) or a measured temperature of 100.4oF (38oC) or higher. 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).

\*\* Data are limited to define of 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 facemask (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. Recommendations vary on the length of time of exposure from 10 minutes or more to 30 minutes or more. In healthcare settings, it is reasonable to define a prolonged exposure as any exposure greater than a few minutes because the contact is someone who is ill. 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.

**IF YOU OR A MEMBER OF YOUR HOUSEHOLD EXPERIENCE SYMPTOMS**

If you experience any respiratory illness symptoms (including fever, cough, sore throat, difficulty breathing, or shortness of breath), please call your supervisor and STAY HOME. You MUST STAY HOME from work if you have any respiratory illness symptoms. If you present to work with respiratory illness symptoms you will be immediately sent home.

If you have a member of your household that has these symptoms and you need to care for them - please STAY HOME with them.

If a doctor confirms that you DO NOT have COVID-19 and/or that you do not qualify to be tested for COVID-19, you may come back to work once your fever and symptoms have stayed away for at least 24 hours without the aid of fever-reducing medications.

If you are diagnosed with COVID-19, you must follow the CDC guidelines for care and when you can discontinue isolation. (Consult the CDC COVID-19 “What To Do If You’re Sick” web page.)

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

As per the CDC on the date of this edition of the Pandemic Plan, people with COVID-19 who have stayed home (home isolated) can stop home isolation under the following conditions:

1. You have had no fever for at least 72 hours (that is three full days of no fever without the use medicine that reduces fevers), *AND*
2. other symptoms have improved (for example, when your cough or shortness of breath have improved), *AND*
3. at least 7 days have passed since your symptoms first appeared. *(continued next page)*

Please check the CDC website for the most current recommendations for discontinuing home isolation.

You must also discuss your potential return-to-work options with your company Human Resources personnel before planning any return to work. We will follow the CDC guidelines, public policy in the appropriate jurisdiction, and the appropriate healthcare provider requirements before allowing any employee experiencing symptoms to return to work.

**COVID-19 “Isolation” vs “Quarantine”**

According to the CDC, there is a difference between "isolation" and "quarantine":

"**Isolation”** means 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."

"**Quarantine”** in general means 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."

In short, **Isolation** is for those that do have or are suspected of having COVID-19, and **Quarantine** is for those that are suspected to have been exposed but are not yet symptomatic.  The period of time you have to be **isolated** if you are sick may actually be less than the period of time you'll need to be **quarantined** if you're suspected of being exposed.

The period of time you'll need to be **Isolated** is listed in this Plan in the “IF YOU OR A MEMBER OF YOUR HOUSEHOLD EXPERIENCE SYMPTOMS” section.

The period of time you'll need to be **Quarantined** is defined by the CDC as:

**"Quarantine** means separating a person or group of people who have been exposed to a contagious disease but have not developed illness (symptoms) from others who have not been exposed, in order to prevent the possible spread of that disease. Quarantine is usually established for the incubation period of the communicable disease, which is the span of time during which people have developed illness after exposure. For COVID-19, **the period of quarantine is 14 days** from the last date of exposure, because 14 days is the longest incubation period seen for similar coronaviruses. Someone who has been released from COVID-19 quarantine is not considered a risk for spreading the virus to others because they have not developed illness during the incubation period."

**TELEMEDICINE**

Please use the [COMPANY] telemedicine provider to discuss your illness with a doctor over the phone and get more information on what you’re feeling. More information on the [COMPANY] telemedicine provider is available …

[COMPANY]  **EMPLOYEE ASSISTANCE PROGRAM (EAP)**

If you’re feeling anxious about the coronavirus - you’re not alone. There are many resources available via our Employee Assistance Program to address any concerns you may have. From mindfulness exercises to free access to licensed counselors anytime day or night – 24/7 – the [COMPANY] EAP system can provide an outlet for you to express any anxiety you may be experiencing. You can talk, text, or chat completely confidentially or just search through all of the helpful and calming videos, exercises, and resources any time. Visit [COMPANY] EAP website and ask your Human Resources contact if you need log-in information.

**ADHERING TO CUSTOMER AND GOVERNMENTAL PUBLIC HEALTH POLICY**

If a customer requires actions which are in excess of or different from this policy and requires our personnel to adhere to their policy, we shall adhere to the contract requirements with such customers to ensure that our operations are in compliance with our agreements.

If a governmental public health policy or law requires actions with are in excess of or different from this policy we shall adhere to such governmental public health policy or law in the jurisdiction within which they apply.

