RETURNING TO WORK SAFELY DURING COVID-19
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Whether a company is an essential business or is in the process of reopening its doors, several challenges must be addressed to provide a safe environment in which employees can work, while at the same time mitigating risk and restoring operations, all while keeping customers and/or visitors safe as well.

The following is a compilation of guidelines recommended by the Centers for Disease Control and Prevention (CDC), Occupational Safety and Health Administration (OSHA), Equal Employment Opportunity Commission (EEOC), National Safety Council (NSC), American Society of Safety Professionals (ASSP), Florida Department of Health (FDOH), Governor DeSantis’ Safe.Smart.Step-By-Step Plan for Florida’s Recovery Post COVID-19 Emergency, and the Surgeon General Scott Rivkees.

OSHA does not have a specific standard for dealing with exposure to Coronavirus, infectious diseases, or pandemics. Accordingly, the relevant obligations come from the General Duty Clause (GDC) of the OSH Act that requires employers to provide their employees with workplaces that are “free from recognized hazards that are causing or are likely to cause death or serious physical harm.” In general, an employer must take reasonable steps to abate or prevent known hazards—both the hazard and the steps to address it must be known. Exposure to Coronavirus meets these requirements. OSHA has prepared a guide for employers on how to prepare workplaces for exposure to Coronavirus.

Some media coverage of OSHA’s handling of Coronavirus exposure has pointed out that guidance is merely suggestive and can be disregarded, unlike regulations. Employers who want to stay in compliance, should treat OSHA’s guidance as recommended best practices intended to help them comply with their obligations under the General Duty Clause.

As a threshold issue, many employers will want to consider the risk that they will be subjected to claims by employees when resuming operations based on an employee’s potential exposure to COVID-19 in the workplace. Such claims could theoretically arise no matter when operations resume until a vaccine is available, but most employers cannot afford to wait until that time to recall employees to the worksite. Safely returning to work is possible if employers follow certain procedures to ensure the health and safety of their employees.

The most effective way for employers to mitigate risk is to closely track and follow health authority guidance concerning safe workspaces (including the Centers for Disease Control’s interim guidance concerning critical infrastructure workers) and follow the guidance most applicable to the physical location where employees will work. Generally, state or local health authorities can provide better guidance to determine when, and how, workplaces should reopen.

To ensure continuity of operations of essential functions, the CDC advises that critical infrastructure workers may be permitted to continue work following potential exposure to COVID-19, provided they remain asymptomatic and additional precautions are implemented to protect them and the community. A potential exposure means being a household contact or having close contact within 6 feet of an individual with confirmed or suspected COVID-19. The timeframe for having contact with an individual includes 48 hours before the individual became symptomatic.
Critical infrastructure workers who have had exposure but remain asymptomatic should adhere to the following practices before and during their work shift:

**Pre-Screen:** Employers should measure the employee’s temperature and assess symptoms before they start work. Ideally, temperature checks should happen before the individual enters the facility.

**Regular Monitoring:** As long as the employee doesn’t have a temperature or symptoms, they should self-monitor under the supervision of their employer’s occupational health program.

**Wear a Mask:** The employee should wear a face mask at all times while in the workplace. Employers can issue facemasks or can approve employees’ supplied cloth face coverings in the event of shortages.

**Social Distance:** The employee should maintain 6 feet and practice social distancing as work duties permit in the workplace.

**Disinfecting and Cleaning at the Workplace:** Frequent handwashing and disinfecting as well as routinely cleaning and disinfecting all spaces, including offices, bathrooms, common areas, and shared electronic equipment.
According to OSHA, worker risk of occupational exposure to COVID-19, during an outbreak, may vary from very high to high, medium, or lower (caution) risk. The level of risk depends in great part on the industry type; for example, are any of the employees in need to be in contact or required for repeated contact within 6 feet of people known to be, or suspected of being infected with COVID-19. To help employers 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 a probability of distribution of risk. Most American workers will likely fall in the lower exposure risk (caution) or medium exposure risk levels.

**Very High Exposure Risk**

Very high exposure risk jobs are those with high potential for exposure to known or suspected sources of COVID-19 during specific medical, postmortem, or laboratory procedures.

