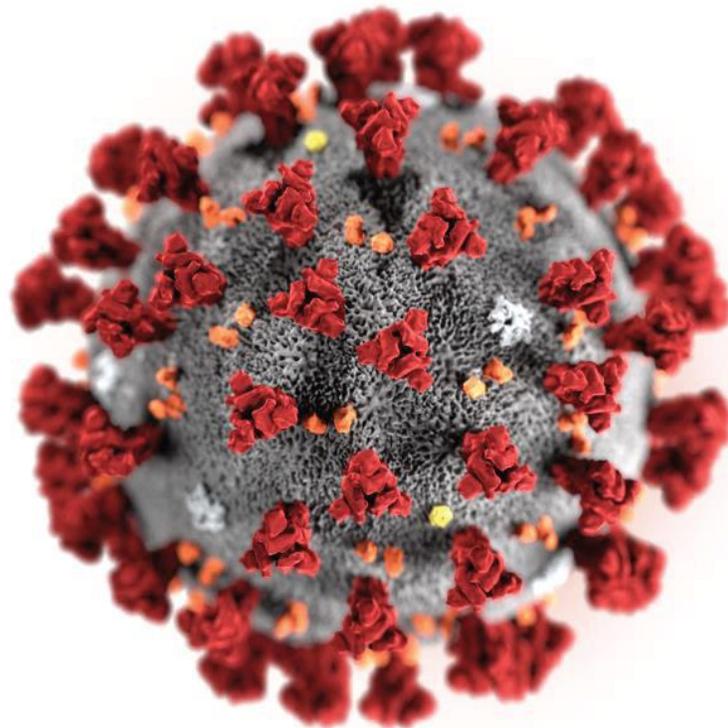


2019 Novel Coronavirus Prevention Plan

April 2, 2020



Introduction

Coronavirus Disease 2019 (COVID-19) is a respiratory disease caused by the SARS-CoV-2 virus. It has spread from China to many other countries around the world, including the United States. Depending on the severity of COVID-19's international impacts, outbreak conditions—including those rising to the level of a pandemic can affect all aspects of daily life, including travel, trade, tourism, food supplies, and financial markets.

Symptoms of COVID-19

Infection with SARS-CoV-2, the virus that causes COVID-19, can cause illness ranging from mild to severe and, in some cases, can be fatal. Symptoms typically include fever, cough, and shortness of breath. Some people infected with the virus have reported experiencing other non-respiratory symptoms. Other people, referred to as *asymptomatic cases*, have experienced no symptoms at all.

According to the CDC, symptoms of COVID-19 may appear in as few as 2 days or as long as 14 days after exposure.

How COVID-19 Spreads

Although the first human cases of COVID-19 likely resulted from exposure to infected animals, infected people can spread SARS-CoV-2 to other people.

The virus is thought to spread mainly from person-to-person, including:

1. Between people who are in close contact with one another (within about 6 feet).
2. Through respiratory droplets produced when an infected person coughs or sneezes. These droplets can land in the mouths or noses of people who are nearby or possibly be inhaled into the lungs.

It may be possible that a person can get COVID-19 by touching a surface or object that has SARS-CoV-2 on it and then touching their own mouth, nose, or possibly their eyes, but this is not thought to be the primary way the virus spreads.

People are thought to be most contagious when they are most symptomatic (i.e., experiencing fever, cough, and/or shortness of breath). Some spread might be possible before people show symptoms; there have been reports of this type of asymptomatic transmission with this new coronavirus, but this is also not thought to be the main way the virus spreads.

Although the United States has implemented public health measures to limit the spread of the virus, it is likely that some person-to-person transmission will continue to occur.

How a COVID-19 Outbreak Could Affect Workplace

Similar to influenza viruses, SARS-CoV-2, the virus that causes COVID-19, has the potential to cause extensive outbreaks. Under conditions associated with widespread person-to-person spread, multiple areas of the United States and other countries may see impacts at the same time.

