Memorandum

MIAMI-DADE COUNTY

Date: May 13, 2020

To: Honorable Chairwoman Audrey M. Edmonson
and Members, Board of County Commissioners

From: Carlos A. Gimenez
Mayor

Subject: New Normal Guide

As you know from our daily briefing calls, Miami-Dade County is preparing to re-open our community in a phased approach beginning on Monday, May 18. Last night, I sent Governor DeSantis a draft copy of the handbook that will guide the County's reopening strategy. It is important to note that this strategy was developed in close consultation with medical and industry experts, along with community and municipal partners.

In anticipation of the Governor's approval that will allow the County to proceed with the reopening of Phase I (the Yellow Flag Phase that essentially allows certain non-essential businesses to open with stringent capacity and safety rules in place), I am sharing the draft of our reopening plan for your review, and to allow our businesses time to prepare for next week's reopening.

Should you have any questions about the attached New Normal Guide, please feel free to contact me directly. I look forward to continuing to work together to support the safe reopening of our community and the resurgence of our economy.

Attachment

c: Honorable Harvey Ruvin, Clerk, Circuit and County Courts
Honorable Bertila Soto, Chief Judge, Eleventh Judicial Circuit
Honorable Katherine Fernandez-Rundle, State Attorney
Honorable Carlos Martinez, Public Defender
Honorable Pedro J. Garcia, Property Appraiser
Abigail Price-Williams, County Attorney
Geri Bonzon-Keenan, First Assistant County Attorney
Office of the Mayor Senior Staff
Mary T. Cagle, Inspector General
Jose Arrojo, Executive Director, Commission on Ethics and Public Trust
Department Directors
Yinka Majekodunmi, Commission Auditor

THIS DOCUMENT IS IN DRAFT FORM
AND PROVIDED FOR REVIEW ONLY

THE NEW NORMAL

A GUIDE FOR RESIDENTS AND COMMERCIAL ESTABLISHMENTS

Miami-Dade County
May 13, 2020

CARLOS A. GIMENEZ
MAYOR
MIAMI-DADE COUNTY

May 13, 2020

Throughout my 45-year career in public service, I have been involved in one way or another in responding to emergencies and extraordinary events in our community. As a firefighter, I responded to emergency calls every day. I served as a SWAT medic and responded to the initial crises and the aftermath of the McDuffie Riots. As the Fire Chief and Emergency Manager for the City of Miami, I developed and implemented equipment and procedures for large-scale gatherings at stadiums and other facilities, and led the response to Hurricane Andrew. I was appointed City Manager during the State Oversight that was imposed as a result of fiscal mismanagement, and I brought the City of Miami out of financial insolvency. As the Mayor of Miami-Dade County, I have led our community out of the Great Recession, an epidemic of Zika cases, and recovery from Hurricane Irma. From each of these events, I gained experience in leading an organization and a community through difficult times. All these events combined, however, do not equal the impact that the COVID-19 pandemic has had on Miami-Dade County.

Although we were criticized by some at the time, we responded quickly and responsibly to the coming pandemic: first, by protecting the elderly and medically-compromised residents; next, by restricting dining in restaurants and closing theaters, playhouses and other gathering places, and by imposing social distancing guidelines; then by closing parks and open spaces; and finally, by closing all non-essential retail and commercial establishments. Our Safer at Home protocols became the model for the state, and it is because you – our residents and business owners – cooperated and adhered to these restrictions, that we were able to avoid the worst predictions of the effects of the pandemic on our community, flatten the curve, and now, with criteria established by the Federal government showing a downward trend in cases and hospitalizations in Miami-Dade County, we can now relax some of these restrictions and work toward what will be our New Normal.

With the input of community members, medical experts and industry experts, and following the experience of communities that have come before us, this guide has been developed as the roadmap of our reopening. The plan is divided into phases, and the various industries and services provided in our community are mapped along these phases with gradual expansion of activities. Guidelines for residents, regardless of activities, are included to help keep you safe and healthy. Industry-specific rules are laid out to allow our economy to reopen, while protecting our community.