Workers in this category include:

- Healthcare workers (e.g., doctors, nurses, dentists, paramedics, emergency medical technicians) performing aerosol-generating procedures (e.g., intubation, cough induction procedures, bronchoscopies, some dental procedures, and exams, or invasive specimen collection) on known or suspected COVID-19 patients
- Healthcare or laboratory personnel collecting or handling specimens from known or suspected COVID-19 patients (e.g., manipulating cultures from known or suspected COVID-19 patients)
- Morgue workers performing autopsies, which generally involve aerosol-generating procedures, on the bodies of people who are known to have, or suspected of having, COVID-19 at the time of their death

**High Exposure Risk**

High exposure risk jobs are those with high potential for exposure to known or suspected sources of COVID-19. Workers in this category include:

- Healthcare delivery and support staff (e.g., doctors, nurses, and other hospital staff who must enter patients’ rooms) exposed to known or suspected COVID-19 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 COVID-19 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, COVID-19 at the time of their death

**Medium Exposure Risk**

Medium exposure risk jobs include those that require frequent and/or close contact (i.e., within 6 feet of) with people who may be infected or suspected COVID-19 patients. 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 COVID-19 transmission. In areas where there is ongoing community transmission, workers in this category may have contact with the general public (e.g., schools, high-population-density work environments, some high-volume retail settings).

**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 (i.e., within 6 feet) with of the general public. Workers in this category have minimal occupational contact with the public and other coworkers.

Before asking all employees to return to work, employers must assess the work environment to determine the possibility and level of exposure, the current required work conditions, normal operations, and possible changes to the workplace. To establish a dependable operation, employers must determine which employees can return to work. This must be based on the current presence of symptoms and possible contact during the time they were absent. Employees who are displaying symptoms of exposure should be asked to stay home until they have fully recovered.

Employers are advised to establish a committee of key stakeholders (including executive, human resources, and legal representatives) to follow updates and changes in guidance and try to ensure consistency across operations.
If one does not already exist, develop an infectious disease preparedness and response plan that can help guide protective actions against COVID-19.

Based on the level of risk associated with an employer’s workplace, individual employees and the local community, employers should create a plan that addresses COVID-19 contingencies. Stay abreast of guidance from federal, state, local, tribal, and/or territorial health agencies and consider how to incorporate those recommendations and resources into workplace-specific standards.

Plans should consider and address the level(s) of risk associated with various worksites and job tasks workers perform at those sites. It should include how the employer will handle the need for workers to be absent and/or work remotely. The response plan should also consider whether and to what extent the employer should alter its operation levels in light of anticipated supply and demand changes. OSHA notes that consumer demand for products and services associated with infection prevention will increase, while demand for other products and services may decrease.

Such considerations may include the following:

- Where, how, and to what sources of COVID-19 workers may have been exposed
- Nonoccupational risk factors at home and in community settings
- Workers’ risk factors (e.g., older age; the presence of chronic medical conditions, including immunocompromising conditions; pregnancy)
- Controls necessary to address those risks
DEVELOP A RETURN TO WORK PLAN

Based on the challenges set forth above, many employers may find it easier to adopt a gradual and flexible return-to-work process if feasible, including an “opt-in” process where employees are notified that the decision to return is theirs. Employers in some locations may also want to consider whether to provide commuting stipends or benefits to enable employees to avoid public transit in commuting to the worksite.

Determine Workers’ Risk Factors
To establish a dependable operation, employers must determine which employees can return to work. This must be based on the current level of present symptoms and possible contact during the time they were absent. Considerations must be provided for those who are the most vulnerable – people over 65 years, people with underlying medical conditions (chronic lung disease, heart conditions, immunocompromised, diabetes, liver disease, etc.). Employees with known or suspected underlying health conditions should be encouraged to stay home and continue to work remotely.

Pre-Screening
Employers may want to adopt screening procedures for any employees attending or returning to the workplace. The CDC and many jurisdictions are now encouraging such checks. Furthermore, the U.S. Equal Employment Opportunity Commission has issued updated guidance clarifying that employers may conduct body temperature checks, COVID-19 diagnostic testing, and other limited medical inquiries of their employees during the COVID-19 pandemic without violating the Americans with Disabilities Act (ADA), given the threat of harm presented by infected employees in the workplace. (Employers should note that when the pandemic ends, they will be required to revert to stricter rules around employee medical inquiries and medical tests.)

