

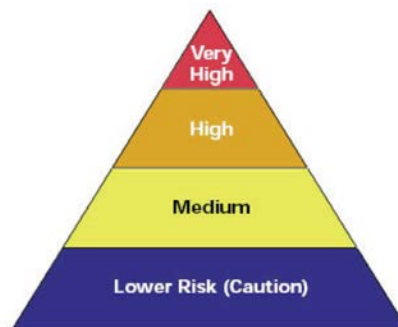
Infectious Disease Preparedness and Response Plan

This plan is developed to help identify risk levels in workplace settings and to determine any appropriate control measures to implement when faced with infectious diseases. This plan will implement engineering, administrative, and work practice controls and personal protective equipment (PPE) in order to prepare and respond to infectious diseases.

Risk Factors

Worker risk of occupational exposure to infectious diseases during an outbreak may vary from very high to high, medium, or lower (caution) risk. The level of risk depends in part on the industry type, need for contact within 6 feet of people known to be, or suspected of being, infected, or requirement for repeated or extended contact with persons known to be, or suspected of being, infected. 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 probable distribution of risk. Most of our projects will likely fall in the lower exposure risk (caution) or medium exposure risk levels.

Occupational Risk Pyramid



- **Very high** exposure risk jobs are those with high potential for exposure to known or suspected sources of infection during specific medical, postmortem, or laboratory procedures.
- **High** exposure risk jobs are those with high potential for exposure to known or suspected sources of infection.
- **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 infectious disease 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 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).
- **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.

Workers may also have individual factors that may also impact risk levels. These factors include, but are not limited to:

- older age
- presence of chronic medical conditions, including immunocompromising conditions
- pregnancy

Risk Control

Federal and state, local, tribal, and/or territorial recommendations will be followed for situations that may arise as a result of outbreaks, such as:

- Increased rates of worker absenteeism.
- The need for social distancing, staggered work shifts, downsizing operations, delivering services remotely, and other exposure-reducing measures.
- Options for conducting essential operations with a reduced workforce, including cross-training workers across different jobs in order to continue operations or deliver surge services.
- Interrupted supply chains or delayed deliveries.

Risk Reduction

Protecting workers will depend on emphasizing basic infection prevention measures. As appropriate, all sites 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.
- Each site should explore whether they can establish policies and practices, such as flexible worksites (e.g., telecommuting) and flexible work hours (e.g., staggered shifts), to increase the physical distance among employees and between employees and others 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 Environmental Protection Agency (EPA)-approved disinfectant labels with claims against emerging viral pathogens. Products with EPA-approved disinfectant labels with claims against emerging viral pathogens are expected to be effective against respiratory pathogens based on data for harder to kill viruses. Follow the manufacturer's instructions for use of all

cleaning and disinfection products (e.g., concentration, application method and contact time, PPE).

Policies and Procedures for Prompt Identification and Isolation of Sick People

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

Managers should inform and encourage employees to self-monitor for signs and symptoms of any contagion if they suspect possible exposure.

If a worker suspects they are ill, or do not feel well, have a cough, fever, or have any cold/flu like symptoms; to notify their immediate supervisor, stay at home, and consult their doctor. If employees have been in contact with confirmed cases to also follow these same precautions.

Supervisors should discuss social distancing and risks of close contact with others. Some sites may choose to establish a “No Hand-Shake” policy during times of outbreak to limit exposure.

Procedures for immediately isolating people who have signs and/or symptoms of a contagious pathogen

- Move potentially infectious people to a location away from workers, customers, and other visitors. Although most worksites 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 worksite.
- Take steps to limit spread of the respiratory secretions of a person who may have a virus. 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 a contagious disease 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.
- 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. Workers whose activities involve close or prolonged/ repeated contact with sick people are addressed further in later sections covering workplaces classified at medium and very high or high exposure risk.

Develop, Implement, and Communicate about Workplace Flexibilities and Protections

When faced with a contagious disease outbreak, supervisors shall:

- Actively encourage sick employees to stay home.