Earlier this month, we allowed for a limited reopening of parks and open spaces. Because we carefully planned and you followed the rules established, we did not experience an increase in cases and can now consider further openings. Should we see indicators that the percentage of positive cases is increasing in line with test counts, hospital beds are filling up, or people are not following the established orders, restrictions will go back into place. A daily dashboard will provide everyone with the most up-to-date information and the status of reopening each day.

Working together, we have been successful in largely protecting our community from the health impacts of the pandemic. Now it is time for us to join together to reverse the economic impacts our community has been suffering. Following this guide will take us safely to the New Normal, as will each of us taking personal responsibility for our safety. Remember: *I Keep You Safe, You Keep Me Safe*. We're in this together, and I am confident that we will emerge even stronger than before.

Yours in service,

Carlos A. Gimenez
Mayor, Miami-Dade County

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Introduction

This guide has been prepared for you – the residents, business and commercial establishment owners and people who operate other facilities throughout Miami-Dade County – to provide information you will need as we move to a New Normal. The first phase of reopening will commence on May 18, 2020, as described further in this document. This does not include establishments included in Emergency Order 03-20, other than restaurants, Emergency Order 09-20 and Emergency Order 15-20. Decisions will be made in the coming weeks regarding moving to the next phases of re-opening and communicated with adequate time to prepare. Dates for future phases will be determined in the coming weeks.

Guided by facts and input from the community, medical and industry experts, the protocols included in this document have been developed to guide our community as we slowly and thoughtfully begin to reopen services and allow for activities that have been suspended since March. A simple, color-coded system has been created to quickly communicate where on the continuum of reopening we currently stand and a dashboard has been developed to provide interested people with the up-to-date information we have to help us make decisions regarding these protocols and track the impacts of our actions.

Rules for all of us to follow regardless of where we will be and what we will be doing in Miami-Dade County are included, as well as more specific requirements for visitors to our parks and open spaces. Recommendations for actions that businesses, commercial establishments and other facilities should be taking now to prepare for reopening have been developed and are included in this guide. A general continuum for business opening as well as guidance for all businesses follows, as well as detailed protocols for a handful of specific business categories and sub-categories are also included. If a particular commercial establishment supports multiple business lines, only those permitted to operate may be opened in any particular phase. **Points in bold MUST be followed;** other recommendations are strongly suggested.

Finally, an appendix is included with a listing intended to contain all of the industries represented in Miami-Dade County and a designation of in which phase those businesses will likely be allowed to open, along with other documents that business and facility managers will find helpful to communicate rules and express guidelines developed by various regulatory agencies.

This guide is intended to be a dynamic document and we want it to be useful to you. Should you have any questions or suggestions, please send an email to new-normal@miamidade.gov. We want to be responsive to our ever-changing and ever-challenging situation as we work our way to the New Normal.

Color Identification System

The color flag identification system below will be used to communicate each day where we are on the continuum of the New Normal. Depending upon the situation, we may take intermediate steps between these phases, but knowing what color phase we are in will help you navigate your activities.

Color	Phase
	Most stringent closures; only essential businesses open; social distancing and facial covering requirements in place
	Parks and Open Spaces open; preparations taking place to reopen other sectors with strict capacity requirements in place; social distancing and facial covering requirements in place
	Limited opening of non-essential businesses and other facilities; strict capacity requirements in place; social distancing and facial covering requirements in place
	More expansive opening of businesses and facilities; capacity requirements expanded; social distancing and facial covering requirements in place
	New Normal is in place; all businesses and facilities open; social distancing and facial coverings encouraged

General Guidelines – Emergency Order 20-20

Emergency Order 20-20 was originally implemented at 11:59pm on April 9, 2020. This Emergency Order is the guiding Order for all residents and businesses and promulgates requirements that are in place regardless of where you visit.

