



# **Infectious Disease Preparedness and Response Plan**

Updated 10/8/2021

## I. Purpose

Pulaski County's Infectious Disease Preparedness and Response Plan is a guide for planning for, responding to, and recovering from a pandemic that may impact our business and the community. In this plan we identify (1) potential occupational exposure to infectious disease, (2) ways to mitigate our employee's risk of contracting these infections and (3) methods to respond in an appropriate and timely manner if exposure incidents occur. This plan describes the implementation of mandatory health and safety requirements established by the Virginia Department of Labor and Industry, COVID-19 Executive Order and subsequent Addendum as well as guidelines from the Centers for Disease Control.

## II. Scope

An infectious disease is transmitted either by inhalation of infectious particles/droplets or direct contact of the particles/droplets with mucous membranes in the respiratory tract or eyes. Infectious diseases may include the Novel Coronavirus (COVID-19), MERS, SARS, Ebola, Anthrax, pandemic flu, and other known diseases. Examples of infectious diseases for which this plan could apply are included in [Appendix A-Descriptions of infectious diseases](#).

During an outbreak of a highly infectious disease, the US Government – US Department of Health and Human Services (HHS) along with the Centers for Disease Control and Prevention (CDC) – is the national leader for overall communication and coordination efforts. They also work closely with the World Health Organization (WHO). Pulaski County will follow the recommendations of these organizations as well as the Occupational Health and Safety Administration (OSHA), and other applicable federal, state and local health authorities.

**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, shortness of breath, sore throat, loss of smell or taste, and/or gastrointestinal problems including nausea, diarrhea and vomiting. 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** – COVID-19 started from exposure to an infected animal. Infected people can spread COVID-19 to other people. This virus is thought to spread mainly from person-to-person by:

- People who are in close contact with one another (within six feet)

- Through respiratory droplets produced when an infected person coughs or sneezes. The droplets can land in the mouths or noses of people who are nearby or possibly inhaled into the lungs.
- It may be possible that a person can get COVID-19 by touching a surface or object that has the virus 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 prominent way the virus spreads.

### ***How COVID-19 Can Affect Our Workplace***

We may see increased absenteeism from workers:

- Who are sick
- Caring for a sick family member
- Caring for children if schools or day care centers are closed
- Have at-risk persons in their home

We may need to change the way we do business and continue operations, including the following:

- Reducing person to person contact
  - Considering alternative ways to work (e.g. telework, staggering of shifts, reduced number of workers on site at one time).
  - Find alternative ways to work with or help our customers
- Cross-training our staff to cover essential functions and operations

We may see interrupted supply/delivery:

- Shipments from affected areas may be delayed or cancelled

### **III. Responsibilities**

Pulaski County has assigned the following individual(s) to serve in the role of health officer. The health officer has the authority to stop or alter activities to ensure that all work practices conform to the mandatory safety and health requirements applicable to COVID-19 as well as any other infectious disease hazards.

Health Officer(s)			
Name	Title	Department	Phone Number
Nathaniel Davis	Infection Control Officer	Public Safety	540-440-0136

For the purpose of ensuring compliance with the most recent safety and health requirements, Pulaski County is responsible for administering this plan, monitoring agencies for new requirements, updating this plan, communicating any changes to employees, and monitoring the overall effectiveness of the plan. Human Resources or the Infection Control Officer is responsible for providing employees with a copy of this plan upon request.

#### IV. Determination of Exposure Risk by Job Duty

Occupational exposure to infectious diseases is work activity or work conditions that are reasonably anticipated to present an elevated risk of contracting these diseases without protective measures in place. Where appropriate, Pulaski County will follow the recommendations of federal, state and local health authorities to address considerations related to occupational exposure to infectious diseases including, but not limited to the following:

- Where, how, and to what sources of infection workers might be exposed including:
  - The general public, customers, and coworkers; and
  - Sick individuals or those that particularly at high risk of infections (e.g. international travelers who have visited locations with widespread sustained (ongoing) disease transmission, healthcare workers who have had unprotected exposures to people known to or are suspected of being infected)
- Worker's individual risk factors (chronic kidney disease, COPD, immunocompromised state, obesity, serious heart conditions, sickle cell disease, type 2 diabetes, asthma, cerebrovascular disease, cystic fibrosis, hypertension, immune deficiencies, HIV, neurologic conditions, liver disease, pregnancy, pulmonary fibrosis, smoking, thalassemia, type 1 diabetes mellitus). The risk of severe illness from COVID-19 also increases with age.
- Controls necessary to address those risks

We have determined the COVID-19 exposure risk level of all worksite functions to ensure that we apply appropriate hazard controls – including training, equipment, and personal protective equipment (PPE) – to protect employees' safety and health. This assessment is based on OSHA Publication 3990.

Classes of employees have been assigned to risk categories as follows based on information in **Appendix B – Worker Exposure Risk Classifications**:

*Exposure Risk Level means an assessment of the possibility that an employee could be exposed to the hazards associated with SARS-CoV-2 virus and the COVID-19 disease. Hazards and job tasks have been divided into four risk exposure levels: “Very High”, “High”, “Medium”, and “Lower”.*

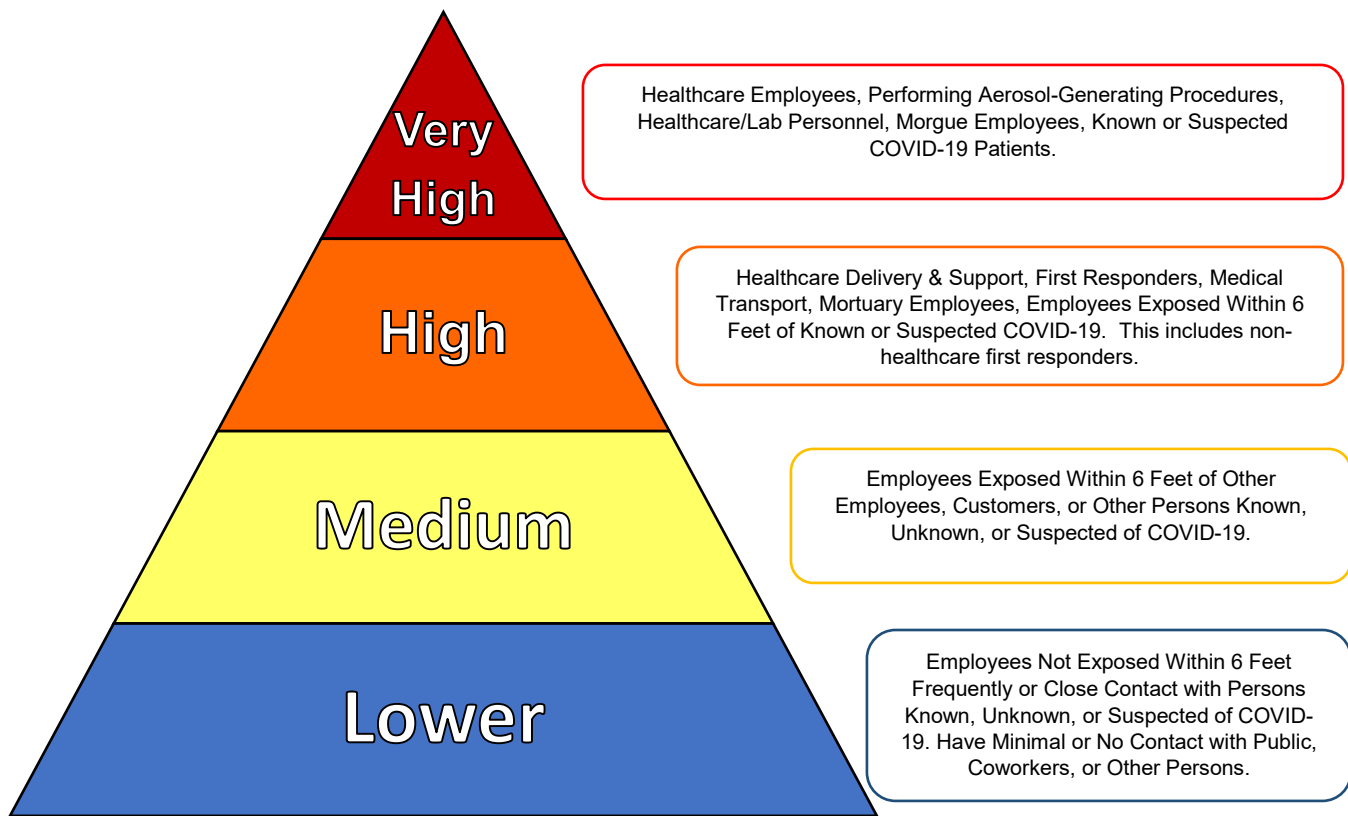
**“Very High”** exposure risk hazards or job tasks are those in places of employment with high potential for employee exposure to known or suspected sources of the SARSCoV-2 virus and the COVID-19 disease including, but not limited to, during specific medical, postmortem, or laboratory procedures (refer to page 8 of the 16 VAC 25-220, Emergency Temporary Standard/Emergency Regulation for a more detailed description).

