



Company Name

Company Logo

# COVID-19 WORKSITE HEALTH & SAFETY PROGRAM

## Policy Statement

At **Company Name** we are committed to ensuring the safety and health of our workforce, including taking the appropriate steps to limit the spread of the novel coronavirus known as SARs-CoV-2 and the disease it causes, COVID-19. The health and safety of our employees, customers, vendors, subcontractors and their families is our top priority. This plan will be communicated clearly to all employees, in their preferred languages, with opportunities for them to give feedback. Because the future of the COVID-19 pandemic is uncertain and circumstances change frequently, we will continue to update this program to follow construction industry best practices to prevent infection and protect our employees. All employees have the right to refuse unsafe work and the obligation to report it to their supervisor.

While we are experiencing this pandemic, **Company Name** will develop, implement, communicate and review workplace flexibilities and protections. We are actively encouraging sick employees to stay home. Employees who have symptoms are expected to notify their supervisor and stay home. Employees who are well but who have a family member at home with COVID-19 should notify their supervisor and follow CDC recommended precautions at a minimum. Sick employees should follow CDC recommended precautions and not return to work until the criteria to discontinue home isolation are met, in consultation with healthcare providers and state and local health departments.

*Note: All policies herein may not be applicable to all employees, depending on their job task; some may apply only to field staff or supervisors in temporary office spaces (e.g., construction trailers).*

## COVID-19 Compliance Officer

**Name of the Person** is designated as the COVID-19 Compliance Officer to ensure that **Company Name**, and all subcontractors are in full compliance with these guidelines. The COVID-19 Compliance Officer will perform risk assessments, make company policy recommendations and implement guidelines. It is expected that the COVID-19 Compliance Officer will use an array of public health guidance, including but limited to OSHA, NIOSH, the CDC and the industrial hygiene hierarchy of controls to eliminate, isolate and mitigate COVID-19 hazards on the worksite. The COVID-19 Compliance Officer will work with management to ensure an adequate level of cleaning supplies, tissues and paper towels, hand sanitizer, first-aid supplies, face coverings, respirators (e.g., N95s) and other personal protective equipment (PPE) and other items needed to implement this policy are available on the worksite.

## COVID-19 Screening and Assessment Protocols

**Company Name** will institute worker screening and assessment protocols for everyone who enters the workplace, including employees and visitors (e.g., vendors, inspectors, subcontractors and state officials). The COVID-19 Compliance Officer will ensure these screenings and assessments occur before employees and visitors gain entry to the site. Screening and assessment protocols may include a visual scan and temperature check, self-certification or a questionnaire regarding symptoms and exposure or a combination of these strategies.

The COVID-19 Compliance Officer will choose appropriate and feasible screening and assessment protocols based on the needs of the worksite (see Appendix A – Guidance for Conducting COVID-19 Workplace Screenings and Assessments). The COVID-19 Compliance Officer will communicate these protocols clearly to all employees and subcontractors prior to their implementation.

### **Critical Infrastructure Employees**

The CDC advises that critical infrastructure workers may be permitted to continue work following a potential exposure to COVID-19, provided they remain asymptomatic and additional precautions are implemented to protect them and the community.

For critical infrastructure workers who have had a potential exposure to COVID-19 but remain asymptomatic, the COVID-19 Compliance Officer will ensure adherence to the following practices prior to and during their work shift:

- ▶ Pre-screening: Measurement of the employee’s temperature and assessment of symptoms prior to starting work. If possible, temperature checks will happen before the employee enters the facility.
- ▶ Social distance: The employee will maintain a distance of six feet from other workers and practice social distancing as work duties permit while in the workplace.
- ▶ Regular monitoring: As long as the employee remains asymptomatic, the employee will self-monitor and be under supervision.
- ▶ Clean and disinfect work spaces: Clean and disinfect all equipment and areas such as trailers, bathrooms, common areas and shared tools.
- ▶ Wear a mask: The employee will wear a face mask without an exhalation valve at all times while in the workplace for 14 days after last known exposure.