- People must follow the social distancing and facial covering and personal protection equipment (PPE) guidelines as defined by our Emergency Orders, the Centers for Disease Control (CDC) and consistent with Occupational Safety and Health Administration (OSHA) and other regulatory guidelines:
    - **Gatherings of fewer than 10 people**
    - **Six foot distance between people**
    - **Wear facial coverings**
    - **Wash hands and/or use hand sanitizer often**
- Facilities must implement certain procedures:
    - **enhanced sanitizing of all common areas and frequent touch points**
    - **placement of trash containers for face masks and other personal protective equipment (PPE) near exits and entrances and other common areas**
    - **comprehensive cleaning of facilities must be performed each night and include thoroughly disinfecting all frequent touch points and emptying all trash receptacles using solid waste bags that are double-bagged and securely sealed**
    - **posting CDC signage in publicly trafficked locations emphasizing measures to "Stop the Spread of Germs" and to exercise social responsibility**
    - upgrading or installing ventilation per OSHA guidance
    - designating quarantine rooms for infected individuals and deep clean after use
    - **installing hand sanitizer at entry points and through site**
    - **training all personnel in new operating protocols and modifications to existing codes of conduct to deal with COVID 19 issues**

- Businesses and workplaces must implement certain procedures:
  - designing work group shifts to minimize contacts between employees and ensure easier tracking and tracing, as possible, and implement staggered breaks to reduce large group gatherings
  - avoiding meetings of more than 5 participants and encouraging virtual meetings
  - reducing seating in breakrooms and common areas to ensure minimum 6' physical distance
  - allowing non-core functions to work from home, as possible
  - implementing testing programs for high risk employees
  - establishing clear reporting protocols based on leading (e.g., thermometer temp spikes, thermal scanning spikes, increased absenteeism) and lagging indicators (e.g., staff health visits above pre-defined rate, community spread in retailer locale) to help prevent spread of cases
  - posting a contact email address and/or telephone number for employees / customers to contact if they have questions or concerns
  - **if faced with infection, immediately reporting the number of infected, timing of infection and proposed remediation plan to relevant local authorities. All staff must be tested, deep-sanitization of workplace must be conducted, and entire office building including non-affected offices must be closed until all common areas are sanitized**

MIAMI-DADE COUNTY EMERGENCY ORDER 20-20

WHEREAS, section 252.38(3)(a), Florida Statutes, gives political subdivisions the authority to declare and enact a State of Local Emergency for a period of up to seven days, thereby waiving the procedures and formalities otherwise required of the political subdivision by law; and

WHEREAS, on March 1, 2020, the Governor of Florida issued Executive Order Number 20-51, directing the State Health Officer and Surgeon General to declare a Public Health Emergency due to the discovery of COVID-19/novel Coronavirus in Florida; and

WHEREAS, on March 9, 2020, the Governor issued Executive Order Number 20-52, declaring a State of Emergency for the State of Florida related to COVID-19/novel Coronavirus; and

WHEREAS, on March 12, 2020, the County Mayor declared a State of Emergency for all of Miami-Dade County; and

WHEREAS, on March 30, 2020, the Governor issued Executive Order Number 20-89, restricting the operations of non-essential businesses in certain South Florida counties and requires such establishments to take reasonable actions to comply with the United States Centers for Disease Control and Prevention (CDC) guidelines on social distancing; and

WHEREAS, the CDC believes that social distancing in the most effective way of slowing the spread of COVID-19; and

WHEREAS, on April 3, 2020, the CDC recommended that persons wear masks, including cloth masks or other facial coverings, in situations where it is difficult to attain social distancing, in order to help control the spread of COVID-19; and

WHEREAS, COVID-19/novel Coronavirus poses a health risk to Miami-Dade County residents, particularly elderly residents and those who are immunosuppressed or otherwise have high-risk medical conditions,

THEREFORE, as County Mayor of Miami-Dade County, I hereby order:

1. Persons working in or visiting grocery stores, restaurants, pharmacies, construction sites, public transit vehicles, vehicles for hire, and locations where social distancing measures are not possible shall wear facial coverings as defined by the CDC.

2. A facial covering includes any covering which snugly covers the face and mouth, whether store bought or homemade, and which is secured with ties or ear loops. Examples of compliant home-made masks may be found at https://www.cdc.gov/coronavirus/2019-ncov/prevent-getting-sick/diy-cloth-face-coverings.html. Persons should not utilize N95 rated masks, as those are critical supplies for health care workers, police, fire, emergency management, or other persons engaged in life/safety activities. Persons who wear masks should review the CDC and Florida Department of Health guidelines regarding safely applying, removing, and cleaning masks.

3. A mask shall not be required for children under two or persons who have trouble breathing due to a chronic pre-existing condition.