- Ensure that sick leave policies are flexible and consistent with public health guidance and that employees are aware of these policies.
- Talk with subcontractors, suppliers, and vendors about the importance of sick employees staying home and encourage them to develop non-punitive leave policies.
- Do not require a healthcare provider's note for employees who are sick with acute respiratory illness to validate their illness or to return to work, as healthcare provider offices and medical facilities may be extremely busy and not able to provide such documentation in a timely way.
- Maintain flexible policies that permit employees to stay home to care for a sick family member. Employers should be aware that more employees may need to stay at home to care for sick children or other sick family members than is usual.
- Be aware of workers' concerns about pay, leave, safety, health, and other issues that may arise during infectious disease outbreaks. Provide adequate, usable, and appropriate training, education, and informational material about business-essential job functions and worker health and safety, including proper hygiene practices and the use of any workplace controls (including PPE). Informed workers who feel safe at work are less likely to be unnecessarily absent.

Implement Workplace Controls

The best way to control a hazard is to systematically remove it from the workplace, rather than relying on workers to reduce their exposure. During an outbreak, when it may not be possible to eliminate the hazard, the most effective protection measures are (listed from most effective to least effective):

1. Engineering controls
2. Administrative controls
3. Safe work practices (a type of administrative control)
4. 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.

Engineering Controls

Engineering controls involve isolating employees from work related hazards. In workplaces where they are appropriate, these types of controls reduce exposure to hazards without relying on worker behavior and can be the most cost-effective solution to implement. Engineering controls include:

- 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 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.
- 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 contagious disease 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.

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 include:

- 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.

Personal Protective Equipment (PPE)

While engineering and administrative controls are considered more effective in minimizing exposure to contagions, PPE may also be needed to prevent certain exposures. While correctly using PPE can help prevent some exposures, it should not take the place of other prevention strategies.

Examples of PPE include: gloves, goggles, face shields, face masks, and respiratory protection, when appropriate. During an outbreak of an infectious disease, such as COVID-19, recommendations for PPE specific to occupations or job tasks may change depending on geographic location, updated risk assessments for workers, and information on PPE effectiveness in preventing the spread of the disease.

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 an outbreak will be based on the risk of being infected with the contagious disease while working and job tasks that may lead to exposure.

Workers, including those who work within 6 feet of patients known to be, or suspected of being, infected and those performing aerosol-generating procedures, need to use respirators per National Institute for Occupational Safety and Health (NIOSH) standards.

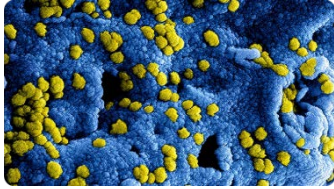
Implementing Controls for Specific Viruses, Pathogens, or Infectious Diseases

Controls for specific viruses, pathogens, or infectious diseases that are currently present or are an ongoing threat currently on a specific site will be included within Appendix A of this plan.

Appendix A- Coronavirus COVID-19

We are closely monitoring the COVID-19 situation and working with all necessary partners to ensure our safety and health, and that our construction sites are prepared to respond with necessary actions.

This page features important advisories, guidelines, resources, and materials on the COVID-19 outbreak for all of our offices, personnel and their families, visitors, and subcontractors.



Coronaviruses are a large family of respiratory viruses with some causing less-severe disease, such as the common cold, and others more severe disease such as Middle-East Respiratory Syndrome (MERS) and Severe Acute Respiratory Syndrome (SARS). Some transmit easily from person to person, while others do not.

The Division of Healthcare Management and Occupational Safety and Health (DHMOSH) recommends the following key preventive measures against COVID-19 and other respiratory pathogens.

Take steps to prevent illness with respiratory pathogens:

Avoid close contact with people suffering from acute respiratory infections such as with fever, cough and difficulty breathing.

Perform frequent hand-washing, especially after direct contact with ill people or their environment.

Individuals with symptoms of acute respiratory infection should practice respiratory hygiene/cough etiquette including:

Stay at home if you are sick;

Maintain your distance from others;

Cover your mouth and nose with a disposable tissue when coughing or sneezing;

Use the nearest waste receptacle to dispose of the tissue after use;

Perform hand hygiene (e.g., hand washing with non-antimicrobial soap and water, alcohol-based hand rub, or antiseptic handwash) after having contact with respiratory secretions and contaminated objects/materials.