If any critical infrastructure employee becomes symptomatic during the day, they will be sent home immediately. Surfaces in their workspace will be cleaned and disinfected. Information on persons who had contact with the sick employee during the time the employee had symptoms and two days prior to symptoms will be compiled. Others at the facility with close contact within six feet of the employee during this time are considered exposed. These workers will follow exposure protocols detailed in Appendix A – Guidance for Conducting COVID-19 Workplace Screenings and Assessments.

### **Worker Hygiene Policy**

Good hygiene and infection control practices will be followed according to CDC guidelines, as a minimum. Employees are required to wash hands frequently with soap and water for at least 20 seconds or use hand sanitizer when soap and water are not available. Workers should following handwashing practices:

- ▶ Upon arriving at the workplace and before going home at the end of the day
- ▶ Before and after eating
- ▶ Between tasks
- ▶ After using the toilet

Temporary handwashing stations will be supplied when there is no ready access to an indoor bathroom or washing facilities. Garbage cans will be supplied next to handwashing stations and toilets for disposal of tissues/towels.

Employees are required to practice good cough/sneezing etiquette – cover their mouth and nose during coughs or sneezes and use their sleeve or elbow when tissues are not available. Employees will not use their hands to cover coughs and sneezes and will avoid touching their eyes, nose and mouth as much as possible.

## Workplace Sanitation

**Company Name** is instituting a regimen of frequent cleaning and disinfection of high-touch surfaces, including but not limited to toilets, machinery, tools, PPE, handles, touch screens, smartphones, doors, door knobs, railings, laptops and furniture. EPA-approved cleaning disinfectants will be used. Disinfectants will be allowed to saturate surfaces for a minimum time of one minute in order to adequately disinfect them. Regular cleaning and disinfecting of all common and meeting areas will occur at least once and preferably twice a day. The COVID-19 Compliance Officer will ensure there is a schedule for cleaning, sanitizing and stocking of all restroom facilities, porta-potties and handwashing stations. In addition, workers must clean and disinfect all machines, tools or vehicles before use.

All employees performing sanitation and disinfecting will:

- ▶ Wear PPE. This will include N95 respirators or similar (if a respirator cannot be obtained because of PPE shortages, a facemask or covering will be worn until a respirator can be obtained), disposable gloves, protective clothing and eye protection.
- ▶ Discard gloves after each cleaning.
- ▶ Clean dirty surfaces using a detergent or soap and water prior to disinfection.
- ▶ Be trained on safe donning, doffing and disposal of PPE to avoid infectious disease transmission.
- ▶ Clean hands immediately after PPE is removed.
- ▶ Be medically able to wear the type of respirator needed and trained on how to use it.
- ▶ Be aware of the differences between dust masks and N95s. Dust masks do not reliably protect the wearer from airborne respiratory droplets.

## Physical Distancing

**Company Name** will practice physical (also called social) distancing by limiting person-to-person contact within six feet (Six-Foot Rule). All employees will follow the Six-Foot Rule at the workplace, whether indoors or outdoors. Specific Six-Foot Rule guidelines include:

- ▶ Instituting a “No Congregation” policy to maintain physical distancing during breaks and when eating. Employees may take a lunch break, but the Six-Foot Rule does not.
- ▶ Practicing physical distancing at all times, including at crew meetings/toolbox talks. Toolbox talks will be conducted outdoors.
- ▶ Limiting face-to-face meetings to 10 people or less. As much as possible, meetings between office staff will be conducted via conference call or other virtual meeting tools. Meetings at the jobsite or requiring in-person discussion will be held outdoors if possible and will follow the Six-Foot Rule.
- ▶ Eliminating coffee and lunch trucks and the use of centralized gathering or eating areas. All employees are advised to bring their own food, drink and utensils.
- ▶ Adjusting meeting and lunchroom seating to eliminate large gatherings. Small break areas will be used with limited seating. If break areas cannot be adjusted, employees will take steps to follow the Six-Foot Rule (e.g., sit adjacent to rather than directly across from each other, eat outside of work areas).
- ▶ Reviewing and adjusting project schedules to allow for the Six-Foot Rule, including arranging for staggered shifts or longer break times so employees can maintain distance during breaks, including lunch.