4. This order does not change or alter any social distancing requirements imposed in any other Emergency Order.

5. The provisions of this order shall serve as minimum standards. Municipalities may impose more stringent standards within their jurisdictions, as permitted by law.

6. This order shall be effective as of 11:59 p.m. on April 9, 2020.

7. This order shall expire upon the expiration of the existing Miami-Dade County State of Local Emergency, except that if such State of Local Emergency is extended, this order shall also be deemed to extend for the duration of such extension. This order may be cancelled earlier by action of the County Mayor.

8. This order shall be provided to all appropriate media consistent with the requirements of section 8B-7(2)(n) of the Code of Miami-Dade County.

Enacted:
Signed: _____
COUNTY MAYOR

Date: 4/9/2020 Time: 18:20

Witness: Lourdes P. Jimenez

Cancelled:
Signed: _____
COUNTY MAYOR

Date: _____ Time: ___:___

Witness: _____

Sector Archetypes

All of our activities in Miami-Dade County fall into sector archetypes and will follow the timing guidelines as shown below. These characterizations are based on job categories and descriptions from U.S. Census Bureau, an analysis of proximity index by sector from the Department of Labor and other data.

Open Phase	Archetype	Examples
	Essential	Businesses outlined in Emergency Order 07-20 and amendments
	Can be performed remotely	Law offices, CPA offices, IT centers, financial institutions, real estate offices, commercial establishments utilizing on-line ordering and remote pickup
	Lower proximity	Parks and open spaces, electronic and household goods repair shops
	Higher proximity, but that can be safeguarded	Museums, real estate showings, retail establishments and office spaces with capacity limitations
	Higher proximity and harder to safeguard	Hotels, personal grooming establishments, theaters, tour operators, pools, gyms and other wellness venues, bars, community centers, playgrounds

The appendix to this document lists as many types of businesses as we could quickly identify in Miami-Dade County for your reference. They are coded to the characterizations above so that you can quickly determine where your business falls in the continuum. If your particular business is not included, please new-normal@miamidade.gov so that we may add it to the list in the proper category. Thank you in advance for your assistance!

Parks and Open Spaces

As we moved into the Orange flag phase, the first sector that re-opened in a limited way in Miami-Dade County was Parks and Open Spaces. On April 29, 2020 at 6:00am, Emergency Order 21-20 went into effect. The development of the Emergency Order included representatives from organizations involved in services and activities in parks, marinas and golf courses. Over the course of several meetings, protocols were developed and then reviewed carefully by medical professionals from the universities and hospitals in Miami-Dade County, as well as the Florida Department of Health. This collaborative process became the model for future efforts related to business and commercial establishment reopening.

The protocols developed outlined specific rules to ensure social distancing, effective sanitization of restrooms and high touch areas, use of facial coverings and limitations on gatherings of people.

MIAMI-DADE COUNTY EMERGENCY ORDER 21-20

WHEREAS, section 252.38(3)(a), Florida Statutes, gives political subdivisions the authority to declare and enact a State of Local Emergency for a period of up to seven days, thereby waiving the procedures and formalities otherwise required of the political subdivision by law; and

WHEREAS, on March 1, 2020, the Governor of Florida issued Executive Order Number 20-51, directing the State Health Officer and Surgeon General to declare a Public Health Emergency related to coronavirus disease 2019 (COVID-19) in Florida; and

WHEREAS, on March 9, 2020, the Governor issued Executive Order Number 20-52, declaring a State of Emergency for the State of Florida related to COVID-19; and

WHEREAS, on March 12, 2020, the County Mayor declared a State of Emergency for all of Miami-Dade County; and

WHEREAS, the County Mayor has filed an affidavit explaining that this State of Emergency, including extensions, may last for more than thirty days; and

WHEREAS, the County Mayor issued Emergency Order 06-20 on March 18, 2020, closing beaches, parks, and recreational facilities; and

WHEREAS, Emergency Order 06-20 was amended on March 22, 2020, to close marinas and boat ramps; and

WHEREAS, on March 30, 2020, the Governor issued Executive Order Number 20-89, restricting the operation of non-essential businesses in certain South Florida counties and requiring such establishments to take reasonable actions to comply with the United States Centers for Disease Control and Prevention (CDC) guidelines on social distancing; and