**Appendix A – Cleaning & Disinfecting Procedures**

Any persons that fall into a higher risk category should not be performing cleaning or disinfecting of suspected potentially contaminated areas – such as the workspace of an employee that exhibited symptoms of COVID-19.

*From the U.S. Centers For Disease Control (CDC) “Clean & Disinfect - Interim Recommendations for US Households with Suspected/Confirmed Coronavirus Disease 2019”*

**How to Clean and Disinfect:**

* 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. Wash 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, diluted household bleach solutions, alcohol solutions with at least 70% alcohol, and most common EPA-registered household disinfectants should be effective.
	+ Diluted household bleach solutions can be used if appropriate for the surface. Follow manufacturer’s instructions for application and proper ventilation. Check to ensure the product is not past its expiration date. Never mix household bleach with ammonia or any other cleanser. Unexpired household bleach will be effective against coronaviruses when properly diluted.
		- Prepare a bleach solution by mixing:
			* 5 tablespoons (1/3rd cup) bleach per gallon of water or
			* 4 teaspoons bleach per quart of water
	+ Products with EPA-approved emerging viral pathogens claims are expected to be effective against COVID-19 based on data for harder to kill viruses. Follow the manufacturer’s instructions for all cleaning and disinfection products (e.g., concentration, application method and contact time, etc.).
* For soft (porous) surfaces such as carpeted floor, rugs, and drapes, remove visible contamination if present and clean with appropriate cleaners indicated for use on these surfaces. After cleaning:
	+ Launder items as appropriate in accordance with the manufacturer’s instructions. If possible, launder items using the warmest appropriate water setting for the items and dry items completely, or
	Use products with the EPA-approved emerging viral pathogens claims that are suitable for porous surfaces.

**Appendix B – WORK SITE SAFETY PROTOCOLS**

[COMPANY] has implemented and is utilizing the [COMPANY] COVID-19 Pandemic Response Plan. This plan is a comprehensive guide to establish, maintain, and monitor work areas, personnel, and activities in accordance with the U.S. Centers for Disease Control (CDC) guidance and recommendations.

These COVID-19 Work Site Safety Protocols are designed to provide a framework of practices that will allow us to meet or exceed the CDC recommendations and our Pandemic Response Plan. These protocols are requirements - and shall be followed at all times by all personnel.

**Training & Education**

The following CDC materials shall be provided to and reviewed with all personnel:

* **“What You Need To Know About Coronavirus Disease 2019 (COVID-19)”**
* **“Share Facts About COVID-19”**
* **“Stop The Spread Of Germs”**
* **“Steps To Help Prevent The Spread Of COVID-19 If You Are Sick”**

**Monitor Your Health**

All new employees, any employee returning from a period away from work of 14 days or more, or any employee returning from a vacation leave shall complete the “[COMPANY] COVID-19 Health Screening Questionnaire” and review the completed form with their supervisor.

All current employees must report the development of any respiratory illness symptoms (including fever, cough, sore throat, difficulty breathing, or shortness of breath) in themselves or any of their close contacts to their supervisor immediately upon learning of such symptoms. CALL your supervisor – DO NOT REPORT TO WORK WITH SYMPTOMS.

You may also be asked to allow for your temperature to be taken by a non-contact method that protects both you and the person taking your temperature. You are required to allow for your temperature to be taken, complete the COVID-19 Health Screening Questionnaire, and answer any questions your supervisor or a member of management asks you concerning your health – specifically related to COVID-19.

**Clean and Disinfect**

Cleaning and disinfecting supplies will be made available at each plant, shop, office, and jobsite.

* Operators are responsible to clean and disinfect the common touch and contact surfaces of their equipment and tools before each shift and whenever there is an operator change.
* Drivers are responsible to clean and disinfect the common touch and contact surfaces of their vehicle and tools before each shift and whenever there is a driver change.
* Laborers are responsible to clean and disinfect the common touch surfaces of any vehicle they operate and any tools before use. To the degree possible tools should not be shared, but if they are they should be disinfected before each use.