Employers are permitted to ask employees whether they are experiencing any COVID-19 symptoms, such as fever, chills, cough, shortness of breath, body aches, sore throat, or other symptoms identified by the CDC or other public health authorities. Employers may require that employees answer questions or provide certifications concerning their experience of any COVID-19 symptoms or their exposure to individuals with confirmed cases. Employers may do this daily or at other intervals, as well as when an employee calls in sick, and employers must maintain information as a confidential medical record. Employers should be careful not to ask health questions that are unrelated to COVID-19, including asking about underlying medical conditions or symptoms not associated with COVID-19. (To determine whether an employee should be permitted to remain at home, employers can ask employees to certify as a general matter that they have an underlying health condition that heightens their risk of harm if they were to contract COVID-19.)

Employers who decide to implement temperature checks during the pandemic should, as an initial consideration, determine whether they will ask employees to check their body temperatures at home or conduct checks onsite. In either scenario, employers should give notice to employees that the checks will be performed or required.

Additionally, for onsite checks, employers should observe best practices, including:

- Setting forth a consistent process for conducting the checks
- Considering whether to use a third party to conduct the testing (with appropriate confidentiality agreements)
- Providing private space for conducting checks
- Using no-contact thermometers or thermal scanners for checks, and conducting proper disinfecting as may be required
• Ensuring social distancing if employees must wait in line for the check
• Compensating non-exempt employees for time spent waiting, if applicable
• Determining whether to conduct checks as a “go/no go” or to keep a log of temperature results

Finally, employees should be notified that temperature checks will not necessarily ensure a COVID-19-free workplace, because a significant percentage of employees infected with COVID-19 may be asymptomatic.

**Regular Monitoring**

In order to continue the prevention of a spread and safety of the employees, regular monitoring will be needed. It all starts with encouraging workers to stay home if sick. Regular pre-screening and communication will be the key to a successful return to work.

**Physical Distancing Measures**

Implementing social distancing measures will be an important key to maintaining a safe workplace during the COVID-19 pandemic. Social distancing practices will need to vary depending on the type of workplace or as may be required by an applicable public health agency or other governmental order.

Staggering shifts or splitting or rotating work schedules may also reduce the number of employees present in the office at any given time. When considering this approach, review applicable state and local laws that affect the timing of meal and rest periods. Employers should also consider limiting the number of clients, customers, and other third parties in the facility or workplace. Decisions about limiting the number of employees or visitors allowed on site should be made on a nondiscriminatory and consistent basis.

**Other possible measures for social distancing may include:**

• Closing lunchrooms or staggering lunch and break times
• Removing chairs from conference rooms

...to limit attendance at meetings and ensure employees can sit at least six feet apart
• Leaving a buffer between scheduled meetings in conference or meeting rooms to avoid overlap between two groups and to allow time for cleanings
• Installing social distancing decals on the floors of any shared spaces in the workplace
• Encouraging employees with their own offices to stay in their offices as much as possible
• Adopting videoconference guidelines or installing video phones so that even when in the office, employees are discouraged from meeting in person
• To the extent possible, restructuring open floor layouts to ensure that employees can sit at least six feet away from each other
• Installing barriers between workspaces, in reception areas, or between customers and employees that can be easily cleaned and are high enough to prevent contact
• Delivering products through curbside pick-up or delivery; and posting social distancing reminders throughout the workplace, including compliance with any state or local posting requirements

**Disinfect and Sanitation Plan**

For most employers, protecting workers will depend on emphasizing basic infection prevention measures. As appropriate, all employers should implement good hygiene and infection control practices, including:

• Promote frequent and thorough hand washing, including by providing workers, customers, and worksite visitors with a place to wash their hands. If soap and running water are not immediately available, provide alcohol-based hand rubs containing at least 60% alcohol
• Encourage workers to stay home if they are sick
• Encourage respiratory etiquette, including covering coughs and sneezes
• Provide customers and the public with tissues and trash receptacles
• Employers should explore whether they can
establish policies and practices, such as flexible worksites (e.g., telecommuting) and flexible work hours (e.g., staggered shifts). This would increase the physical distance between employees if state and local health authorities recommend the use of social distancing strategies.

- Discourage workers from using other workers’ phones, desks, offices, or other work tools and equipment, when possible.
- Maintain regular housekeeping practices, including routine cleaning and disinfecting of surfaces, equipment, and other elements of the work environment. When choosing cleaning chemicals, employers should consult information on the 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 COVID-19 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).