WHEREAS, the CDC believes that social distancing is the most effective way of slowing the spread of COVID-19; and

WHEREAS, on April 3, 2020, the CDC recommended that persons wear facial coverings, including cloth masks or other facial coverings, in situations where it is difficult to attain social distancing; and

WHEREAS, on April 7, 2020, the Board of County Commissioners ratified both the declared State of Emergency and Emergency Order 06-20, as amended; and

WHEREAS, COVID-19 poses a health risk to Miami-Dade County residents, particularly elderly residents and those who are immunosuppressed or otherwise have high-risk medical conditions; and

WHEREAS, COVID-19 spread continues to occur in Miami-Dade County, although at a lower rate; and

WHEREAS, it is important for the physical and mental health of the community that outdoor recreation be allowed to the extent it is safe to do so; and

WHEREAS, the County, in consultation with medical experts, industry experts, and municipalities within Miami-Dade County, has determined that it is possible to open, with restrictions, parks, golf courses, marinas and boat ramps,

THEREFORE, as County Mayor of Miami-Dade County, I hereby order:

1. Effective as of 6:00 a.m. on April 29, 2020, Emergency Order 06-20, as amended, is cancelled.

2. Defined terms:

   As used herein,
   - the term "facial covering" shall refer to a facial covering as described in Emergency Order 20-20;
   - the term "family" shall mean an individual and spouse, domestic partner, parents, children, or legal guardians who reside in the same household, and inclusive of children whose custody is shared between two parents in different households;
   - "parks" shall mean parks and recreational facilities but shall not include beaches; and
   - the term "social distancing" shall mean a minimum of six feet distance between persons. Social distancing, where required herein, shall not apply to family members residing in the same dwelling solely with respect to other such family members.

3. If the CDC issues guidelines that are more restrictive than is provided for in this order, persons shall comply with the CDC guidelines.

4. Effective as of 6:00 a.m. on April 29, 2020, all parks and recreational facilities in the incorporated and unincorporated areas of Miami-Dade County may be open, but only under the limited circumstances set forth herein:

   - All parks and recreational facilities may be open only from the hours of 7 a.m. to 8 p.m. Within this time period, a park or recreational facility may be open for a shorter time period if prescribed by their normal operating hours or, with respect to parks operated by municipalities, by municipal regulation.

- Use of parks and recreational facilities shall be for limited active and passive uses by individuals and families, as permitted by this order and following current CDC and State Health Department guidelines.
- No groups of 10 or more persons shall congregate in parks or recreational facilities. All persons, excepting family, shall observe social distancing, both within groups and with others.
- Only the following limited active uses are allowed: walking, jogging, hiking, skating, cycling, nature walks on trails, and sports skills practice by individuals or between family members. Sports skills practice includes, but is not limited to, activities such as shooting a basketball, dribbling a soccer ball, solo racquetball, family members throwing a ball, or similar activities.
- To ensure that social distancing is maintained and to ensure access to facilities by patrons, parks staff may limit the number of persons using trails, paths, fields, or courts, and may limit the time any person spends on such trail, path, field, or court.
- Organized or competitive play on courts and fields is prohibited, except singles tennis play may be allowed.
- Passive uses of parks are allowed if social distancing is maintained, provided however, that table games, picnics, and parties are prohibited.
- Selected park trails and walkways shall be one-way flow only, except where the existing configurations does not allow such flow. Where designated for one-way flow, persons shall only move in the designated direction.
- Facial coverings shall be worn, except children under the age of 2, persons who have trouble breathing due to a chronic pre-existing condition, or persons engaged in strenuous physical activity.
- An attendant shall be provided for each restroom. Restrooms shall be cleaned no less than once every two hours with CDC approved products. Restroom use shall be one person or one family at a time.
- Vehicle parking capacity in parks shall be reduced by no less than 25 percent when practicable.
- Sports field lighting shall remain off.
- Use of the following amenities is prohibited:
    - bike racks;
    - playgrounds and exercise equipment;
    - dog parks;
    - recreation buildings, picnic shelters, gyms, campgrounds;
    - skate parks;
    - splashpads and swimming pools;
    - mechanical attractions; and
    - concessions.