When visiting live markets or farms in areas currently experiencing cases of novel coronavirus, avoid direct unprotected contact with live animals and surfaces in contact with animals;

The consumption of raw or undercooked animal products should be avoided. Raw meat, milk or animal organs should be handled with care, to avoid cross-contamination with uncooked foods, as per good food safety practices.

Preliminary information suggests that older adults and people with underlying health conditions may be at increased risk for severe disease from this virus.

The following pages are provided from the World Health Organization regarding the COVID-19 virus and should be followed for safe practices for prevention and awareness of the virus.

3 March 2020

Getting your workplace ready for COVID-19

In January 2020 the World Health Organization (WHO) declared the outbreak of a new coronavirus disease in Hubei Province, China to be a Public Health Emergency of International Concern. WHO stated there is a high risk of the 2019 coronavirus disease (COVID-19) spreading to other countries around the world.

WHO and public health authorities around the world are taking action to contain the COVID-19 outbreak. However, long term success cannot be taken for granted. All sections of our society – including businesses and employers – must play a role if we are to stop the spread of this disease.

How COVID-19 spreads

When someone who has COVID-19 coughs or exhales they release droplets of infected fluid. Most of these droplets fall on nearby surfaces and objects - such as desks, tables or telephones. People could catch COVID-19 by touching contaminated surfaces or objects – and then touching their eyes, nose or mouth. If they are standing within one meter of a person with COVID-19 they can catch it by breathing in droplets coughed out or exhaled by them. In other words, COVID-19 spreads in a similar way to flu. Most persons infected with COVID-19 experience mild symptoms and recover. However, some go on to experience more serious illness and may require hospital care. Risk of serious illness rises with age: people over 40 seem to be more vulnerable than those under 40. People with weakened immune systems and people with conditions such as diabetes, heart and lung disease are also more vulnerable to serious illness.

This document gives advice on:

1. Simple ways to prevent the spread of COVID-19 in your workplace
2. How to manage COVID-19 risks when organizing meetings & events
3. Things to consider when you and your employees travel
4. Getting your workplace ready in case COVID-19 arrives in your community

1. Simple ways to prevent the spread of COVID-19 in your workplace

The low-cost measures below will help prevent the spread of infections in your workplace, such as colds, flu and stomach bugs, and protect your customers, contractors and employees.

Employers should start doing these things now, even if COVID-19 has not arrived in the communities where they operate. They can already reduce working days lost due to illness and stop or slow the spread of COVID-19 if it arrives at one of your workplaces.

- Make sure your workplaces are clean and hygienic

- Surfaces (e.g. desks and tables) and objects (e.g. telephones, keyboards) need to be wiped with disinfectant regularly
- Why? Because contamination on surfaces touched by employees and customers is one of the main ways that COVID-19 spreads
- Promote regular and thorough hand-washing by employees, contractors and customers
 - Put sanitizing hand rub dispensers in prominent places around the workplace. Make sure these dispensers are regularly refilled
 - Display posters promoting hand-washing – ask your local public health authority for these or look on www.WHO.int.
 - Combine this with other communication measures such as offering guidance from occupational health and safety officers, briefings at meetings and information on the intranet to promote hand-washing
 - Make sure that staff, contractors and customers have access to places where they can wash their hands with soap and water
 - Why? Because washing kills the virus on your hands and prevents the spread of COVID-19
- Promote good respiratory hygiene in the workplace
 - Display posters promoting respiratory hygiene. Combine this with other communication measures such as offering guidance from occupational health and safety officers, briefing at meetings and information on the intranet etc.
 - Ensure that face masks¹ and / or paper tissues are available at your workplaces, for those who develop a runny nose or cough at work, along with closed bins for hygienically disposing of them
 - Why? Because good respiratory hygiene prevents the spread of COVID-19
- Advise employees and contractors to consult national travel advice before going on business trips.
- Brief your employees, contractors and customers that if COVID-19 starts spreading in your community anyone with even a mild cough or low-grade fever (37.3 C or more) needs to stay at home. They should also stay home (or work from home) if they have had to take simple

¹ Ordinary surgical face masks rather than N95 face masks

medications, such as paracetamol/acetaminophen, ibuprofen or aspirin, which may mask symptoms of infection

- Keep communicating and promoting the message that people need to stay at home even if they have just mild symptoms of COVID-19.
- Display posters with this message in your workplaces. Combine this with other communication channels commonly used in your organization or business.
- Your occupational health services, local public health authority or other partners may have developed campaign materials to promote this message
- Make clear to employees that they will be able to count this time off as sick leave.