**Keep Effective Worker Spacing (“Social Distancing”)**

* **ESTABLISH AND MAINTAIN AT LEAST 6 FEET OF SPACE BETWEEN INDIVIDUALS AT ALL TIMES. THIS IS ESSENTIAL TO YOUR SAFETY, PUBLIC SAFETY, AND OUR INDUSTRY.**
* Stop physical interactions such as shaking hands or other physical greetings.
* Meals and rest breaks should be taken while practicing social distancing.
* Essential meetings such as pre-shift safety job briefings and operational meetings should continue to occur, with 6 foot employee spacing incorporated.
* PPE such as safety glasses, gloves, respiratory protection, and hearing protection should not be shared between employees.
* Employees should not carpool to and from work in order to maintain appropriate distancing between employees.

**Team Activities**

* Employees conducting team activities that require individuals to work closer than 6 feet from each other shall consult their supervisor and perform a Job Hazard Analysis before performing such work.
* If an activity requires individuals to work closer than six feet from each other – such as when a “team lift” is required – wear appropriate PPE to prevent the respiratory droplets of one employee from contacting the other’s mucus membranes. This could include employees wearing:
	+ A face shield and safety glasses or goggles
	+ A “cloth face cover” (as per CDC guidance) and safety glasses or goggles
	+ An N-95 “dust mask” style respirator (when available and there is no shortage for healthcare and first responder workers) and safety glasses or goggles
	+ Another form of effective containment for potential respiratory emissions and safety glasses or goggles, to be identified in the Job Hazard Analysis
* DO NOT touch your face while conducting a team activity.
* Employees performing team activities shall immediately clean their hands after the activity is completed.
* If the handling of documentation or tickets create a team activity, perform a Job Hazard Analysis with your supervisor to determine methods such as e-tickets, a drop box, etc. that would limit the need to be within 6 feet of each other for document and ticket gathering.

**Cover Coughs And Sneezes**

* 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.

**Clean Your Hands Often**

* At a minimum wash your hands upon arrival to the jobsite in the morning, at any break, before eating or drinking anything, after blowing your nose, coughing, or sneezing, and before getting in your personal vehicle and/or leaving the jobsite.
* Wash your hands with soap and water for at least 20 seconds
* If soap and water are not readily available, use a hand sanitizer that contains at least 70% alcohol. Cover all surfaces on your hands and rub them together until they feel dry.
* Do not touch your eyes, nose, and mouth with unwashed hands.

**Stay Home If You’re Sick**

If you experience any respiratory illness symptoms (including fever, cough, sore throat, difficulty breathing, or shortness of breath), please call your supervisor and STAY HOME. You MUST STAY HOME from work if you have any respiratory illness symptoms. If you present to work with respiratory illness symptoms you will be immediately sent home.

If you have a member of your household that has these symptoms and you need to care for them - please STAY HOME with them.

**Contact Your Supervisor**

Contact your supervisor if you experience any respiratory illness symptoms or if you suspect you may have come in close contact with or worked in an area with someone experiencing any respiratory illness symptoms. CALL your supervisor – DO NOT REPORT TO WORK WITH SYMPTOMS.

The **[COMPANY]** COVID-19 Pandemic Response Plan will be utilized to assess any potential illness or exposure, and you will participate in the process of determining and documenting the potential illness and/or exposure and any necessary follow-up measures.

**Appendix C – COVID-19 Health Screening Questionnaire**

**[COMPANY] Employee Health Screening Questionnaire**

The health and safety of our employees, customers, and vendors is our number one priority. To prevent the spread of COVID-19 and reduce the potential risk of exposure to our coworkers, we are now requiring visitors, new employees, any employee returning from a period away from work of 14 days or more, or any employee returning from a vacation leave to provide some additional information prior to coming back.

All visitors, returning and new employees are kindly requested to complete and return this questionnaire to your supervisor – ideally 24 hours prior to your visit or first day of work.

|  |
| --- |
| Employee Name:  |

|  |
| --- |
| **Self-Declaration by Employee** |
| Have you traveled out of the state of in the last 14 days?[ ] Yes [ ] No If Yes, please indicate where:  |
| Have you had close contact with or cared for someone diagnosed with COVID-19 in the last 14 days?[ ] Yes [ ] No  |
| Are you experiencing and/or have you experienced any cold or flu-like symptoms in the last 14 days (which would include fever, cough, sore throat, respiratory illness, difficulty breathing, shortness of breath)?[ ] Yes [ ] No |
| Have you cared for or been in contact with someone experiencing cold or flu-like symptoms in the last 14 days?[ ] Yes [ ] No |

Employee Signature: \_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_ Date:\_\_\_\_\_\_\_\_\_\_\_\_

**Note: If any of the responses change please advise your foreman immediately. The information collected from this form will remain confidential and will only be considered for health and safety purposes.**

**Appendix D – Potential Exposure Assessment**

This form is to be completed by a Supervisor with the assistance of Human Resources.