5. Effective as of 6:00 a.m. on April 29, 2020, all marinas, boat launches, docking, fueling, marine supply, and other marina services in the incorporated and unincorporated areas of Miami-Dade County may be open, but only under the limited circumstances:

BOAT RAMP PROTOCOL:

- Ramps may be open between 6 a.m. and 8 p.m. daily.
- Facial coverings shall be worn while on shore and until such time as the vessel is fully loaded and has departed the marina.
- One boat per launch ramp shall be permitted at a time; vessels shall be prepared in advance to launch, such as plug secured, dock lines tied, and safety equipment and provisions already onboard; all passengers shall board the vessel once it is launched.
- Upon returning to the dock, all passengers shall remain on the vessel until the boat is ready to be loaded onto the trailer; once loaded, all passengers shall return to their vehicles and exit the launch facility immediately.

FISH CLEANING STATIONS:

- One person per station at a time. Fish cleaning stations shall be cleaned with soap and water or a disinfecting agent between each use.
- Social distancing shall be practiced.

FISHING PIERS:

- A minimum of 10 feet between persons fishing shall be maintained, with the exception of family members.
- Persons shall wear facial coverings while fishing.

PUBLIC RESTROOMS/SHIP STORES:

- Access to public restrooms shall be available. Restrooms shall be cleaned no less than once every two hours using CDC approved products.
- Those entering ship or bait and tackle stores shall be required to practice social distancing and wear facial coverings.
- Floor markings shall be used to assist customers in observing social distancing.

CHARTER VESSELS:

- Captain, crew and patrons shall wear facial coverings and practice social distancing both on shore and on the vessel.
- "Six-Pack" vessels shall have no more than four guests per vessel.
- Drift Fishing Vessels shall provide for social distancing, which shall include delineating safe social distancing positions, including, but not limited to, tape or markings for patrons on seats, vessel railings and the deck. All persons fishing shall have his/her own fishing poles and tackle. Equipment rental is prohibited.
- CDC cleanliness guidelines shall be posted in restrooms/heads; restrooms shall be sanitized and disinfected at least hourly and after each trip, or more frequently as needed; and water and soap, hand sanitizer, or both, shall be provided for patrons.
- Fish cleaning and bait table stations shall be limited to one person per station at a time. Fish cleaning and bait table stations shall be cleaned with soap and water or a disinfecting agent between each charter.

- If crew members are filleting fish a patron caught, only one person per table.
- All persons shall practice social distancing and utilize facial coverings at landside and including check-in locations.
- Vessels shall delineate safe social distance positions for those waiting in line to check in or out with tape or other markings.

ON-WATER ACTIVITY:*

- Boats shall remain 50 feet apart at all times.
- Tying up to posts or structures that are condemned or unoccupied in Stiltsville is prohibited.
- Gatherings of more than 10 people are prohibited.
- Rafting up or beaching of boats is prohibited.
- Landings and anchoring at sandbars are prohibited.
- Capacity of boats:
  - Boats less than 25 feet: 4 adults maximum, plus children 17 and under. Maximum of 8 people on the boat.
  - Boats 25 feet to 36 feet: 6 adults maximum, plus children 17 and under. Maximum of 10 people on the boat.
  - Boats greater than 36 feet: 8 adults maximum, plus children 17 and under. Maximum of 10 people on the boat.
  - No boat shall exceed the maximum persons capacity per "maximum capacity label."
  - Jet ski rental operations shall be single riders only. Jet skis shall be sanitized on return with CDC approved products.

**Limitations on use of vessels on-water shall be enforced as permitted by Florida Law by any law enforcement entity having jurisdiction.*

6. Effective as of 6:00 a.m. on April 29, 2020, golf courses may open, if the following conditions are met:

ON-COURSE FACILITY

- Staff and players shall practice social distancing and wear facial coverings while inside the facility.
- No clubs or other equipment shall be transported by golf course staff. Players shall be responsible for bringing their own golf equipment to designated areas prior to play.
- Designated signage shall be placed outside the pro-shop and clubhouse outlining the required social distancing and facial covering guidelines.
- Designated signage shall be placed on carts and around the clubhouse with the phone number to call for food orders and an explanation of how to pay.
- Indoor events shall be prohibited.
- Pro-shop display areas shall be closed, but patrons may be allowed to purchase goods and supplies at the pro-shop door on a walk-up basis.
  - Payment shall be made at the front door observing social distancing.
  - Glass or plastic screens shall be installed between pro-shop staff and customers.
  - Staff shall wear facial coverings at all times.