2. How to manage COVID-19 risk when organizing meetings & events

Why do employers and organizers need to think about COVID-19?

Organizers of meetings and events need to think about the potential risk from COVID-19 because:

- There is a risk that people attending your meeting or event might be unwittingly bringing the COVID-19 virus to the meeting. Others might be unknowingly exposed to COVID-19.
- While COVID-19 is a mild disease for most people, it can make some very ill. Around 1 in every 5 people who catch COVID-19 needs hospital treatment.

Key considerations to prevent or reduce COVID-19 risks

BEFORE the meeting or event

- Check the advice from the authorities in the community where you plan to hold the meeting or event. Follow their advice.
- Develop and agree a preparedness plan to prevent infection at your meeting or event.
 - Consider whether a face-to-face meeting or event is needed. Could it be replaced by a teleconference or online event?
 - Could the meeting or event be scaled down so that fewer people attend?
 - Ensure and verify information and communication channels in advance with key partners such as public health and health care authorities.

- Pre-order sufficient supplies and materials, including tissues and hand sanitizer for all participants. Have surgical masks available to offer anyone who develops respiratory symptoms.
- Actively monitor where COVID-19 is circulating. Advise participants in advance that if they have any symptoms or feel unwell, they should not attend.
- Make sure all organizers, participants, caterers and visitors at the event provide contact details: mobile telephone number, email and address where they are staying. State clearly that their details will be shared with local public health authorities if any participant becomes ill with a suspected infectious disease. If they will not agree to this they cannot attend the event or meeting.
- Develop and agree a response plan in case someone at the meeting becomes ill with symptoms of COVID-19 (dry cough, fever, malaise). This plan should include at least:
 - Identify a room or area where someone who is feeling unwell or has symptoms can be safely isolated
 - Have a plan for how they can be safely transferred from there to a health facility.
 - Know what to do if a meeting participant, staff member or service provider tests positive for COVID-19 during or just after the meeting
 - Agree the plan in advance with your partner healthcare provider or health department.

DURING the meeting or event

- Provide information or a briefing, preferably both orally and in writing, on COVID-19 and the measures that organizers are taking to make this event safe for participants.
 - Build trust. For example, as an icebreaker, practice ways to say hello without touching.
 - Encourage regular hand-washing or use of an alcohol rub by all participants at the meeting or event
 - Encourage participants to cover their face with the bend of their elbow or a tissue if they cough or sneeze. Supply tissues and closed bins to dispose of them in.
 - Provide contact details or a health hotline number that participants can call for advice or to give information.
- Display dispensers of alcohol-based hand rub prominently around the venue.
- If there is space, arrange seats so that participants are at least one meter apart.

- Open windows and doors whenever possible to make sure the venue is well ventilated.
- If anyone who starts to feel unwell, follow your preparedness plan or call your hotline.
 - Depending on the situation in your area, or recent travel of the participant, place the person in the isolation room. Offer the person a mask so they can get home safely, if appropriate, or to a designated assessment facility.
- Thank all participants for their cooperation with the provisions in place.

AFTER the meeting

1. Retain the names and contact details of all participants for at least one month. This will help public health authorities trace people who may have been exposed to COVID-19 if one or more participants become ill shortly after the event.
2. If someone at the meeting or event was isolated as a suspected COVID-19 case, the organizer should let all participants know this. They should be advised to monitor themselves for symptoms for 14 days and take their temperature twice a day.
3. If they develop even a mild cough or low-grade fever (i.e. a temperature of 37.3 C or more) they should stay at home and self-isolate. This means avoiding close contact (1 meter or nearer) with other people, including family members. They should also telephone their healthcare provider or the local public health department, giving them details of their recent travel and symptoms.
4. Thank all the participants for their cooperation with the provisions in place.