**“High”** exposure risk hazards or job tasks are those in places of employment with high potential for employee exposure within six feet with known or suspected sources of SARS-CoV-2 that are not otherwise classified as “very high” exposure risk (refer to page 8 of the 16 VAC 25-220, Emergency Temporary Standard/Emergency Regulation for a more detailed description).

**“Medium”** exposure risk hazards or job tasks that are not labeled as “very high” or “high” (refer to pages 9-10 of the 16 VAC 25-220, Emergency Temporary Standard/Emergency Regulation for a more detailed description).

**“Lower”** exposure risk hazards or job tasks are those not otherwise classified as “very high”, “high”, or “medium” exposure risk that do not require contact within six feet of persons known to be, or suspected of being, or who may be infected with SARS-CoV-2; nor contact within six feet with other employees, other persons, or the general public except as otherwise provided in this definition (refer to page 10 of the 16 VAC 25-220, Emergency Temporary Standard/Emergency Regulation for a more detailed description).

The following graph relates to job tasks that pose a risk level to employees. The job tasks that are listed are not an all-inclusive list.



Consult the definition of “Exposure risk level” of the Emergency Temporary Standard for COVID-19 by the Virginia Department of Labor and Industry. Also, consult pages 18 - 21 of the OSHA document “Guidance on Preparing Workplaces for COVID-19” which is available at <http://www.osha.gov/Publications/OSHA3990.pdf> and determine the risk level of each employee or class of employee based on their type of work and duties. Some jobs may have more than one type of exposure risk depending on the task or qualifying factors.

Job Task/Employee/Job Category ACCOUNT CLERK, ACCOUNTS PAYABLE CLERK, OFFICE MANAGERS, ASST. CO. ADM., ASST. FINANCE DIR., PSA BILLING CLERK, RECEPTIONIST, OFFICE ADMINISTRATORS, CONST. CONTRACT ADM., PSA CONST. INSP., CO. ENGINEER, PSA CUSTOMER SERV. SUPER., FINANCE DIR., E-911 EMPLOYEES, PUBLIC SAFETY ADM. ASST., ENGINEERING TECH. ASST., EXEC. SEC./CLERK TO BOS, FINANCE ACCOUNTANT, GARAGE EE'S, SHERIFF'S DEPT. GENERAL CLERK, GIS COORDINATOR, GROUNDS MAINT. EE'S, HR DIRECTOR, HR ASSISTANT, IT EE'S, PSA METER READER, PAYROLL SUPERVISORS, PSA WATER & SEWER EE'S, VISITOR CTR. ATTNDTS, PSA WTP EE'S			
Check the appropriate box for each hazard:	Description of hazard(s):	Engineering/Administrative Controls	PPE
Very High	Does not require contact within 6 feet. Minimal direct contact with staff and customers.	Plexiglas placement in office spaces. Frequent hand washing, use of hand sanitizer and limited contact with co-workers and the public outside of six feet.	Masks
High			
Medium			
Lower			

Job Task/Employee/Job Category AFTER SCHOOL COUNSELORS, CENTRAL CAMP COUNSELOR, RANDOLPH PARK EE'S, RECREATION OFFICIALS			
Check the appropriate box for each hazard:	Description of hazard(s):	Engineering/Administrative Controls	PPE
Very High	Minimal occupational contact inside six feet.	Social distancing as much as possible, frequent hand washing and use of hand sanitizer.	Masks
High			
Medium			
Lower			
Job Task/Employee/Job Category BLDG. CODE OFFICIAL, BLDG. INSPECTOR, PSA CONVENIENCE CTR. ATTENDANTS, ECO. DEV., DIRECTOR, COUNTY ADMINISTRATOR, GEN. SERV. DIR/PSA EXEC. DIRECTOR, PLANNING & ZONING DIRECTOR, PUBLIC SAFETY DIRECTOR, PUBLIC SAFETY DEPUTY DIRECTOR, ENVIRONMENTAL SERV. TECH., GENERAL SERVICES EE'S, NRCC EE'S, PARKS & REC. EE'S, PSA SANITATION WORKER, PSA SANITATION DRIVER, VJCCA COORDINATOR, LIBRARY EE'S			
Check the appropriate box for each hazard:	Description of hazard(s):	Engineering/Administrative Controls	PPE
Very High	Minimal occupational contact inside six feet.	Social distancing as much as possible, frequent hand washing and use of hand sanitizer.	Masks, gloves (as needed), safety glasses (as needed).
High			
Medium			
Lower			
Job Task/Employee/Job Category COMMONWEALTH'S ATTORNEY POSITIONS, ASST. REGISTRAR, CIRCUIT COURT CLERKS, COMM. OF THE REVENUE EE'S, DEPUTY REGISTRAR, TREASURER'S OFFICE EE'S, REGISTRAR, VICTIMS ASSISTANCE			
Check the appropriate box for each hazard:	Description of hazard(s):	Engineering/Administrative Controls	PPE
Very High	Minimal occupational contact inside six feet.	Social distancing as much as possible, frequent hand washing and use of hand sanitizer.	Masks
High			
Medium			
Lower			
Job Task/Employee/Job Category SHERIFF'S DEPARTMENT, CODE ENFORCEMENT OFFICER, EMERGENCY MGT. COORDINATOR, EM DEPUTY COORD., ANIMAL CONTROL OFFICERS			
Check the appropriate box for each hazard:	Description of hazard(s):	Engineering/Administrative Controls	PPE
Very High	High exposure inside six feet to known or suspected cases.	Social distancing as much as possible, frequent hand washing and use of hand sanitizer.	Masks, gloves, safety glasses, gowns, face shields.
High			
Medium			
Lower			

Job Task/Employee/Job Category PUBLIC SAFETY EMPLOYEES, PUBLIC SAFETY DIRECTOR, PUBLIC SAFETY DEPUTY DIRECTOR			
Check the appropriate box for each hazard:	Description of hazard(s):	Engineering/Administrative Controls	PPE
Very High	High potential for exposure during medical, postmortem or lab procedures.	Social distancing as much as possible, frequent hand washing and use of hand sanitizer.	Masks, respirators, gloves, safety glasses, gowns, face shields.
High			
Medium			
Lower			

#### IV. Contingency Plan and Worker Protection in the Event of an Infectious Disease Outbreak

We shall use feasible engineering controls and work practice controls to reduce employee exposure to infectious diseases. When those controls are not sufficient, we shall provide personal protective equipment (PPE). We have defined appropriate workplace controls for our various worker exposure risk classifications by using [Appendix C – Infectious Disease Workplace Controls Checklist](#).