- ▶ Supplying employees with facial coverings and PPE according to the risk and job task (e.g., face mask or N95 respirator, face shield, gloves and eye protection) in work conditions where the Six-Foot Rule is impossible to achieve.

## **Personal Protective Equipment (PPE)**

**Company Name** will allow voluntary use of N95 respirators or equivalent. The company will implement a mandatory face covering policy. Although not recognized as PPE, surgical masks and facial coverings will also be permitted. This policy will be continually reviewed and updated according to the specific risks encountered on the jobsite.

All appropriate and required PPE will be provided to employees. The decision to provide specific PPE (e.g., gloves, respirators, protective clothing, eye protection, etc.) to protect against COVID-19 will follow a risk assessment conducted by the COVID-19 Compliance Officer. Use of PPE required by regulatory standards will not be affected by this program.

## **Training**

All employees will receive training regarding this policy and exposure control. This training will include the signs and symptoms of COVID-19, how to prevent exposure and transmission of COVID-19, the reasons for staying home from work when sick and how to use COVID-19 safety supplies and PPE.

## **Travel**

### *International*

All international travel activities will be terminated and future travel activities will be postponed until the COVID-19 outbreak is officially declared over by the federal government. After it has been determined it is safe to travel, international travel will be gradually phased back into our business continuity plan.

### *Regional and local*

We will examine our travel policy and modify it based on the specific state or local guidance in the area where work is being performed. If there is significant community spread within a geographic area, non-essential work travel and work-sponsored conferences, trade shows, etc., within that area will be canceled until further notice. We will take into account the circumstances along the travel route and at the destination of an employee's proposed travel. **Company Name** will abide by any travel restrictions in the destination area and be aware of state or local government policies that may be in place, such as mandatory quarantine upon arrival.

## **Recordkeeping**

**Company Name** will follow OSHA's recordkeeping requirements (29 CFR Part 1904) as it relates to recording cases of COVID-19. Under OSHA's COVID-19 *Interim Guidance for Recordkeeping Requirements*, COVID-19 is a recordable illness if all of the following apply:

- ▶ Is a confirmed case of COVID-19
- ▶ Is work-related (as defined by 29 CFR 1904.5)
- ▶ Involves one or more of the general recording criteria (29 CFR 1904.7), such as medical treatment beyond first aid or days away from work

## Worksite Flexibility

**Company Name** will establish additional policies and practices to increase compliance with the COVID-19 Worksite Safety & Health Program. Strategies under consideration include:

- ▶ Flexibility regarding in-person attendance for office staff (e.g., telework)
- ▶ Implementing flexible work hours (e.g., staggered shifts)
- ▶ Downsizing operations
- ▶ Developing non-punitive leave policies
- ▶ Not requiring a healthcare provider's note for employees who are sick with acute respiratory illness to validate their illness to return to work, as healthcare provider offices and medical facilities may be extremely busy and not able to provide such documentation in a timely way
- ▶ Assigning employees who may be at higher risk for serious illness, such as older adults and those with chronic medical conditions, work tasks that allow them to maintain a distance of six feet from other employees, customers and visitors or to telework if possible
- ▶ Implementing plans to continue essential business functions in the circumstance that higher than usual absenteeism occurs
- ▶ Delivering products through curbside pick-up or delivery

## Employee Well-Being

**Company Name** will take opportunities to support employee well-being and resilience by helping to address potential health impacts, such as depression, posttraumatic stress disorder (PTSD), substance use disorder and other mental health-related disorders.

- ▶ Provide frequent and comprehensive communication with employees before, during and after the transition back to work/jobsites
- ▶ Provide resources related to physical, mental, emotional and financial well-being
- ▶ Provide available employee assistance program (EAP) or member assistance program (MAP) information to support workers in addressing their mental health
- ▶ Provide materials on bereavement, loss and grief to help employees cope with the loss of co-workers, family members or loved ones
- ▶ Consider coordination of critical incident stress management services through the EAP or the Laborers' Health & Safety Fund of North America if an employee passes away due to COVID-19 or a jobsite critical incident

## Resources

Recommendations to limit the spread of COVID-19 and mitigate the risk to employees may change as public health officials learn more about the virus. The contents of this program were developed based on guidance and best practices from the following sources:

**CDC** – Coronavirus (COVID-19) – [www.cdc.gov/coronavirus/2019-ncov](http://www.cdc.gov/coronavirus/2019-ncov)

**OSHA** – OSHA Guidance on Preparing Workplaces for COVID-19 – [www.osha.gov/Publications/OSHA3990.pdf](http://www.osha.gov/Publications/OSHA3990.pdf)

**NIOSH** – Coronavirus Disease-2019 – [www.cdc.gov/niosh/emres/2019\\_ncov.html](http://www.cdc.gov/niosh/emres/2019_ncov.html)



# LHSFNA GUIDANCE FOR CONDUCTING WORKPLACE COVID-19 SCREENINGS AND ASSESSMENTS

LAST UPDATED: 5/5/20

Employers should consider implementing a screening and assessment program for employees, visitors and vendors before allowing them to access the workplace. This program could utilize screenings, assessments or both options. This document provides employers with guidance on conducting those screenings and assessments. Return to work scenarios for individual employees who are exposed to COVID-19, experience COVID-19 symptoms or are advised by their healthcare provider or a local public health official to self-quarantine or self-isolate are also provided.

Please contact the Laborers' Health & Safety Fund of North America (LHSFNA) at 202-628-5465 for specific questions or concerns not addressed below. The LHSFNA can develop a screening and/or assessment program tailored to the specific needs and circumstances of your workplace.

## Screening Method: Visual Scan and Temperature Check

Screening employees, visitors and vendors for COVID-19 through temperature checks and visual scans is one strategy employers can implement in an effort to protect the work environment.

There are several steps employers can take to protect the employee conducting temperature screenings. The most protective methods incorporate social distancing (maintaining a distance of six feet from others) or physical barriers to eliminate or minimize the screener's potential exposure due to close contact during screening.

If social distancing or barrier controls cannot be implemented during screening, personal protective equipment (PPE) can be used when the screener is within six feet of an employee. However, reliance on PPE alone is a less effective control and is more difficult to implement given PPE shortages and training requirements.

Temperature screening is a time-intensive process. Depending on the space available and layout of the workplace, multiple screening stations may be necessary.

People with COVID-19 may experience these symptoms or a combination of symptoms:

- Cough
- Shortness of breath or difficulty breathing
- Fever (temperature of 100.4°F or greater)
- Chills
- Repeated shaking with chills
- Muscle pain
- Headache
- Sore throat
- Loss of taste or smell

## Steps to Perform a Visual Scan and Temperature Check

1. Before screening begins, the screener should wash their hands with soap and water for at least 20 seconds or, if soap and water are not available, use hand sanitizer with at least 60 percent alcohol.
2. Screener puts on the following PPE:
  - A gown
  - A single pair of disposable gloves
  - Eye protection (goggles or disposable face shield that fully covers the front and sides of the face)
  - Respiratory protection such as a NIOSH-approved N95 or higher-level respirator or facemask (if a respirator is not available)



3. The screener makes a visual inspection of the employee for signs of illness, which could include flushed cheeks or fatigue, and confirms the employee is not experiencing coughing or shortness of breath.

4. Conduct temperature screening using the protocols described under these three scenarios:

**A. Distancing Scenario**

- An employee, visitor or vendor would be informed in advance to take their own temperature prior to coming into the workplace.
- The screener stands at least six feet away from the employee and asks them to confirm their temperature is less than 100.4°F.

**B. Barrier Scenario**

- During screening, the screener stands behind a physical barrier, such as a glass or plastic window or partition, that can protect the screener’s face and mucous membranes from respiratory droplets that may be produced when an employee sneezes, coughs or talks.
- To check the person’s temperature, reach around the partition or through the window. Make sure the screener’s face stays behind the barrier at all times.
- When using a thermometer that requires physical contact with an employee, use a clean pair of gloves for each employee and ensure that the thermometer is thoroughly cleaned between each screening. Follow these directions: Remove and discard gloves, wash hands with soap and water for at least 20 seconds or use hand sanitizer with at least 60 percent alcohol.
- If disposable or non-contact thermometers are used and the screener does not have physical contact with an employee, changing gloves before the next screening is not required. If non-contact thermometers are used, clean and disinfect them according to manufacturer’s instructions and facility policies.
- If at any point the screener does have physical contact with an employee, changing gloves before the next screening is required. Follow the glove removal and handwashing instructions above.