In the absence of a vaccine, an outbreak may also be an extended event. As a result, worksites may experience:

Absenteeism. Employees could be absent because they are sick; are caregivers for sick family members; are caregivers for children if schools or day care centers are closed; have at-risk people at home, such as immunocompromised family members; or are afraid to come to work because of fear of possible exposure.

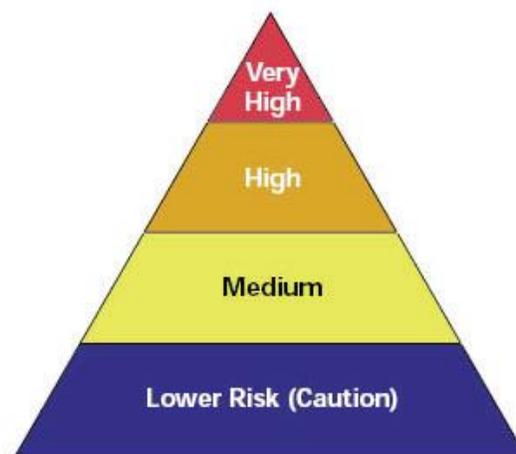
Change in patterns of commerce. Consumer demand for items related to infection prevention (e.g., respirators) is likely to increase significantly, while consumer interest in other goods may decline.

Interrupted supply/delivery. Shipments of items from geographic areas severely affected by COVID-19 may be delayed or cancelled with or without notification.

Classifying Worker Exposure to SARS-CoV-2

Employee risk of occupational exposure to SARS-CoV-2, the virus that causes COVID-19, during an outbreak may vary from very high to high, medium, or lower (caution) risk. The level of risk depends in part on the industry type, need for contact within 6 feet of people known to be, or suspected of being, infected with SARS-CoV-2, or requirement for repeated or extended contact with persons known to be, or suspected of being, infected with SARS-CoV-2. To help determine appropriate precautions, OSHA has divided job tasks into four risk exposure levels: very high, high, medium, and lower risk. The Occupational Risk Pyramid shows the four exposure risk levels in the shape of a pyramid to represent probable distribution of risk. Most American employees will likely fall in the lower exposure risk (caution) or medium exposure risk levels.

Occupational Risk Pyramid for COVID-1



Steps to Reduce Employees' Risk of Exposure to SARS-CoV-2

Basic Infection Prevention Measures

Company Name goal is to protect employees emphasizing basic infection prevention measures. As appropriate, **Company Name** shall implement good hygiene and infection control practices, including:

1. Promote frequent and thorough hand washing/sanitizing, including by providing employees, vendors, and worksite visitors with a place to wash their hands. If soap and running water are not immediately available, **Company Name** will provide alcohol-based hand sanitizers containing at least 70% alcohol.
2. **Company Name** encourages employees to remain at home if they are sick.
3. **Company Name** encourages respiratory etiquette, including covering coughs and sneezes.
4. **Company Name** will discourage employees from using other employee's phones, tools and equipment, when possible.
5. **Company Name** will maintain regular housekeeping practices, including routine cleaning and disinfecting of surfaces, equipment, and other elements of the work environment. (When choosing cleaning chemicals, **Company Name** will consult information on Environmental Protection Agency (EPA)-approved disinfectant labels with claims against emerging viral pathogens. Products with EPA-approved emerging viral pathogens claims are expected to be effective against SARS-CoV-2 based on data for harder to kill viruses. Follow the manufacturer's instructions for use of all cleaning and disinfection products e.g., concentration, application method and contact time, PPE).

Policies and Procedures for Prompt Identification and Isolation of sick employees

Prompt identification and isolation of potentially infectious employees is a critical step in protecting workers, customers, visitors, and others at a worksite.