Workplace flexibilities and protections will be emphasized to protect workers during an infectious disease outbreak. Where appropriate, and as identified in Appendix C, Pulaski County will follow the recommendations of Federal, State, and local health authorities, which may include but not be limited to the following:

- Have sick employees stay home
- Ensure sick leave policies are flexible and consistent with public health guidance and that employees are aware of these policies
  - Talk with companies that provide Pulaski County with contract or temporary employees about the importance of sick employees staying home and encourage them to develop non-punitive leave policies
  - Maintain flexible policies that permit employees to stay home with ill family members
- Establish policies and practices to increase the physical distance among employee's if health authorities recommend use of social distancing
  - Implementation of flexible worksites (e.g., telework)
  - Implementation flexible work hours (e.g., staggered shifts)
  - Increasing physical space between employees at the worksite
  - Increasing physical space between employees and customers (e.g., drive through or partitions)
  - Implementation of flexible meeting and travel options (e.g., postponing non-essential meetings or events).



- Delivering services remotely (e.g., phone, video or web)
- Practice of social distancing when clocking into or out of work

These plans may be engaged as follows:

1. Absenteeism – In the event that employees become infected or quarantined, other employees may be required to work additional hours, cancel vacations or temporarily relocate to cover other positions and/or offices as needed. Employees are to continue to follow the Pulaski County Personnel Policy regarding the request for leave to their supervisors.
  
2. Personal Hygiene:
  - All employees are required to practice self-distancing and adorn masks based on current Virginia Department of Health guidelines
  - Practice proper hand hygiene as outlined previously
  - Do not touch your face, eyes, nose, hair with unwashed hands
  - Limit contact as much as possible to computer, phone, tablets, etc.
  - Do not shake hands
  - Disinfect hands after filling vehicles with gasoline
  
3. Telework - The following guidelines shall be required for all employees required to telework from home. Positions will be identified by the supervisor and approved by Human Resources and the County Administrator. The purpose of this policy is to set forth administrative guidelines and determine personnel that will be required to telework should the offices be closed. Employees that are not determined to be essential personnel will be advised by their supervisor and must adhere to the telework requirements listed below.
  - The total number of hours employees are normally required to work will not change regardless of the work location. Supervisors will determine work schedules.
  - Time worked at home will be paid in the same manner in which the employee received it onsite and will also be paid according to the FLSA.
  - Telework assignments do not change the conditions of employment or required compliance with all personnel policies.
  - An employee's compensation nor benefits will change.
  - Employees agree to apply themselves to their work during their work hours.
  - All work hours must be documented honestly and appropriately on all timesheets.
  - Supervisors may contact employees to relay information, hold work related meetings and discuss the progress of their work.
  - Telework is not intended to be used in place of paid leave.
  - Pulaski County may be liable for work related injuries or illnesses that occur during employee's established work hours in their alternate work locations. Therefore, all work related injuries must be reported to Company Nurse and their supervisor immediately.
  - Pulaski County will provide equipment and materials needed by the employee to effectively perform their duties or employees may be authorized to use their own equipment.
  - Pulaski County authorized equipment may only be used for authorized agency purposes only and by authorized employees.

- Employees are responsible for protecting Pulaski County owned equipment issued from theft, damage and unauthorized use.
  - Employees must maintain confidentiality during teleworking. Employees must safeguard information used and accessed while teleworking.
  - Employees must agree to follow all applicable security procedures to ensure confidentiality and security of data.
  - Employees and Pulaski County must agree to the terms of teleworking before an employee will be allowed to work remotely.
  - Any sick, vacation or comp leave must be approved by the supervisor.
  - Employees required to telework must immediately report if they or their immediate family meet any of the conditions outlined above for the Emergency Paid Sick Leave.
4. Essential Personnel The following departments are required to report to work as essential personnel. Other departments and/or personnel may be added upon the County Administrator's discretion and may be required to work at the Emergency Operations Center (EOC) or may be reassigned to other departments. Essential employees may also be directed to work rotating days and will be informed by their supervisor if this type of schedule is implemented.
- PSA Commercial/Residential Refuse Collection
  - Water Treatment Plant
  - Water/Wastewater
  - Payroll
  - Human Resources
  - Finance
  - Garage
  - Environmental Services
  - General Services
  - Public Safety
  - E-911
  - County Administration
  - Information Technology
  - Building Department
5. PPE – Employees of each department must adorn the proper PPE as outlined in the risk assessment diagram above. Masks must be two or more layers of washable, breathable fabric, fitting over the nose, under the chin and against the side of the face without gaps. Neck gaiters must be two or more layers. Face coverings cannot have exhalation valves or vents. Face shields are not substitutes for masks!
6. Reduced Work Force – Should the office environment become infected a reduced workforce may be required as approved by the County Administrator, this may include reducing the number of employees on site and cross training in the event of an outbreak within the work environment.

#### IV. Basic Infectious Disease Prevention and Control Measures

To control the spread of infectious diseases such as COVID 19, basic prevention and control measures must be implemented to ensure that all employees are protected against the hazards of infectious disease. To control the spread of infectious disease it is important to keep up general housekeeping in the workplace as well as social distancing and other best practices.

Unvaccinated employees must wear masks regardless of transmission rates when not eating/drinking and while indoors, unless they are occupying their own office space and are alone.

During times of high community transmission rates (red), as determined by the Virginia Department of Health, all employees, customers and visitors are required to wear a facemask while indoors regardless of vaccination status.

During times of substantial community transmission rates (orange), as determined by the Virginia Department of Health, all employees, customers and visitors are requested to wear a facemask while indoors regardless of vaccination status.

During times of moderate community transmission rates (yellow), as determined by the Virginia Department of Health, all unvaccinated or partially vaccinated employees, customers and visitors are suggested to wear facemasks.

During times of low community transmission rates (blue), as determined by the Virginia Department of Health, unvaccinated employees, customers and visitors are suggested to wear facemasks.

**Housekeeping** – Pulaski County will be maintaining regular housekeeping practices, including cleaning and disinfection of work environments. See [Appendix D for COVID-19 Prevention with enhanced cleaning and disinfection](#).

All disinfectants must be EPA-approved or otherwise comply with [CDC disinfection guidance](#). The General Services Director will ensure the Environmental Services Crew be responsible for the disinfecting each area. The employer must make sure that adequate disinfection products are on hand, safety data sheets (SDSs) are obtained and retained, and employees using the products are aware of any personal protective equipment that is required for use.

#### V. Identification and Isolation of Sick and/or Exposed Employees

Risk and exposure determinations are made without regard to employees protected characteristics as defined by local, state, and federal law.

Any health-related information and documentation gathered from employees is maintained confidentially and in compliance with state and federal law. Specifically, medical documentation is stored separate from employee's personnel documentation.

- 1. Employee Exhibiting COVID-19 Symptoms** – If an employee exhibits COVID-19 symptoms, the employee will be asked to contact the Infectious Disease Control Officer, Human Resources or their healthcare provider to determine if they should report to work. Normal call in procedures are required. If symptoms occur at work the employee must advise their supervisor and be tested before returning to work. A copy of the positive test result must be sent to Human Resources.
- 2. Employee Tests Positive for COVID-19** – An employee that tests positive for COVID-19 will be directed to self-isolate away from work. The employee may only return to work consistent with CDC and state and local guidelines.