**C. PPE Only Scenario**

- When using a thermometer that requires physical contact with an employee, use a clean pair of gloves for each employee and ensure that the thermometer is thoroughly cleaned between each screening. Follow these directions: Remove and discard gloves, wash hands with soap and water for at least 20 seconds or use hand sanitizer with at least 60 percent alcohol.
- If disposable or non-contact thermometers are used and the screener does not have physical contact with an employee, changing gloves before the next screening is not required. If non-contact thermometers are used, clean and disinfect them according to manufacturer’s instructions and facility policies.
- If at any point the screener does have physical contact with an employee, changing gloves before the next screening is required. Follow these directions: Remove and discard gloves, wash hands with soap and water for at least 20 seconds or use hand sanitizer with at least 60 percent alcohol.

5. At the end of the screener’s shift, remove and discard all PPE into a trash can, wash hands with soap and water for at least 20 seconds or use hand sanitizer with at least 60 percent alcohol.

**Screening Results**

Employees, visitors and vendors with a temperature of 100.4°F or greater should immediately be separated from other people in the workplace, sent home and advised to contact their healthcare provider.

## Assessment Method: Exposure and Symptoms

Assessing employees, visitors and vendors is another strategy employers can implement in an effort to protect the work environment. Two possible options for assessing exposure to COVID-19 or symptoms of the virus are a questionnaire and self-certification.

The questionnaire can be given in-person or online. An in-person questionnaire is more time-intensive for the employer and requires protections and distancing measures be in place between the screener and the employee. Please refer to the **Distancing, Barrier or PPE Only Scenarios** above for more information. The online questionnaire method, implemented through a platform such as Google forms, may also be time-intensive, but removes concerns about in-person interactions.

### SAMPLE ASSESSMENT QUESTIONNAIRE

1. **Exposure.** Have you, or anyone in your household, come in close contact (within six feet) for a prolonged period of time (10 minutes or longer) with someone who has a suspected or confirmed COVID-19 diagnosis?
2. **Symptoms.** Are you currently experiencing:
  - a. Cough
  - b. Shortness of breath or difficulty breathing
  - c. Or at least two of these symptoms:
    - i. Fever (temperature of 100.4°F or greater)
    - ii. Chills
    - iii. Repeated shaking with chills
    - iv. Muscle pain
    - v. Headache
    - vi. Sore throat
    - vii. Loss of taste or smell
3. Are you currently under self-quarantine or self-isolation orders by your healthcare provider or a local public health official?

#### *Assessment Results: No to All Questions*

An employee, visitor or vendor responding “no” to all three questions should be granted access to the workplace and proceed with their normal workday.

#### *Assessment Results: Yes to Exposure Question*

An employee, visitor or vendor responding “yes” to exposure but “no” to symptoms should self-quarantine for 14 days. According to the CDC, self-quarantine is appropriate when a person feels healthy but recently had close contact for a prolonged period of time (10 minutes or longer) with a person with COVID-19. A person in **self-quarantine** should do the following:

- Stay home for 14 days
- Practice social distancing
- Check their temperature twice a day
- Self-monitor for COVID-19 symptoms
- Contact their healthcare provider if symptoms develop



### Discontinuing Self-Quarantine

While in self-quarantine, the employee may or may not develop symptoms. If the employee does not develop symptoms, they should contact their employer about returning to work after 14 days in self-quarantine. If the employee does develop symptoms, they should begin self-isolation (see details below) and contact their healthcare provider.