3. Things to consider when you and your employees travel

- **Before traveling**

- Make sure your organization and its employees have the latest information on areas where COVID-19 is spreading. You can find this at <https://www.who.int/emergencies/diseases/novel-coronavirus-2019/situation-reports/>
- Based on the latest information, your organization should assess the benefits and risks related to upcoming travel plans.
- Avoid sending employees who may be at higher risk of serious illness (e.g. older employees and those with medical conditions such as diabetes, heart and lung disease) to areas where COVID-19 is spreading.
- Make sure all persons travelling to locations reporting COVID-19 are briefed by a qualified professional (e.g. staff health services, health care provider or local public health partner)
- Consider issuing employees who are about to travel with small bottles (under 100 CL) of alcohol-based hand rub. This can facilitate regular hand-washing.

- **While traveling:**

- Encourage employees to wash their hands regularly and stay at least one meter away from people who are coughing or sneezing
- Ensure employees know what to do and who to contact if they feel ill while traveling.
- Ensure that your employees comply with instructions from local authorities where they are traveling. If, for example, they are told by local authorities not to go somewhere they should comply with this. Your employees should comply with any local restrictions on travel, movement or large gatherings.

- **When you or your employees return from traveling:**

- Employees who have returned from an area where COVID-19 is spreading should monitor themselves for symptoms for 14 days and take their temperature twice a day.
- If they develop even a mild cough or low grade fever (i.e. a temperature of 37.3 C or more) they should stay at home and self-isolate. This means avoiding close contact (one meter or nearer) with other people, including family members. They should also telephone their

healthcare provider or the local public health department, giving them details of their recent travel and symptoms.

4. Getting your workplace ready in case COVID-19 arrives in your community

- Develop a plan of what to do if someone becomes ill with suspected COVID-19 at one of your workplaces
 - The plan should cover putting the ill person in a room or area where they are isolated from others in the workplace, limiting the number of people who have contact with the sick person and contacting the local health authorities.
 - Consider how to identify persons who may be at risk, and support them, without inviting stigma and discrimination into your workplace. This could include persons who have recently travelled to an area reporting cases, or other personnel who have conditions that put them at higher risk of serious illness (e.g. diabetes, heart and lung disease, older age).
 - Tell your local public health authority you are developing the plan and seek their input.
- Promote regular teleworking across your organization. If there is an outbreak of COVID-19 in your community the health authorities may advise people to avoid public transport and crowded places. Teleworking will help your business keep operating while your employees stay safe.
- Develop a contingency and business continuity plan for an outbreak in the communities where your business operates
 - The plan will help prepare your organization for the possibility of an outbreak of COVID-19 in its workplaces or community. It may also be valid for other health emergencies
 - The plan should address how to keep your business running even if a significant number of employees, contractors and suppliers cannot come to your place of business - either due to local restrictions on travel or because they are ill.
 - Communicate to your employees and contractors about the plan and make sure they are aware of what they need to do – or not do – under the plan. Emphasize key points such as the importance of staying away from work even if they have only mild symptoms or have had to take simple medications (e.g. paracetamol, ibuprofen) which may mask the symptoms
 - Be sure your plan addresses the mental health and social consequences of a case of COVID-19 in the workplace or in the community and offer information and support.

- For small and medium-sized businesses without in-house staff health and welfare support, develop partnerships and plans with your local health and social service providers in advance of any emergency.
- Your local or national public health authority may be able to offer support and guidance in developing your plan.

Remember:

Now is the time to prepare for COVID-19. Simple precautions and planning can make a big difference. Action now will help protect your employees and your business.

How to stay informed:

Find the latest information from WHO on where COVID-19 is spreading:

<https://www.who.int/emergencies/diseases/novel-coronavirus-2019/situation-reports/>

Advice and guidance from WHO on COVID-19

<https://www.who.int/emergencies/diseases/novel-coronavirus-2019>

<https://www.epi-win.com/>