If Pulaski County learns that an employee has tested positive, Human Resources will conduct an investigation into co-workers that may have had close contact with the confirmed-positive employee in the prior 48 hours and direct those individuals that have had close contact with the confirmed positive employee to contact the County's Infectious Disease Control Officer regarding the need to quarantine. Close contact or "true exposure" is defined as being within six feet of an infected person for at least fifteen minutes. The employee may return to work consistent with CDC and state and local guidelines.

- 3. Employee Has Close Contact with a Tested Positive COVID-19 Individual** – If an employee learns that he or she has come into close contact with a confirmed-positive individual outside of the workplace, he/she must alert the Infectious Disease Control Office or Human Resources of the close contact to determine if there has been a true exposure and determine if the employee must self-quarantine. The employee may return to work consistent with CDC and state and local guidelines.

**Note: These guidelines may change as CDC and state and local guidelines develop**

#### **4. Return-to-Work Requirements**

Employees should refer to the current CDC recommended return to work guidelines at <https://www.cdc.gov/coronavirus/2019-ncov/if-you-are-sick/isolation.html>.

Employees are typically required to submit a release to return to work from a healthcare provider; given the current stressors on the healthcare system, Pulaski County may accept written statements from employees confirming all the factors supporting their release.

## VI: Communication

Infectious disease outbreaks can evolve rapidly. Pulaski County will communicate to our employees as information becomes available on the following topics according to the guidelines defined in [Appendix E – Crisis Communications Plan](#). This information will include:

- Information about the infectious disease outbreak
- Changes to our business operations including workplace policies, workplace protections, and flexibilities
- Notifying workers if any person in the facility has been confirmed infectious or has been around someone who has been confirmed infectious for their potential exposure

Note: Except for circumstances in which Pulaski County is legally required to report workplace occurrences of communicable disease, the confidentiality of all medical conditions will be maintained in accordance with the applicable law and to the extent practical under the circumstances. When it is required, the number of persons who will be informed of an employee's condition will be kept at a minimum needed not only to comply with legally-required reporting, but also to assure proper care of the employee and to detect situations where the potential for transmission may increase. [A sample notice to employees can be found in Appendix F](#). Pulaski County reserves the right to inform other employees that a co-worker (without disclosing the employee's name) has been diagnosed with COVID-19 if the other employee may have been exposed to the disease so the employee make take measures to protect their own health.

## VII. Training

The following training is provided to our employees who have occupational exposure to infectious disease:

The training material will cover the following:

- Explanation of infectious disease
- Modes of transmission and applicable control procedures
- Review of recognized tasks and activities that may pose an exposure
- Appropriate workplace controls, which may include engineering and administrative controls, safe work practices, and PPE
- Selection of PPE as appropriate, proper use, location, removal, handling, cleaning, decontamination and disposal of items

Training materials may include but are not limited to the following:

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- Appendix G – COVID-19 Toolbox Talk
- Appendix H – Sequence for donning personal protective equipment (CDC)
- Appendix I – How to properly don and doff a disposable respirator (CDC)
- PureSafety Course – Pandemic Influenza
- PureSafety Course – Infection Control/Handwashing

The training will occur:

- At the time of the initial assignment to tasks where occupational exposure may take place;
- At least annually thereafter, or refresher not to exceed 12 months from the previous training where required by OSHA;
- When changes, such as introduction of new engineering or work practice controls, modification of tasks or procedures or institution of new tasks or procedures, that affect the employee's occupational exposure or control measures. The additional training may be limited to addressing the new exposures and control measures.

Each training record will include the following information:

- The date(s) of the training
- The contents or summary of the training
- The names and qualifications of persons conducting the training or who are designated to respond to interactive questions
- The names and job titles of all persons attending the training

## **VIII: Administrative Office Regulations**

### **Supervisors are responsible for:**

- Assigning dedicated entry point(s) for all employees to reduce congestion at the main entrance
- Providing visual indicators of appropriate spacing for employees outside or inside the building in cases of congestion
- Requiring face coverings in shared spaces, including during in-person meetings and in restrooms and hallways
- Increasing distancing between employees by spreading out workspaces, staggering workspace usage, restricting non-essential common space (e.g., cafeterias), providing visual cues to guide movement and activity (e.g., restricting elevator capacity with markings, locking conference rooms)
- Prohibit social gatherings and meetings that do not allow for social distancing or that create unnecessary movement through the office.

- Post signs about the importance of personal hygiene, social distancing and mask requirements
- Advise employees to disinfect high-touch surfaces in offices (e.g., whiteboard markers, restrooms, handles) and minimize shared items when possible (e.g., pens, remotes, and whiteboards)
- Institute cleaning and communications protocols when employees are sent home with symptoms.
- Notify Human Resources if an employee learns that an individual (including a customer, supplier, or visitor) with a confirmed case of COVID-19 has visited the office

**IX: Pulaski County Personnel Policy, Prevention of SARS-CoV2/COVID-19**, See **Appendix J**

#### **SOURCES:**

Guidance on Mitigating and Preventing the Spread of COVID-19 in the Workplace  
<https://www.osha.gov/coronavirus/safework>

# Appendix A – Descriptions of infectious diseases

## COVID-19

The novel coronavirus outbreak originated in the Wuhan province of China. Symptoms may appear 2-14 days after exposure. The novel coronavirus (officially called COVID-19) is believed to spread from close person-to-person contact (within 6 feet), primarily through respiratory droplets produced when an infected person coughs or sneezes. The virus is also believed to spread by people touching a surface or object and then touching one's mouth, nose, or possibly the eyes. People at risk are those who have recently traveled to/from China and other affected countries, and those in close contact with infected individuals. For the latest information on the symptoms, prevention, and treatment of coronavirus, visit the [Centers for Disease Control and Prevention coronavirus webpage](#).

**Pandemic Flu – Influenza** - Influenza (flu) viruses can cause a severe disease, even death. Flu viruses are grouped into three types, designated A, B, and C.

- Type A – can affect both humans and animals and are associated with more severe disease. Usually the cause of global pandemics.
- Type B – infect only humans and cause seasonal outbreaks and less severe disease than A in the United States (US). Does not cause pandemics
- Type C – Very common, usually cause mild respiratory symptoms.

**MERS & SARS** – Middle East Respiratory Syndrome and Severe Acute Respiratory Syndrome.

**MERS** – also known as the “camel flu.” A fairly new respiratory virus for humans. Symptoms include fever, cough, diarrhea, and shortness of breath. Some experience symptoms involving the gastrointestinal tract causing nausea, vomiting, and diarrhea. Transmission is believed to be through respiratory droplets. Incubation period is approximately 5-7 days.

**SARS** – A severe respiratory disease that started in southern China. Initial symptoms are flu-like including muscle pain, high fever, sore throat, cough, and possible diarrhea. These symptoms may lead to shortness of breath and/or pneumonia. The typical incubation period is 4-6 days, although it can be as short as one day. Transmission is through respiratory droplets. Although there is some belief that SARS may be spread through airborne transmission – meaning spread by tiny pathogens in the air that are inhaled.

**Anthrax** – A serious infectious disease that can cause death. Anthrax gets into the body through the skin, lungs, or gastrointestinal tract. All types of Anthrax are bacterial and can spread throughout the body quickly if not treated with antibiotics.

**Ebola** – A rare viral hemorrhagic fever in humans and non-human primates. Symptoms include fever, sore throat, muscular pain, and headaches and begin between 2 days and 3 weeks after contracting the virus. Vomiting, diarrhea, and a rash may follow along with decreased function of the liver and kidneys. An infected person has a high risk of death killing at least 25% of those infected. The virus spreads through direct contact with body fluids, such as blood, urine, feces, semen, breast milk, sweat, and vomit.