**Personal Protective Equipment (PPE)**

While engineering and administrative controls are considered more effective in minimizing exposure to COVID-19, 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 infectious diseases, such as COVID-19, recommendations for PPE specific to occupations or job tasks may change depending on geographic location, updated risk assessments for workers, and information on PPE effectiveness in preventing the spread of COVID-19. Employers should check the OSHA and CDC websites regularly for updates about recommended PPE.

**All types of PPE must be:**

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

Employers are obligated to provide their workers 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 while working and job tasks that may lead to exposure.

Employers must conduct an assessment of the workplace, as described in the previous section, to determine the level of risk associated with possible infection of COVID-19. This assessment will guide employers to better equip their employees with the required PPE.

**N95, Surgical and Cloth Masks**

One of the most common personal protective equipment being used during this pandemic is the N95 mask. This mask, if properly fitted, can block up to 95% of airborne particles and prevent liquids from contaminating the face. The N95 should not be used in environments where there may be oily particles as this mask is not oil proof.

People with chronic respiratory, cardiac, or other medical conditions that make breathing difficult should check with their health care provider before using an N95 respirator because the N95 respirator can make it more difficult for the wearer to breathe. Some models have exhalation valves that can make breathing out easier and help reduce heat build-up.

A surgical mask is a loose-fitting, disposable device that creates a physical barrier between the mouth and nose of the wearer and potential contaminants in the immediate environment. If worn properly, a surgical mask is meant to help block large-particle droplets, splashes, sprays, or splatter that may contain COVID-19, keeping it from reaching your mouth and nose. Surgical masks may also help reduce exposure of your saliva and respiratory secretions to others. This type of mask is a one-time use only mask and is not meant to be used for a
prolonged period of time.

Cloth masks can be reused if they are washed frequently and recommendations by the CDC in regards to cloth masks are followed.

When disposable N95 filtering facepiece respirators are not available, consider using other respirators that provide greater protection and improve worker comfort. Other types of acceptable respirators include: 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) filter; or supplied-air respirator (SAR).

NIOSH and OSHA have published guidance about the extended use of N95 masks. For example, in the event extended use or reuse of N95 becomes necessary, the same worker is permitted to extend the use of or reuse the respirator, as long as the respirator maintains its structural and functional integrity and the filter material is not physically damaged, soiled, or contaminated.

OSHA also encourages employers to reassess their engineering controls, work practices, and administrative controls to identify any changes they can make to decrease the need for N95 respirators. Employers should, for example, consider whether it is possible to increase the use of wet methods or portable local exhaust systems or to move operations outdoors. In some instances, an employer may also consider taking steps to temporarily suspend certain non-essential operations that require the use of an N95 mask.

OSHA Discretion in enforcement when considering the COVID-19 pandemic.

In light of the COVID-19 pandemic, OSHA understands that some employers may face difficulties complying with OSHA standards due to the ongoing health emergency. Widespread business closures, restrictions on travel, limitations on group sizes, facility visitor prohibitions, and stay-at-home or shelter-in-place requirements may limit the availability of employees, consultants, or contractors who normally provide training, auditing, equipment inspections, testing, and other essential safety and industrial hygiene services.

In instances where an employer is unable to comply with OSHA-mandated training, audit, assessment, inspection, or testing requirements because local authorities required the workplace to close, the employer should demonstrate a good faith attempt to meet the applicable requirements as soon as possible following the re-opening of the workplace.

“Practice social distancing by maintaining a distance of at least six feet from each other and wear a face covering.”

– Dr. Scott A. Rivkees
Florida Surgeon General
Employers should develop a return-to-work protocol for all employees following CDC and other public health agency guidance on ending isolation. This includes workers who contract COVID-19 before they return or while at the workplace. It is crucial to have clear procedures in place to follow when an employer discovers that an individual with COVID-19 is, or has been, in the workplace. Employers generally may ask for medical certification in this circumstance but should consider that such certifications may continue to be difficult for employees to obtain. Employers may consider instead using questionnaires or interviews to obtain the necessary information to confirm that the recommended isolation/quarantine protocol has been followed and that it is safe for the employee to return.

Employers should develop policies and procedures for employees to report when they are sick or experiencing symptoms of COVID-19. This might include: procedures to isolate people who have signs and/or symptoms, taking steps to limit the spread; guidelines to ensure that the affected individual’s identity is kept confidential; plans for identifying “close contacts”; processes for disinfecting the workspace and common areas, and processes for recording and/or reporting such illnesses to OSHA or state authorities.