This form is being completed to assess the potential exposure of:

**Employee Name: \_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_**

*The Supervisor should use a highlighter and a pen to clearly mark and initial each applicable answer. This form has 3 pages.*

The following strictly adheres to the U.S. Centers for Disease Control (CDC) “*Public Health Recommendations for Community-Related Exposure*” published March 30, 2020.

<https://www.cdc.gov/coronavirus/2019-ncov/php/public-health-recommendations.html>

If you currently have no symptoms of respiratory illness, but you may have been exposed to someone who is known to have COVID-19 or is medically suspected to have COVID-19, please review and complete the following:

|  |  |
| --- | --- |
| Step 1 | Have you potentially been exposed to someone who is now displaying or was previously displaying symptoms such as fever, cough, and shortness of breath and has been diagnosed with COVID-19 or is medically suspected of potentially having COVID-19? |
|  | [ ]  YES – Continue to Step 2. | [ ]  NO – Skip to Step 5. |
| Step 2 | If you answer YES to any of the following, continue to Step 3. If you answer NO to all of the following, skip to Step 5. |
|  | Were you exposed to them when they had they symptoms?  | [ ]  YES / [ ]  NO |
|  | Were you exposed to them within 2 days (48 hours) before they had the symptoms? | [ ]  YES / [ ]  NO |
|  | Were you exposed to them within 3 days (72 hours) after their symptoms and fever\* disappeared? | [ ]  YES / [ ]  NO |
|  | Were you exposed to them within 7 days of their symptoms first appearing?  | [ ]  YES / [ ]  NO |
| Step 3 | If you answer YES to any of the following, continue to Step 4. If you answer NO to all of the following, skip to Step 5. |
|  | If you answered YES to #1 and #2 above, is this person a member of your household? | [ ]  YES / [ ]  NO |
|  | If you answered YES to #1 and #2 above, is this person an intimate partner? | [ ]  YES / [ ]  NO |
|  | If you answered YES to #1 and #2 above, is this person someone who you are providing care for without using CDC recommended infection control precautions? | [ ]  YES / [ ]  NO |
|  | If you answered YES to #1 and #2 above, is this person someone who you have had close contact with (within 6 feet)\*\* for a prolonged period of time\*\*\* without utilizing additional approved protective measures such as a face mask? | [ ]  YES / [ ]  NO |
| Step 4 | Employer and CDC Recommended Precautions |
|  | * Contact your supervisor and health care provider immediately, and- based on your supervisor and health care provider recommendations, choose either:
	+ 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\*, cough, shortness of breath, OR:
	+ Follow the CDC Safety Practices for returning to work including pre-screening, regular monitoring, wearing a mask at all times, social distancing, and cleaning and disinfecting work spaces – only with supervisor approval.
* Avoid contact with people at higher risk for severe illness (unless they live in the same home and had same exposure) (See CDC web page “People who are at higher risk for severe illness”)
* Follow CDC guidance if symptoms develop (See CDC web page “What To Do If You Are Sick”)
* Contact your company Human Resources contact for information about Sick and Family Leave policies.
 |
| Step 5 | All U.S. residents, other than those answering YES above |
|  | * Are considered as possible unrecognized COVID-19 exposures in U.S. communities.
* Should be alert for symptoms, including
	+ Watch for fever\*, cough, or shortness of breath
	+ Take temperature if symptoms develop
* Should practice social distancing
	+ Maintain 6 feet of distance from others
	+ Stay out of crowded places
* Should follow CDC guidance if symptoms develop (See CDC web page “What To Do If You Are Sick”)
 |

\*For the purpose of this guidance, fever is defined as subjective fever (feeling feverish) or a measured temperature of 100.4oF (38oC) or higher. 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).

\*\* Data is 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 facemask (which can efficiently block respiratory secretions from contaminating others and the environment).

\*\*\*Data is insufficient to precisely define the duration of time that constitutes a prolonged exposure. Recommendations vary on the length of time of exposure from 10 minutes or more to 30 minutes or more. In healthcare settings, it is reasonable to define a prolonged exposure as any exposure greater than a few minutes because the contact is someone who is ill. 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.

This form was completed by:

Supervisor/HR Name: \_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_

Supervisor/HR Signature & Date: \_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_

This completed form was reviewed with and supplied to the employee named above.

Employee Signature & Date: \_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_