## Appendix B– Worker exposure risk classifications

We have reviewed our operations and assigned our workers into exposure risk classifications based on guidance from OSHA. Descriptions of each classification are in the Worker Exposure Classification section of the main plan.

### Very High Exposure Risk

Job Title	Very High Risk Operations

### High Exposure Risk

Job Title	High Risk Operations

### Medium Exposure Risk

Job Title	Medium Risk Operations

### Low (Caution) Exposure Risk

Job Title	Low Risk Operations

# Appendix C – Infectious disease workplace controls checklist

We have defined appropriate workplace controls for our various worker exposure risk classifications defined in Appendix B.

This checklist is for workers in the following classification:

- ☐ Very high exposure risk
- ☐ High exposure risk
- ☐ Medium exposure risk
- ☐ Low (Caution) exposure risk

Engineering Controls (check off those that apply) to reduce exposure:

- ☐ Install high-efficiency air filters
- ☐ Increase ventilation
- ☐ Install physical barriers (examples are drive through windows for customers, plastic barriers)
- ☐ Other: \_\_\_\_\_

Administrative Controls (check off those that apply) to change work policies or procedures

- ☐ Have sick employees stay home
- ☐ Implement sick leave policies are flexible and consistent with public health guidance
- ☐ Implement flexible worksites (e.g., telework)
- ☐ Alter work schedules (examples staggering shifts)
- ☐ Create physical distance between workers and customers (social distancing)
- ☐ Discontinue non-essential travel
- ☐ Have services delivered remotely
- ☐ Have products delivered through curbside pick-up or delivery
- ☐ Prepare communication plans
- ☐ Other: \_\_\_\_\_

Personal Protective Equipment (check off those that apply) based on job tasks and to protect employees from exposure when other controls are not available

- ☐ Gloves
- ☐ Goggles
- ☐ Face shields
- ☐ Face masks
- ☐ Respiratory protection: specify type of respiratory protection \_\_\_\_\_
- ☐ Other: \_\_\_\_\_

# Appendix D –COVID-19 – Prevention with enhanced cleaning and disinfection

For the most updated information on cleaning and disinfecting, please see [CDC Recommendations](#).

Based on what is currently known about the virus, spread from person-to-person happens most frequently among close contacts (within about 6 feet). This type of transmission occurs via respiratory droplets. Current evidence suggests that the novel coronavirus responsible for COVID-19 may remain viable for hours to days on surfaces made from a variety of materials. Cleaning surfaces followed by disinfection is a best practice measure for prevention of COVID-19 and other viral respiratory illnesses.

## General Guidance for routine cleaning and disinfection

Routine cleaning and disinfection of surfaces using appropriate methods can help prevent the spread of COVID-19. In non-healthcare settings, a best practice is to be vigilant about routinely cleaning and disinfecting surfaces, especially for surfaces and objects touched frequently.

Practice good hand hygiene after cleaning:

- Wash hands often with soap and warm water for at least 20 seconds.
- If soap and warm water are not readily available, use an alcohol-based hand sanitizer that contains at least 60% alcohol.

Safety guidelines during cleaning and disinfection:

- Wear disposable gloves when cleaning and disinfecting. Gloves should be discarded after each use. Clean hands immediately after gloves are removed.
- Wear eye protection when there is a potential for splash or splatter to the face.
- Store chemicals in labeled, closed containers. Keep them in a secure area away from children and food. Store them in a manner that prevents tipping or spilling.

High touch surfaces

- Frequently touched surfaces and objects vary by location. Examples include: doorknobs, light switches, handrails, kitchen appliances, counters, drawer pulls, tables, sinks, faucet and toilet handles, drinking fountains, elevator buttons, phones, keys, and remote controls.
- For workspace areas, pay attention to surfaces and objects such as chairs, desks, phones, printers, keyboards, computer mouse, and other areas.
- For vehicles, pay attention to the steering wheel, radio buttons, turn indicators, cup holders, door handles, window buttons, locks, arm rests, seat cushions, buckles, and seatbelts.
- For eating establishments, pay attention to door handles, cash registers, and checkout counters.

Clean any visible dirt and grime from surfaces and objects before using disinfectants because disinfectants are most effective on clean surfaces. Always follow the manufacturer's directions for application, time, or any special considerations.

## Hard (Non-porous) Surfaces

- If surfaces are dirty, use a detergent or soap and water prior to disinfection.
- For disinfection, most common EPA-registered disinfectants should be effective.
  - A diluted household bleach solution can be used if appropriate for the surface. Follow manufacturer's instructions for application, ensuring a contact time of at least 1 minute, and allowing proper ventilation during and after application. 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 (1/3 cup) bleach per gallon of water or
  - 4 teaspoons bleach per quart of water

### **Soft (Porous) Surfaces**

- 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.
  - If the items can be laundered, launder items in accordance with the manufacturer's instructions using the warmest appropriate water setting for the items and then dry items completely.
    - Otherwise, use products that are EPA-approved for use against the virus that causes COVID-19 and that are suitable for porous surfaces

### **Electronics**

- For electronics such as tablets, touch screens, keyboards, remote controls, and ATM machines, remove visible contamination if present.
  - Follow the manufacturer's instructions for all cleaning and disinfection products.
  - Consider use of wipeable covers for electronics.
  - If no manufacturer guidance is available, consider the use of alcohol-based wipes or sprays containing at least 70% alcohol to disinfect touch screens. Dry surfaces thoroughly to avoid pooling of liquids.

### **Linens, Clothing, and Other Items That Go in the Laundry**

- In order to minimize the possibility of dispersing virus through the air, do not shake dirty laundry.
- Wash 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. Dirty laundry that has been in contact with an ill person can be washed with other people's items.
- Clean and disinfect hampers or other carts for transporting laundry according to the guidance above for hard or soft surfaces.

#### **Additional Resources:**

- OSHA COVIC-19 Website - <https://www.osha.gov/coronavirus>
- CDC Handout for Cleaning and Disinfecting Your Facility - <https://www.cdc.gov/coronavirus/2019-ncov/community/disinfecting-building-facility-H.pdf>

# Appendix E – Crisis communications

## Scope of Crisis Communications Plan

- Prepare and disseminate accurate information, key messages and emerging facts to the target audience as quickly as possible
- Update information regularly as circumstances change
- Complete the *Press Information Log Sheet* for inquiries from the Media
- Approve outside communication such as emails and news releases

## Crisis Communications Team Representative

<input type="checkbox"/> _____	<input type="checkbox"/> _____	<input type="checkbox"/> _____
<input type="checkbox"/> _____	<input type="checkbox"/> _____	<input type="checkbox"/> _____

## Location for Crisis Communication

Options such as a conference room, media room, cafeteria

## Response

The team will meet frequently to gather facts and review changing facts throughout the crisis. The team will develop and address key message for reaching audiences and determine if strategies need to change.

## Immediate Threat and Response Needed

- Alarm activated for immediate threat by Emergency Response Team
- Assess situation and level of impact
- Have all media calls sent to Communications Officer
- Decide to have written response or hold a press briefing
- Send email or text message to employees for Level 2 or Level 3 crisis
- Post notification on website for Level 3 crisis
- Send management memo regarding incident as appropriate
- Update severe weather conditions or status as known
- Send media alert as appropriate
- Activate emergency call center as appropriate
- Determine who will be spokesperson

## Guidelines for Communicating

- Demonstrate organizational concern for people (show empathy and concern)
- Explain what is being done to remedy the situation
- Keep message consistent with all audiences.
- Do not guess or speculate. If you don't know the answer, offer to get back with an answer at a later time.
- Do not provide estimate of damage, responsibility for incident, or discuss legal liability.
- Do not release names of injured or if there has been a fatality until all next of kin have been notified

### *Audience*

- ☐ Employees: management, hourly or salaried employees, employees' families, Union members, retirees
- ☐ Community: neighborhood coalitions, community organizations, chamber of commerce
- ☐ Customer: local, national, global, wholesalers, retailers, consumers
- ☐ Business: vendors, suppliers, contractors, trade associations
- ☐ Media: local, national, international
- ☐ Legal: regulatory, state, federal

### *Verify the Crisis Situation*

- ☐ Identify as many facts as possible and coordinating at the site of the incident or at the Emergency Response Center
- ☐ What happened?
- ☐ Where did it happen?
- ☐ Who is involved?
- ☐ How did it happen?
- ☐ What is currently being done?