As described before, employers have a general duty under the Occupational Safety and Health Act (OSHA) and comparable state laws to provide a safe workplace for employees. Employers should consult federal, state, and local agency guidance regarding workplace safety measures to be taken during the pandemic, including CDC and OSHA guidance on the subject. Complying with applicable guidance on workplace safety issues will help minimize the risk of claims by employees, vendors, visitors, or other parties alleging that the employer negligently or willfully failed to maintain a safe work environment. These alerts address safety precautions all employers should consider, including social distancing, use of protective equipment, hygiene practices, developing protocols for the workplace and off-duty exposures, and more.

Even before the outbreak of COVID-19 in the U.S., OSHA and the CDC recommended that employers implement good hygiene and infection control practices to curb the spread of the virus, and these should continue as employees return to the workplace.
IDENTIFICATION AND MITIGATION OF POSSIBLE INFECTION IN THE WORKPLACE

When an employee has been exposed to COVID-19 outside the workplace, either due to close contact with a household member or through other contacts, the employee should be required to self-quarantine as recommended by CDC standards or as mandated by state or local health authorities. The self-quarantine period generally is 14 days from last exposure. As of July 26, 2020, the CDC guidance for being with others is at least 10 days since symptoms first appeared; and at least 24 hours with no fever without fever-reducing medication; and symptoms have improved. If someone has been tested positive for COVID-19 but has no symptoms, you can be with others after 10 days have passed since the date of the positive test.

However, CDC guidance indicates that critical infrastructure workers who have been exposed but remain asymptomatic may continue working provided that appropriate screening measures and other enhanced safety protocols are in place concerning such workers; employers should remember that these are the CDC’s guidelines and that they can enhance the safety protocol to isolate or self-quarantine employees who have been exposed but are not showing symptoms.

Numerous vendors are developing plans and programs for tracking employee movement in the workplace, both to monitor compliance with social distancing requirements and to track any close contacts of infected employees in the workplace.

Prompt identification and isolation of potentially infectious individuals is a critical step in protecting workers, customers, visitors, and others at a workplace. Employers should inform and encourage employees to self-monitor for signs and symptoms of COVID-19 if they suspect possible exposure.

Employers should develop policies and procedures for employees to report when they are sick or experiencing symptoms of COVID-19. Where appropriate, employers should develop policies and procedures for immediately isolating people who have signs and/or symptoms of COVID-19, and train workers to implement them. Move potentially infectious people to a location away from workers, customers, and other visitors. Although most workplaces do not have specific isolation rooms, designated areas with closable doors may serve as isolation rooms until potentially sick people can be removed from the workplace.

Take steps to limit the spread of the respiratory secretions of a person who may have COVID-19. Provide a face mask, if feasible and available, and ask the person to wear it, if tolerated. Note: A face mask (also called a surgical mask, procedure mask, or other similar terms) on a patient or other sick person should not be confused with PPE for a worker; the mask acts to contain potentially infectious respiratory secretions at the source (i.e., the person’s nose and mouth).

If possible, isolate people suspected of having COVID-19 separately from those with confirmed cases of the virus to prevent further transmission—particularly in worksites where medical screening, triage, or healthcare activities occur, using either permanent (e.g., wall/different room) or temporary barrier (e.g., plastic sheeting). Restrict the number of personnel entering isolation areas and protect workers in close contact with (i.e., within 6 feet of) a
sick person or who have prolonged/repeated contact with such persons by using additional engineering and administrative controls, safe work practices, and PPE.

In addition to implementing general safety practices to avoid the spread of COVID-19 in the workplace, it is essential to have in place clear procedures to follow when an employer discovers that an individual with COVID-19 is or has been in the workplace.

**The employer’s protocol should follow CDC and other applicable guidelines and should include:**

- Procedures to identify and isolate individuals who have symptoms of COVID-19, and to seek medical attention for them if needed
- Guidelines to ensure that the affected individual’s identity is kept confidential
- Plans for identifying who the affected individual may have come into close contact with as defined by the CDC. This includes a questionnaire for interviewing the individual to determine when symptoms began and with whom he or she interacted while contagious (typically beginning two days before the onset of symptoms, according to current CDC guidance) and other steps that may be needed to accurately identify contacts
- Communication plans and template notifications, including a detailed notice to send to employees who were in close contact with the affected person, with instructions on self-quarantine requirements. Send a general notice to the workplace indicating that workers may have been exposed, and notify any contractors, customers, vendors, or other third parties who may have been close contacts
- Processes for disinfecting the workspace and common areas, following the CDC guidelines and using products and chemicals that meet the EPA’s criteria for use against the virus that causes COVID-19
- Processes for recording and/or reporting such illnesses to OSHA or state authorities, to the extent required by evolving OSHA guidance or state guidance on the topic
IMPLEMENTATION OF 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 solely relying on workers to reduce their exposure.

