Infectious Disease Preparedness and Response Plan
Date of Preparation: March 13, 2020 (OSHA Guidance on Preparing Workplaces for COVID-19): This Plan was developed to consider and address the spread of infectious disease with one or more of the following objectives:

- Reducing transmission among employees,
- Protecting people who are at higher risk for adverse health complications,
- Maintaining business operations, and
- Minimizing adverse effects on other entities in our supply chains.

Some of the key considerations when making decisions on appropriate responses follow.

- Disease severity (i.e., number of people who are sick, hospitalization and death rates) in the community;
- Check theses websites regularly for specific mitigation strategies based on level of community transmission:
  1. Center for Disease Control and Prevention [CDC] https://www.cdc.gov/
  3. Local/county health department
- Impact of disease on employees that are vulnerable and may be at higher risk for adverse health complications. Inform employees that some people may be at higher risk for severe illness, such as older adults and those with chronic medical conditions.
- Prepare for possible increased numbers of employee absences due to illness in employees and their family members, dismissals of early childhood programs and K-12 schools due to high levels of absenteeism or illness:
  - Management will plan to monitor and respond to absenteeism at the workplace. Implement plans to continue your essential business functions in case you experience higher than usual absenteeism.
  - Cross-train personnel to perform essential functions so that the workplace is able to operate even if key staff members are absent.
  - Assess your essential functions and the reliance that others and the community have on your services or products. Be prepared to change your business practices if needed to maintain critical operations (e.g., identify alternative suppliers, prioritize customers, or temporarily suspend some of your operations if needed).

Basic Infection Prevention Measures
For protection of all employees and customers the following basic infection prevention measures will be promoted and encouraged during an outbreak:

- Frequent and thorough hand washing. Where soap and running water is not immediately available, alcohol-based hand rubs containing at least 60% alcohol will be provided
- Employees should not physically report to work if sick
- Cover coughs and sneezes
- Tissues and non-touch trash receptacles will be readily available to employees, visitors and customers
- If social distancing is recommended by state or local health authorities, management may establish flexible worksites (e.g., telecommuting) and flexible work hours (e.g., staggered shifts), to increase the physical distance among employees and between employees - Social distancing means remaining out of congregate settings, avoiding mass gatherings, and maintaining distance (approximately 6 feet) from others when possible.
- Employees should avoid using other workers' phones, desks, offices, or other work tools and equipment, when possible
• Employees should routinely clean all frequently touched surfaces in the workplace, such as workstations, countertops, and doorknobs. Use the cleaning agents that are usually used in these areas and follow the directions on the label.
• Employees should wipe down commonly used surfaces (for example, doorknobs, keyboards, remote controls, desks) before each use with disposable wipes.
• Regular housekeeping practices, including routine cleaning and disinfecting of surfaces, equipment, and other elements of the work environment will be maintained by housekeeping personnel.
• If any persons have been in the workplace that are suspected/confirmed to have been infected follow Environmental Cleaning and Disinfection Recommendations from the Center for Disease Control (CDC) which is attached.

**Identification and Isolation of Sick People**
Prompt identification and isolation of potentially infectious individuals is a critical step in protecting workers, customers, visitors, and others at a worksite.

• Signs and symptoms of the infectious disease will be available to all employees by providing a list with other employment posters.
• Employees should self-monitor for signs and symptoms if they suspect possible exposure.
• Any employee experiencing signs or symptoms should report by phone, email or text to management.
• If the employees experiencing signs or symptoms is at work, a mask should be donned and if able, the employee should return to their home. If not able, the employee should go the area designated in the Appendix to wait for transfer from the worksite.
• Employees who are well but who have a sick family member at home with infectious symptoms should notify their supervisor and refer to CDC guidance for how to conduct a risk assessment of their potential exposure.

**Flexibilities and Protections**
During an infectious disease outbreak, management may change certain leave policies such as discontinuing requirements for healthcare provider’s notes for employees who are sick with acute respiratory illness to validate their illness or to return to work or permitting use of sick leave to stay home to care for a sick family member.

**Workplace Controls**
Management may implement engineering and administrative controls to reduce or minimize exposure to employees and customers. Examples follow:

• Installing physical barriers, such as clear plastic sneeze guards.
• Installing or using a drive-through window for customer service.
• Prohibiting customers or the general public from certain areas.
• Installing high-efficiency air filters.
• Increasing ventilation rates in the work environment.
• Encouraging sick workers to stay at home.
• Minimizing contact among workers, clients, and customers by replacing face-to-face meetings with virtual communications and implementing telework if feasible.
• Establishing alternating days or extra shifts that reduce the total number of employees in a facility at a given time, allowing them to maintain distance from one another while maintaining a full onsite work week.
• Discontinuing nonessential travel to locations with ongoing outbreaks. Regularly check CDC travel warning levels at: www.cdc.gov/coronavirus/2019-ncov/travelers.
• Developing emergency communications plans, including a forum for answering workers’ concerns and internet-based communications, if feasible.
• Providing workers with up-to-date education and training on risk factors and protective behaviors (e.g., cough etiquette and care of PPE)

• Training workers who need to use protecting clothing and equipment how to put it on, use/wear it, and take it off correctly, including in the context of their current and potential duties. Training material should be easy to understand and available in the appropriate language and literacy level for all workers

• Providing resources and a work environment that promotes personal hygiene. For example, provide tissues, no-touch trash cans, hand soap, alcohol-based hand rubs containing at least 60 percent alcohol, disinfectants, and disposable towels for workers to clean their work surfaces. Requiring regular hand washing or using of alcohol-based hand rubs. Workers should always wash hands when they are visibly soiled and after removing any PPE.

• Post handwashing signs in restrooms

Exposure Risk
The potential risk of occupational exposure for the work activities of most employees is low. Very high risk occupations include health care workers.

Employees that also volunteer with the fire department or ambulance service as Emergency Medical Technicians (EMTs) – these activities may fall under high exposure risk.

1. High Exposure Risk
These occupations fall in the high risk potential for exposure:

• Healthcare delivery and support staff (e.g., doctors, nurses, and other hospital staff who must enter patients' rooms) exposed to known or suspected infected patients. (Note: when such workers perform aerosol-generating procedures, their exposure risk level becomes very high.)

• Medical transport workers (e.g., ambulance vehicle operators) moving known or suspected infected patients in enclosed vehicles

• Mortuary workers involved in preparing (e.g., for burial or cremation) the bodies of people who are known to have, or suspected of having, the infection at the time of their death

2. Medium Exposure Risk
Medium exposure risk jobs include those that require frequent and/or close contact with (i.e., within 6 feet of) people who may be infected, but who are not known or suspected to be infected. In areas without ongoing community transmission, workers in this risk group may have frequent contact with travelers who may return from international locations with widespread disease transmission. In areas where there is ongoing community transmission, workers in this category may have contact be with the general public (e.g., in schools, high-population-density work environments, and some high-volume retail settings).

3. Lower Exposure Risk (Caution)
Lower exposure risk (caution) jobs are those that do not require contact with people known to be, or suspected of being, infected nor frequent close contact with (i.e., within 6 feet of) the general public. Workers in this category have minimal occupational contact with the public and other coworkers.

Employees Volunteering at Fire and EMT Services
Employees volunteering for the fire department and working as EMTs that work within 6 feet of patients known to be, or suspected of being, infected should use respirators, goggles/shield, and gloves following department protocol or CDC protocol

Before returning to work employees should notify their supervisor of possible exposure.