### *Alert and Notify*

- ☐ Alert the communications team
- ☐ Direct media calls to communications team
- ☐ Decide if written statement or press briefing is more appropriate

### *Gather Facts*

- ☐ Verify the nature of incident with as many facts as available
- ☐ Determine if injuries and / or fatalities (do not release names)
- ☐ Determine what authorities must / should be consulted or notified
- ☐ Draft key message for employees, stakeholders and media

### *Gather Supporting Materials*

- ☐ Key fact sheets
- ☐ Technical terms / systems
- ☐ Schematic / drawings of machinery or equipment or facility

### *Update Information*

- Review facts as they are available and time stamp them
- Verify facts before releasing them
- Inform internal audience, employees, stakeholders, union members, visitors

### *Preparation*

- ☐ Anticipate questions and prepare responses
- ☐ Prepare Media statement which has been approved
- ☐ Prepare a full script for easy reading
  - Use large font / type
  - Leave wide margins for note taking
  - Don't staple to flip pages easily as speaking
  - Highlight important or key words
  - Practice by reading out loud, recording it and time yourself

- ☐ Location for press briefing
- ☐ Sign in or verify credentials for media
- ☐ Follow up on any inquiries

#### Evaluation

- ☐ How did things go?
- ☐ What was successful?
- ☐ What needs to be improved?

#### Best Practices for Crisis Communications

- Be prepared with key message to convey to all stakeholders.
- Know the best methods to reach employees and other stakeholders.
- Try to give information that has been verified. Avoid "no comment" because people may think it means the organization is guilty and trying to hide something.
- Present information clearly using simple language and reducing using technical terms or jargon.
- Maintain eye contact, be pleasant and avoid nervous habits or gestures. Limit the "uhms" or "uhs" or fidgeting.
- Brief spokesperson(s) on the latest crisis information available and key message points that the organization is trying to convey.



# Appendix F – Sample notice to employees

DATE: \_\_\_\_\_

TO: \_\_\_\_\_

FROM: \_\_\_\_\_

We have been informed by one of our \_\_\_\_\_ working at \_\_\_\_\_ that he/she has a confirmed case of COVID-19, commonly known as "Coronavirus," based on test results obtained on \_\_\_\_\_. Per company policy, this [employee/customer/vendor/etc] has been directed to self-quarantine until permitted to return to work.

We are alerting you to this development because, based on the Company's investigation, we believe that you may have come into contact with the confirmed-positive case, on or about \_\_\_\_\_. Based on Company policy we are directing you not to report to work (i.e., self-quarantine) until, at least, 14 days from last contact with confirmed case. In the interim, we encourage you to seek medical advice and a COVID-19 test, especially if you are exhibiting symptoms of the virus.

If you do not test positive for COVID-19, or experience symptoms, by 14 days from last contact with confirmed case, you may return to work. However, please inform \_\_\_\_\_ if any of the following occur during your self-quarantine: you experience flu-like symptoms, including fever, cough, sneezing, or sore throat; or you test positive for COVID-19.

We are committed to providing a safe environment for all of our employees and top-quality service to our customers. It is in the interest of those goals that we provide this information out of an abundance of caution.

We also want to take this opportunity to remind you that one of our core values as a company is respect for and among our employees and customers. We will treat information regarding the identity of employees and customers with suspected or confirmed cases of COVID-19 as confidential to the extent practicable and will comply with applicable laws regarding the handling of such information. Further, per Company policy, we will not tolerate harassment of, or discrimination or retaliation against, employees or anyone.

Please contact \_\_\_\_\_ at \_\_\_\_\_ if you have any questions or concerns.

For more information about COVID-19, please visit the CDC website at: <http://www.cdc.gov/coronavirus/2019-ncov/index.html>

Sincerely,

[COMPANY CONTACT]  
[COMPANY CONTACT TITLE]



# Appendix G – COVID-19 Toolbox talk

## What is COVID-19?

The novel coronavirus, COVID-19 is one of seven types of known human coronaviruses. COVID-19, like the MERS and SARS coronaviruses, likely evolved from a virus previously found in animals. The remaining known coronaviruses cause a significant percentage of colds in adults and children, and these are not a serious threat for otherwise healthy adults.

Patients with confirmed COVID-19 infection have reportedly had mild to severe respiratory illness with symptoms such as fever, cough, and shortness of breath.

According to the U.S. Department of Health and Human Services/Centers for Disease Control and Prevention (“CDC”), Chinese authorities identified an outbreak caused by a novel—or new—coronavirus. The virus can cause mild to severe respiratory illness. The outbreak began in Wuhan, Hubei Province, China, and has spread to a growing number of other countries—including the United States.

## How is COVID-19 Spread?

COVID-19, like other viruses, can spread between people. Infected people can spread COVID-19 through their respiratory secretions, especially when they cough or sneeze. According to the CDC, spread from person-to-person is most likely among close contacts (about 6 feet). Person-to-person spread is thought to occur mainly via respiratory droplets produced when an infected person coughs or sneezes, like how influenza and other respiratory pathogens spread. These droplets can land in the mouths or noses of people who are nearby or possibly be inhaled into the lungs. It is currently unclear if a person can get COVID-19 by touching a surface or object that has the virus on it and then touching their own mouth, nose, or possibly their eyes.

In assessing potential hazards, employers should consider whether their workers may encounter someone infected with COVID-19 in the course of their duties. Employers should also determine if workers could be exposed to environments (e.g., worksites) or materials (e.g., laboratory samples, waste) contaminated with the virus.

Depending on the work setting, employers may also rely on identification of sick individuals who have signs, symptoms, and/or a history of travel to COVID-19-affected areas that indicate potential infection with the virus, in order to help identify exposure risks for workers and implement appropriate control measures.

There is much more to learn about the transmissibility, severity, and other features associated with COVID-19, and investigations are ongoing.

## COVID-19 Prevention and Work Practice Controls:

### Worker Responsibilities

- Frequently wash your hands with soap and water for at least 20 seconds. When soap and running water are unavailable, use an alcohol-based hand rub with at least 60% alcohol. Always wash hands that are visibly soiled.
- Cover your mouth and nose with a tissue when you cough or sneeze or use the inside of your elbow.
- Avoid touching your eyes, nose, or mouth with unwashed hands.
- Avoid close contact with people who are sick.
- Employees who have symptoms (i.e., fever, cough, or shortness of breath) should notify their supervisor and stay home—DO NOT GO TO WORK.

- Sick employees should follow CDC-recommended steps. Employees should not return to work until the criteria to discontinue home isolation are met, in consultation with healthcare providers and state and local health departments.