During a COVID-19 outbreak, when it may not be possible to eliminate or replace 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 COVID-19.

**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.

- Installing high-efficiency air filters
- Increasing ventilation rates in the work environment
- Installing physical barriers, such as clear plastic sneeze guards
- Installing a drive-through window for customer service
- Specialized negative pressure ventilation in some settings, such as for aerosol-generating procedures (e.g., airborne infection isolation rooms in healthcare settings and specialized autopsy suites in mortuary settings)

**Administrative Controls**

Administrative controls require action by the worker or employer. Typically, administrative controls are changes in work policy or procedures to reduce or minimize exposure to a hazard. Examples of administrative controls for COVID-19 include:

- 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
- 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 COVID-19 risk factors and protective behaviors (e.g., cough etiquette and care of PPE)
- Training workers who need to use protective 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.
Safe Work Practices

Safe work practices are types of administrative controls that include procedures for safe and proper work used to reduce the duration, frequency, or intensity of exposure to a hazard. Examples of safe work practices for COVID-19 include:

• Providing resources and a work environment that promotes personal hygiene. For example, provide masks, 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 alcohol-based hand rubs. Workers should always wash hands when they are visibly soiled and after removing any PPE.

• Post handwashing signs in restrooms.
Train all workers with reasonably anticipated occupational exposure to COVID-19 about the sources of exposure to the virus, the hazards associated with that exposure, and appropriate workplace protocols in place to prevent or reduce the likelihood of exposure. Training should include information about how to isolate individuals with suspected or confirmed COVID-19 or other infectious diseases, and how to report possible cases. Training must be offered during scheduled work times and at no cost to the employee.

Workers who are required to use PPE must be trained. This training includes when to use PPE; what PPE is necessary; how to properly don (put on), use, and doff (take off) PPE; how to properly dispose of or disinfect, inspect for damage, and maintain PPE; and the limitations of PPE.

Free Online Training to Keep Your Workplace Safe

At the Florida Chamber Safety Council, we offer a complementary Returning to Work Safely During COVID-19 online training. Please contact Ana Hamil at 850-521-1215 or ahamil@flchamber.com for more information.
DEVELOP A SAFE CUSTOMER AND/OR VISITOR PROTOCOL

Just as with the employee protocol ensuring the safety and health of the employees, it is crucial to create a plan for your customers/visitors. Following the safety guidelines for employees, businesses must ensure that the establishment is prepared to receive customers and/or visitors. This includes outside vendors.

Open Door Plan
Ensure that your establishment is ready to open its doors. Post signs reminding your customers and/or visitors of the importance of stopping the spread of COVID-19 and continue promoting everyday protective measures. Ensure that all areas of your establishment, including restrooms and gathering areas, are properly clean, stocked, sanitized, and disinfected as appropriate.

If possible, increase the circulation of outdoor air by opening windows, using fans, and perhaps increasing the speed of your air handlers (AC system) to improve ventilation of your establishment.

Capacity/Occupancy
Remember to follow the guidance from your local government about capacity. In Governor DeSantis’ Safe. Smart. Step-by-Step Plan for Florida’s Recovery Post COVID-19 Emergency Phase 2, the capacity for all retail establishments is set at 75%. As the Governor deems reasonable to move to the next phases, the capacity will increase accordingly. Please reference the Governor’s office for updated guidelines.

Social Distancing
Ensure your facility has taken all the precautionary steps to promote proper social distancing, i.e. tape/sign on the floor and partitions encouraging your customers/visitors to practice social distancing of at least 6 feet from each other.

In restaurants, waiting areas, and where it is necessary, separate sitting arrangements to allow enough distance between tables, counter space, etc. Arrange a different type of payment method to avoid using keypads, or the use of a credit card at the cashier’s station, this will help eliminate the need to conduct payment transactions person-to-person. If credit cards are used, make sure the key pad is disinfected after each transaction. Depending on the business, encourage online payments.