### ***Assessment Results: Yes to Symptoms Question***

An employee, visitor or vendor responding “yes” to symptoms should be isolated from other people in the workplace and, if they’re an employee, their supervisor should be notified. Prior to the symptomatic person leaving the premises, employers should determine which employees may have been exposed to the virus and need to take additional precautions; this process is known as contact tracing. According to the CDC:

*Most workplaces should follow public health recommendations for community-related exposure. This guidance indicates that employees who had close contact (within six feet) for a prolonged period of time (10 minutes or longer) with the symptomatic person during the period from 48 hours before symptom onset until the symptomatic person meets the criteria to discontinue home isolation should self-quarantine, self-monitor for symptoms and practice social distancing for 14 days.*

The symptomatic person should be sent home, advised to self-isolate and contact their healthcare provider. According to the CDC, self-isolation is appropriate when someone has been diagnosed with COVID-19, is waiting for diagnostic test results or has symptoms. A person in **self-isolation** should do the following:

- Stay in a specific “sick room” or area and away from other people or pets; if possible, use a separate bathroom
- Stay home except to get medical care
- Monitor symptoms and stay in contact with their healthcare provider
- Follow care instructions from their healthcare provider and local or state health department

If an employee is confirmed to have COVID-19, employers should inform fellow employees of their possible exposure to COVID-19 in the workplace but maintain confidentiality as required by the Americans with Disabilities Act.

The employee may or may not be able to receive a COVID-19 diagnostic test from their healthcare provider or health department. Decisions about testing are at the discretion of state and local health departments and/or individual healthcare providers.

### Discontinuing Self-Isolation

According to the CDC\*, there are two ways to discontinue self-isolation: a test and based on symptoms. These methods are for people with COVID-19 who have symptoms and were directed to care for themselves at home. The test-based approach is contingent on the availability of ample testing supplies and laboratory capacity as well as convenient access to testing.

*Conditions indicating recovery with the test-based approach:*

- No longer have a fever (without the use of medicine that reduces fever) **AND**
- Other symptoms have improved **AND**
- Two negative test results in a row, 24 hours apart

*Conditions indicating recovery with the symptom-based approach:*

- No fever for at least 3 days (72 hours) – without the use of medicine that reduces fever **AND**
- Other symptoms have improved **AND**
- At least 10 days have passed since symptoms first appeared

\*CDC guidance for COVID-19 may be adapted by state and local health departments to respond to rapidly changing local circumstances.

After an employee meets the criteria to discontinue home isolation, they should contact their employer about returning to work.

***Assessment Results: Yes to Self-Isolate or Self-Quarantine Question***

An employee who responds “yes” to being advised to self-isolate or self-quarantine by their healthcare provider or a local public health official should return to their self-isolation or self-quarantine immediately. They should also contact their healthcare provider or local public health official and inform them of breaking self-quarantine or self-isolation, then follow their recommendations on how to proceed.

Employers should not require sick employees to provide a COVID-19 test result or healthcare provider’s note to validate their illness, qualify for sick leave or return to work. Healthcare provider offices and medical facilities may be extremely busy and not able to provide such documentation in a timely manner.

### **What happens if an employee becomes symptomatic during the workday?**

Employees who become sick during the day should immediately be separated from other employees, sent home and advised to contact their healthcare provider. Prior to the symptomatic person leaving the premises, employers should determine which employees may have been exposed to the virus and need to take additional precautions; this process is known as contact tracing. According to the CDC:

*Most workplaces should follow public health recommendations for community-related exposure. This guidance indicates that employees who had close contact (within six feet) for a prolonged period of time (10 minutes or longer) with the symptomatic person during the period from 48 hours before symptom onset until the symptomatic person meets the criteria to discontinue home isolation should self-quarantine, self-monitor for symptoms and practice physical distancing for 14 days.*

**Under this circumstance, the employer should close off areas used by the person who is sick. Companies do not necessarily need to cease operations if they can close off affected areas. If possible, open outside doors and windows and use ventilating fans to increase air circulation in the area. Employers should wait 24 hours before cleaning and disinfecting to minimize potential for other employees being exposed to respiratory droplets. If waiting 24 hours is not feasible, wait as long as possible. All items and surfaces that the employee had contact with should be cleaned and disinfected.**

### **Employee Assessment Flowchart**

The following flowchart is intended to aid employers in understanding an employee’s experience with the COVID-19 assessment process at a glance. It is not intended to be used without the accompanying guidance and instructions above.