1. **Company Name** will inform and encourage employees to self-monitor for signs and symptoms of COVID-19 if they suspect possible exposure.
2. It is the policy of **Company Name** for employees to notify when they are sick or experiencing symptoms of COVID-19.
3. Employees will provide answers to the Health Assessment daily. (See Attached form)
4. If appropriate, employees who have signs and symptoms of COVID-19 will be immediately isolated at a worksite and asked to leave the jobsite and report to their Physician or the nearest hospital or emergency facility where it can be determined the status of the COVID -19 infection
5. Additional Training will be provided to keep employees informed of any changes to this policy or additional information provided by the CDC, OSHA, EPS or other agencies.

To protect employees, close contact with other employees will be limited to **6 feet** at all times. If repeated contact is necessary additional engineering and administrative controls, safe work practices, and PPE will be utilized.

Workplace Flexibilities and Protections

1. **Company Name** encourages sick employees to stay home and seek medical attention.
2. Additional hand washing stations will be provided throughout the jobsite.
3. Companies that provide **Company Name** with contract or temporary employees must communicate the importance of sick employees staying home and encourage them to develop non-punitive leave policies.
4. **Company Name** will require a healthcare provider's note for employees who are sick with any acute respiratory illness to validate their illness or to return to work. Any employee who has been off work for 3 work consecutive work days, for any illness must provide a note from their medical provider before they can return to work.
5. If the employee had tested positive for COVID -19 then they must perform (2) separate tests, acknowledged and noted by their Health Provider or medical facility indicating a negative COVID-19 result. These tests must be at least 24 hours apart.
6. **Company Name** will remain flexible on work policies to permit employees to stay home to care for a sick family member. Employees may need to stay at home to care for sick children or other sick family members. If the family member being attended to has/had COVID -19, then the same double testing of the employee will be required prior to their return to work.
7. Adequate, usable, and appropriate training, education, and informational material about business-essential job functions and employee health and safety, including proper hygiene practices and the use of any workplace controls (including PPE). Our goal is to inform employees so they feel safe at work and are less likely to be unnecessarily absent.
8. **Company Name** will work with insurance companies (e.g., those providing employee health benefits) and state and local health agencies to provide information to employees about medical care in the event of a COVID-19 outbreak.

Implement Workplace Controls

Occupational safety and health professionals use a framework called the “hierarchy of controls” to select ways of controlling workplace hazards. In other words, the best way to control a hazard is to systematically remove it from the workplace, rather than relying on employees to reduce their exposure. During a COVID-19 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 SARS-CoV-2.

Engineering Controls

Engineering controls involve isolating employees from work-related hazards. 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 include:

1. Increasing ventilation rates in the work environment.
2. Installing physical barriers, such as clear plastic sneeze guards.
3. Installation of additional hand washing stations.

Unfortunately the nature of the worksite and work functions that **Company Name** conducts, most engineering controls are not feasible. Most, if not all work functions **Company Name** performs are in outdoor open environment.

Administrative Controls

Administrative controls require action by the employee or **Company Name**. Typically, administrative controls are changes in work policy or procedures to reduce or minimize exposure to a hazard. Examples of **Company Name** administrative controls for SARS-CoV-2 include:

1. Encouraging sick workers to stay at home.
2. Encourage employees to wash/sanitize their hands after removing gloves, touching possible contaminated surfaces, after bathroom breaks, prior to lunch and coffee breaks
3. Employees must refrain from touching their mouth, nose face or eyes. These are suspected routes of entry.
4. Separation during lunch and coffee breaks.
5. Discourage employee from carpooling
6. Discontinuing nonessential travel to locations with ongoing COVID-19 outbreaks.
7. Developing emergency communications plans, including a forum for answering employee's concerns and internet-based communications, if feasible.
8. Providing employees with up-to-date education and training on COVID-19 risk factors and protective behaviors (e.g., cough etiquette and care of PPE).
9. Train employees who need to use protecting clothing and equipment to properly don, doff and maintain the PPE correctly, including in the context of their current and potential duties. Training material will be easy to understand and available in the appropriate language and literacy level for all employees.