#### **General Job Site/Office Practices**

- Clean AND disinfect frequently touched objects and surfaces such as workstations, keyboards, telephones, handrails, and doorknobs. Dirty surfaces can be cleaned with soap and water prior to disinfection. To disinfect, use products that meet EAP's criteria for use against SARS-CoV-2 on <https://www.epa.gov/coronavirus/about-list-n-disinfectants-coronavirus-covid-19-0>, the cause of COVID-19, and are appropriate for the surface.
- Avoid using other employees' phones, desks, offices, or other work tools and equipment, when possible. If necessary, clean and disinfect them before and after use.
- Clean and disinfect frequently used tools and equipment on a regular basis.
  - This includes other elements of the jobsite where possible
  - Employees should regularly do the same in their assigned work areas
- Clean shared spaces such as trailers and break/lunchrooms at least once per day
- Disinfect shared surfaces (door handles, machinery controls, etc.) on a regular basis
- Avoid sharing tools with co-workers if it can be avoided. If not, disinfect before and after each use.
- Arrange for any portable job site toilets to be cleaned by the leasing company at least twice per week and disinfected on the inside.
- Any trash collected from the jobsite must be changed frequently by someone wearing gloves.
- In addition to regular PPE for workers engaged in various tasks (fall protection, hard hats, hearing protection), employers may also provide gloves and eye protection if appropriate to the task

# Appendix H – Sequence for putting on personal protective equipment (CDC)



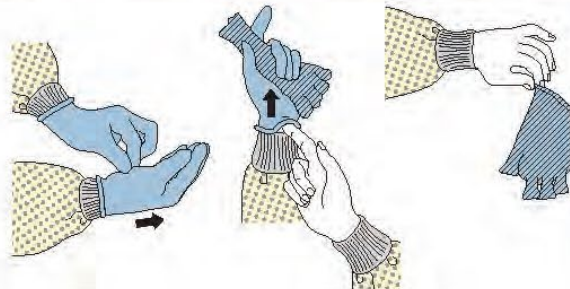
# HOW TO SAFELY REMOVE PERSONAL PROTECTIVE EQUIPMENT (PPE)

## EXAMPLE 1

There are a variety of ways to safely remove PPE without contaminating your clothing, skin, or mucous membranes with potentially infectious materials. Here is one example. **Remove all PPE before exiting the patient room** except a respirator, if worn. Remove the respirator **after** leaving the patient room and closing the door. Remove PPE in the following sequence:

### 1. GLOVES

- Outside of gloves are contaminated!
- If your hands get contaminated during glove removal, immediately wash your hands or use an alcohol-based hand sanitizer
- Using a gloved hand, grasp the palm area of the other gloved hand and peel off first glove
- Hold removed glove in gloved hand
- Slide fingers of ungloved hand under remaining glove at wrist and peel off second glove over first glove
- Discard gloves in a waste container



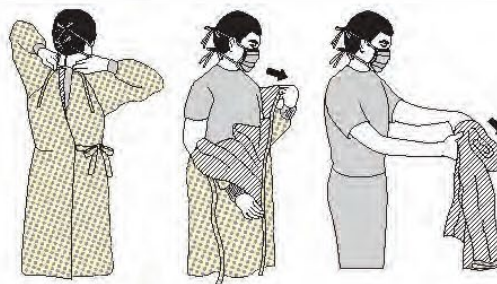
### 2. GOGGLES OR FACE SHIELD

- Outside of goggles or face shield are contaminated!
- If your hands get contaminated during goggle or face shield removal, immediately wash your hands or use an alcohol-based hand sanitizer
- Remove goggles or face shield from the back by lifting head band or ear pieces
- If the item is reusable, place in designated receptacle for reprocessing. Otherwise, discard in a waste container



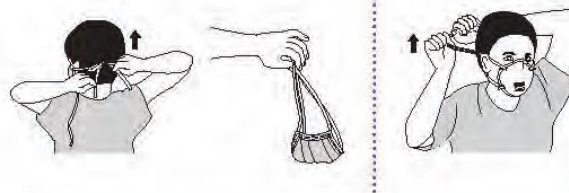
### 3. GOWN

- Gown front and sleeves are contaminated!
- If your hands get contaminated during gown removal, immediately wash your hands or use an alcohol-based hand sanitizer
- Unfasten gown ties, taking care that sleeves don't contact your body when reaching for ties
- Pull gown away from neck and shoulders, touching inside of gown only
- Turn gown inside out
- Fold or roll into a bundle and discard in a waste container

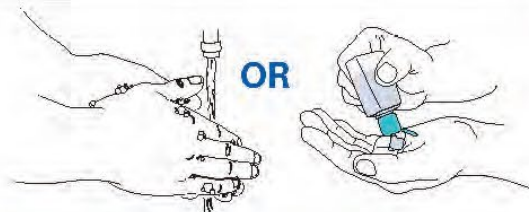


### 4. MASK OR RESPIRATOR

- Front of mask/respirator is contaminated — **DO NOT TOUCH!**
- If your hands get contaminated during mask/respirator removal, immediately wash your hands or use an alcohol-based hand sanitizer
- Grasp bottom ties or elastics of the mask/respirator, then the ones at the top, and remove without touching the front
- Discard in a waste container



### 5. WASH HANDS OR USE AN ALCOHOL-BASED HAND SANITIZER IMMEDIATELY AFTER REMOVING ALL PPE



**PERFORM HAND HYGIENE BETWEEN STEPS IF HANDS BECOME CONTAMINATED AND IMMEDIATELY AFTER REMOVING ALL PPE**



CS250672-E



# HOW TO SAFELY REMOVE PERSONAL PROTECTIVE EQUIPMENT (PPE)

## EXAMPLE 2

Here is another way to safely remove PPE without contaminating your clothing, skin, or mucous membranes with potentially infectious materials. **Remove all PPE before exiting the patient room** except a respirator, if worn. Remove the respirator **after** leaving the patient room and closing the door. Remove PPE in the following sequence:

### 1. GOWN AND GLOVES

- Gown front and sleeves and the outside of gloves are contaminated!
- If your hands get contaminated during gown or glove removal, immediately wash your hands or use an alcohol-based hand sanitizer
- Grasp the gown in the front and pull away from your body so that the ties break, touching outside of gown only with gloved hands
- While removing the gown, fold or roll the gown inside-out into a bundle
- As you are removing the gown, peel off your gloves at the same time, only touching the inside of the gloves and gown with your bare hands. Place the gown and gloves into a waste container



### 2. GOGGLES OR FACE SHIELD

- Outside of goggles or face shield are contaminated!
- If your hands get contaminated during goggle or face shield removal, immediately wash your hands or use an alcohol-based hand sanitizer
- Remove goggles or face shield from the back by lifting head band and without touching the front of the goggles or face shield
- If the item is reusable, place in designated receptacle for reprocessing. Otherwise, discard in a waste container

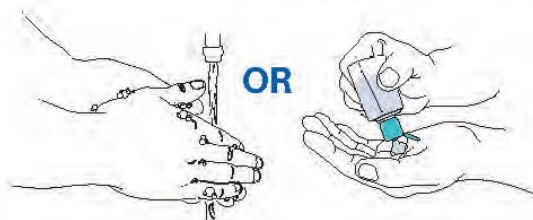


### 3. MASK OR RESPIRATOR

- Front of mask/respirator is contaminated — **DO NOT TOUCH!**
- If your hands get contaminated during mask/respirator removal, immediately wash your hands or use an alcohol-based hand sanitizer
- Grasp bottom ties or elastics of the mask/respirator, then the ones at the top, and remove without touching the front
- Discard in a waste container



### 4. WASH HANDS OR USE AN ALCOHOL-BASED HAND SANITIZER IMMEDIATELY AFTER REMOVING ALL PPE



**PERFORM HAND HYGIENE BETWEEN STEPS IF HANDS BECOME CONTAMINATED AND IMMEDIATELY AFTER REMOVING ALL PPE**



## Appendix I – How to properly put on and take off a disposable respirator (CDC)



# How to Properly Put on and Take off a Disposable Respirator

WASH YOUR HANDS THOROUGHLY BEFORE PUTTING ON AND TAKING OFF THE RESPIRATOR.