Other forms of encouraging social distancing and customer/visitor engagement:

- Offer online services and curbside delivery instead of in-store pickup
- Offer drive thru services
- Add plastic barriers/shields at point of check out
- Offer call-ahead services

Signage
Post signs in highly visible locations (ie. at entrances, in restrooms) that promote protective measures and social distancing and how to stop the spread of the virus. (ie. signs in the restrooms that promote hand washing). Post external signs on doors alerting customers/visitors to restrictions on entry and movement in and around the facility, as well as applicable guidelines and expectations.

Disinfect and Sanitation Plan
Set up a hand sanitation station at the entrance, and encourage customers to sanitize their hands before entering the establishment. Disinfect and sanitize tables, counter spaces, and areas after each customer and/or visitor using antiviral wipes or by use of disinfectant spray and disposable towels.
As employers continue to welcome workers back in the workplace, there may be a variety of special circumstances that requires the employer’s attention. Some employees may still be required to work from home or remotely, and some may express fear of returning to work. Employers should be aware of these possible situations and prepare a plan on how to effectively navigate such circumstances. Employers may consider capping the number of workers in the facility at any given time, splitting shifts to avoid a large number of employees at work at the same time, and providing enough space to follow the guidelines on social distancing.

Employers should consider getting a headstart on such accommodations before opening the doors; employers may ask beforehand if any of their employees may be requiring special accommodations and create a plan to provide such accommodations.

Employees with known or suspected underlying health conditions should be encouraged to stay home and continue working remotely.

Fear of returning to work may also be a big factor that employers should be mindful of as they open the doors of their establishments. Ensure that all guidelines recommended by the CDC and OSHA are implemented and followed to reassure returning employees that all precautions have been taken and that returning to work can be done safely.
CONSTANT IMPROVEMENT IDENTIFICATION PLAN

Remember these protocols are a work-in-progress. As we move through this pandemic, employers must remember to assess their actions, and identify ways to improve them. Looking for areas where the protocols can be upgraded will be essential to the continued success of a safely return to work. Employees should regularly be asked for their input, or to comment on anything they see that can be taken into consideration for improvement.

It is easy to begin relaxing the rules and pretend that everything is getting back to normal. However, employers can’t let their guard down. Making an effort to improve employee and customer safety, and find a way that works for their facility ultimately making the operation efficient and effective.

Do not wait until something negative happens to change the plan. Being proactive usually pays huge dividends. Employees will be thankful and customers and visitors will feel appreciated and safe when entering the establishment and likely share their experience.
STEPS TO SAFE RETURN TO WORK IN A COVID-19 ENVIRONMENT

Checklist to ensure workplace safety in a COVID-19 environment.

- Determine Workplace OHSA’s Level of Risk (different guidelines are in place each level)
  - Low
  - Medium
  - High
  - Very High

- Develop Infectious Disease Preparation and Response Plan

- Return to Work Plan in Place
  - Workers’ Risk Factors
  - Pre-Screen
  - Regular Monitoring
  - Physical Distancing Measures
  - Disinfect and Sanitation Plan
  - Personal Protective Equipment (gloves, masks, barriers, etc.)

- Develop a Safe Employee Return to Work Protocol

- Employee Training on COVID-19
  - Florida Chamber Safety Council Complimentary Safe Return to Work Online Webinar

- Develop a Safe Customer/Visitor Protocol

- Open Door Plan in Place
  - Capacity/Occupancy
  - Social Distancing Measures
  - Signage
  - Disinfect and Sanitation Plan

- Special Considerations

- Constant Improvement Identification Plan

The Florida Chamber Safety Council is focused on making Florida the safest state in America. We are an incubator of safety initiatives, best practices, and safety, health and sustainability resources in the state of Florida.

FLChamberSafety.com | (850) 521-1245 | Safety@FLChamber.com
REFERENCES


Florida Department of Health (FDOH) https://www.floridahealth.gov

National Safety Council (NSC) https://www.nsc.org

Mask Ordinance Resource Center https://www.flchamber.com/florida-chamber-litigation-center/


Florida State Emergency Response Team (SERT) https://content.govdelivery.com/accounts/FLDEM/bulletins/293ba53

Appendix A

https://www.epa.gov/pesticide-registration/list-n-disinfectants-use-against-sars-cov-2