Personal Protective Equipment (PPE)

While engineering and administrative controls are considered more effective in minimizing exposure to SARS-CoV-2, 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, face masks, and respiratory protection, when appropriate. During an outbreak of an infectious disease, such as COVID-19, recommendations for PPE specific to occupations or job tasks may change depending on

geographic location, updated risk assessments for employees, and information on PPE effectiveness in preventing the spread of COVID-19.

All types of PPE must be:

1. Selected based upon the hazard to the employee.
2. Properly fitted and periodically refitted, as applicable (e.g., respirators).
3. Consistently and properly worn when required.
4. Regularly inspected, maintained, and replaced, as necessary.
5. Properly removed, cleaned, and stored or disposed of, as applicable, to avoid contamination of self, others, or the environment.

Company Name is obligated to provide their employees at **NO COST** with PPE needed to keep them safe while performing their jobs. The types of PPE required during a COVID-19 outbreak will be based on the risk of being infected with SARS-CoV-2 while working and job tasks that may lead to exposure.

National Institute for Occupational Safety and Health (NIOSH)-approved, N95 filtering facepiece respirators or better must be used in the context of **Company Name**, written respiratory protection program that includes fit-testing, training, and medical examinations as required by OSHA's Respiratory Protection standard, 29 CFR 1910.134

When disposable N95 filtering facepiece respirators are not available, other types of respirators that provide greater protection and improve employee comfort will be considered.

Other types of acceptable respirators include: an 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 arrestance (HEPA).

- 1 Use a surgical N95 respirator when both respiratory protection and resistance to blood and body fluids is needed.
- 2 Face shields may also be worn on top of a respirator to prevent bulk contamination of the respirator. Certain respirator designs with forward protrusions (duckbill style) may be difficult to properly wear under a face shield.
- 3 Respirator training will address selection, use (including donning and doffing), proper disposal or disinfection, inspection for damage, maintenance, and the limitations of respiratory protection equipment.
- 4 The appropriate form of respirator will depend on the type of exposure and on the transmission pattern of COVID-19.

Follow Existing OSHA Standards

Existing OSHA standards may apply to protecting workers from exposure to and infection with SARS-CoV-2.

While there is no specific OSHA standard covering SARS-CoV-2 exposure, some OSHA requirements may apply to preventing occupational exposure to SARS-CoV-2. Among the most relevant are:

OSHA's Personal Protective Equipment (PPE) standards (in general industry, 29 CFR 1910 Subpart I), which require using gloves, eye and face protection, and respiratory protection. When respirators are necessary to protect workers or where employers require respirator use, employers must implement a comprehensive respiratory protection program in accordance with the Respiratory Protection standard (29 CFR 1910.134).

The General Duty Clause, Section 5(a)(1) of the Occupational Safety and Health (OSH) Act of 1970, 29 USC 654(a)(1), which requires employers to furnish to each worker "employment and a place of employment, which are free from recognized hazards that are causing or are likely to cause death or serious physical harm."

OSHA's Blood-borne Pathogens standard (29 CFR 1910.1030) applies to occupational exposure to human blood and other potentially infectious materials that typically do not include respiratory secretions that may transmit SARS-CoV-2. However, the provisions of the standard offer a framework that may help control some sources of the virus, including exposures to body fluids (e.g., respiratory secretions) not covered by the standard.

I _____ have had the opportunity to read and understand the **Company Name** 2019 Novel Coronavirus Prevention Plan. I understand that I have the choose to either return to work and follow the guidelines provided by my employer, The Center for Disease Control (CDC) OSHA and other health advisories or remain at home in a voluntary isolation without fear of being demoted, disciplined, suspended, or be discharged nor will I suffer any retaliation or reprisals due to my decision to remain at home during this event.

Employee Signature

Date