If you have used a respirator before that fit you, use the same make, model and size.

Inspect the respirator for damage. If your respirator appears damaged, DO NOT USE IT. Replace it with a new one.

Do not allow facial hair, hair, jewelry, glasses, clothing, or anything else to prevent proper placement or come between your face and the respirator.

Follow the instructions that come with your respirator.<sup>1</sup>

## Putting On The Respirator



Position the respirator in your hands with the nose piece at your fingertips.



Cup the respirator in your hand allowing the headbands to hang below your hand. Hold the respirator under your chin with the nosepiece up.



The top strap (on single or double strap respirators) goes over and rests at the top back of your head. The bottom strap is positioned around the neck and below the ears. Do not crisscross straps.



Place your fingertips from both hands at the top of the metal nose clip (if present). Slide fingertips down both sides of the metal strip to mold the nose area to the shape of your nose.

## Checking Your Seal<sup>2</sup>



Place both hands over the respirator, take a quick breath in to check whether the respirator seals tightly to the face.



Place both hands completely over the respirator and exhale. If you feel leakage, there is not a proper seal.



If air leaks around the nose, readjust the nosepiece as described. If air leaks at the mask edges, re-adjust the straps along the sides of your head until a proper seal is achieved.



If you cannot achieve a proper seal due to air leakage, ask for help or try a different size or model.

## Removing Your Respirator



DO NOT TOUCH the front of the respirator! It may be contaminated!



Remove by pulling the bottom strap over back of head, followed by the top strap, without touching the respirator.



Discard in waste container. WASH YOUR HANDS!

Employers must comply with the OSHA Respiratory Protection Standard, 29 CFR 1910.134 if respirators are used by employees performing work-related duties.

<sup>1</sup> Manufacturer instructions for many NIOSH approved disposable respirators can be found at [www.cdc.gov/niosh/nppt/topics/respirators/disp\\_part/](http://www.cdc.gov/niosh/nppt/topics/respirators/disp_part/)

<sup>2</sup> According to the manufacturer's recommendations

For more information call 1-800-CDC-INFO or go to <http://www.cdc.gov/niosh/nppt/topics/respirators/>



# Appendix J

## **Pulaski County Personnel Policy Prevention of SARS-CoV2/COVID-19**

### **Based on Virginia's Final Permanent Standard Enacted September 8, 2021**

Pulaski County, in accordance with Virginia Code 16VAC25-220-40, establishes the following guidelines to ensure compliance with requirements of the Virginia Code to protect employees from workplace exposure to the virus that causes COVID-19.

**Critical Infrastructure Employees (Essential Employees)** - The ensure continuity of operations and critical functions, the CDC advises that Critical Infrastructure Employees may be permitted to continue to work following potential exposure to COVID-19, provided they remain asymptomatic and additional safety practices are implemented to protect employees and the community. All employees of Pulaski County are considered Critical Infrastructure or Essential Employees.

Critical Infrastructure employees who have been exposed but remain symptom-free must report to in-person work and adhere to the following practices before and during the work shift:

- Pre-screen for symptoms
- Monitor regularly for symptoms
- Wear cloth face coverings
- Practice social distancing
- Clean and/or disinfect workspaces

**Self Monitoring** - Employees are encouraged to self-monitor for signs and symptoms of COVID-19. Symptoms include:

- 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
- Diarrhea

(This list is not inclusive of all possible symptoms. Please see the CDC website as updates will be provided when additional symptoms are discovered.)

Employees exhibiting symptoms are required to contact the County's Infectious Disease Control Officer at 540-440-0136 to determine if testing and quarantining is warranted. Should the employee be required to test or quarantine the employee must:

1. Contact their supervisor and follow normal call in procedures.



2. Provide a copy of the positive result to Human Resources.
3. Provide a copy of a VDH or healthcare provider excuse from work.

If an employee tests negative, they may return to work immediately. Any employee who refuses to be tested must be removed from the workplace absent undue hardship, medical or religious reasons. Employees will be required to provide proof of reasoning to refuse testing.

Employees shall be granted access to their own SARS-CoV-2 virus and COVID-19 related exposure and medical records.

**Notification of Exposure** – If an employee tests positive, Human Resources must be notified immediately. Within 24 hours of discovery of the employee's positive test, contact tracing shall be performed and other potentially exposed employees shall be notified. Confidentiality of the confirmed COVID-19 employee shall be handled in accordance with the requirements of the Americans with Disabilities Act (ADA) (42 USC § 1201 et. Seq) and other applicable federal and Virginia laws and regulations. Environmental Services will also be notified of the exposed department for cleaning and/or disinfecting purposes.

Pulaski County is required to report to the VDH and the DOL the discovery of two more cases of its own employees present at the place of employment within a 14 day period testing positive for COVID-19.

**Personal Protective Equipment** – All employees must adorn the PPE that is associated as a requirement of their department (such as masks, face shields, safety glasses, etc.) and shall be supplied by Pulaski County.

Employees shall also be provided hand sanitizer and have easy, frequent access and permission to use soap and water.

**Physical Distancing** – Employees who are unvaccinated are required to physical distance in all workplace settings when at all feasible to preserve and protect the workforce and allow operations to continue.

**Masking** – Pulaski County shall provide and require employees who are not vaccinated, fully vaccinated employees in areas of substantial or high community transmission, and otherwise at-risk employees to wear face coverings while indoors or traveling in a County vehicle unless their work task requires a respirator or other PPE. The mask must cover the nose and the mouth. In some cases the elimination of use or travel in County vehicles by unvaccinated employees may be enforced and employees may be required to utilize alternate means of transportation. When an employee who is not fully vaccinated must share a work vehicle or other transportation with one or more employees or other persons because no other alternatives are available, such employees shall be provided with and wear respiratory protection such as an N95 filtering face piece respirator or a face covering at the option of an employee. A fully vaccinated employee who must share a work vehicle or other transportation with one or more other employees because no other alternatives are available shall be provided and wear face coverings.

**Exceptions** (when face masks are not required):

1. When an employee is alone in a room.
2. While an employee is eating or drinking, provided each employee who is not fully vaccinated is six feet away.

3. When employees are wearing respiratory protection in accordance with 16VAC25-90-1910.134.
4. When it is important to see a person's mouth (communicating with someone who is deaf or hard of hearing) when conditions do not permit the use of a clear face shield.
5. Medical conditions, religious beliefs.
6. Hazardous to the employee due presenting serious injury or death (arc flash, heat stress, safe operation of equipment). Employees will be required to wear alternative protection such as a face shield if conditions permit.
7. Where a face shield may be otherwise required. Shields must be cleaned daily and not damaged.

**Common Areas** – Common areas such a break rooms and lunch rooms shall be closed to employees who are unvaccinated and capacity restrictions may be enforced for those whom are vaccinated.

**Disinfecting Requirements** – offices, common areas, hallways, high traffic surfaces (such as door handles) shall be cleaned with soap once per shift when no suspected or confirmed COVID case has been in the area. In areas where infected persons have been present, if less than 24 hours they must be cleaned and disinfected, after 24 hours cleaned, after 3 days, no cleaning beyond normal cleaning practices.

**Vaccinations** – Employees may be required to complete a vaccination form indicating whether or not they are vaccinated and provide proof of vaccination.

**Anonymous Complaints** – Employees who wish to place anonymous complaints regarding policies and procedures that are not being followed may complete an employee complaint form and submit it to Human Resources. Complaints will be investigated and handled according to current COVID-19 standards and guidelines. Employees shall not be reprimanded nor retaliated against in any way for reporting violations.