  - Where possible, separate entry and exit doors shall be designated.
- Usage of locker room and bag storage areas is prohibited.
- For all pro-shop lines, markers shall be placed on the floor to assist patrons to comply with social distancing guidelines.
- Hand sanitizer shall be provided in restrooms and payment areas.
- Restroom use shall be one person or one family at a time, with appropriate signage to be provided.
- Each cart and any rental equipment shall be cleaned and disinfected prior to players' use.
  - All sand containers, scorecards, pencils, tees, towels, coolers or other shared materials shall be removed from golf carts.
- All restrooms and touch-point areas shall be disinfected no less than every two hours with CDC approved products.
- Driving-range hitting areas shall be spaced at least 10 feet apart.
- Scorecard, pencil and tees shall only be issued to individuals when requested from starter, and then discarded after their initial use.

GOLF-COURSE PREPARATION

- Cup Modifications:
  - A pool noodle or other blocking mechanism shall be used to fill the hole, or the cup shall be raised an inch above ground to prevent the ball from going in the hole.
  - Alternatively, an E-Z lyft touchless golf ball retrieval system or similar touchless system may be used.
- Rakes in all bunkers shall be removed:
  - United States Golf Association recommendations shall be followed on bunker play depending on the course and its resources.
- All water stations shall be removed.
- All ball wash units shall be removed or locked down.
- All practice facility bag stands, chairs and PVC pipes for picking up balls shall be removed.
- All range-balls shall be cleaned, with water and soap, after every pick-up prior to making them available for golfers.
- Where possible, clientele 60 years of age and older shall be separated from younger clientele.

PLAYING

- Players shall not touch or remove the flagstick from the cup.
- All players shall stay at minimum six feet apart at all times, and a course ranger or other staff member shall monitor player compliance on the course.
- More than one player per each cart is prohibited.
- Walking is allowed while maintaining social distancing.
- To eliminate congestion and gathering on the property or in the parking lot, each golfer shall leave the golf course immediately after playing.

FOOD AND BEVERAGE

- Beverage carts on the golf course are permitted under the following circumstances:
  - Beverage cart staff shall wear facial coverings at all times.
  - Beverage carts shall bear signage stating that players are prohibited from touching anything on the beverage cart.
  - Only a cart attendant shall distribute items from the cart. To ensure social distancing:
    - Beverage cart attendant shall place purchased items on opposite side of the players golf cart; and
    - For players that are walking, the beverage cart attendant shall place the purchased items on the ground for the player to pick it up.
  - Players shall be encouraged to pay with credit card and cart attendants shall wipe down the credit card machine after each use.

STAFF

- Facial coverings shall be worn by all staff at all times.
- Shaking hands is prohibited.

7. All beaches in the unincorporated and incorporated areas of Miami-Dade County shall remain closed.

8. This order shall apply to both publicly-owned and privately-owned beaches, parks and recreational facilities, marinas and boat landings, and golf courses. This order does not apply to beaches, parks and recreational facilities, marinas and boat landings, or golf courses under the jurisdiction of the State of Florida or the federal government.

9. These provisions shall serve as minimum standards. Municipalities may impose more stringent standards within their jurisdictions as may be authorized by law.

10. This order shall expire upon the expiration of the existing Miami-Dade County State of Local Emergency, except that if such State of Local Emergency is extended, this order shall also be deemed to extend for the duration of such extension. This order may be cancelled earlier by action of the County Mayor.

11. This order shall be provided to all appropriate media consistent with the requirements of section 8B-7(2)(n) of the Code of Miami-Dade County.

Enacted:
Signed: _____
COUNTY MAYOR

Date: 4/27/2020 Time: 16 : 40

Witness: _____

Cancelled:
Signed:_____
COUNTY MAYOR

Date: _____ Time: ___:___

Witness:_____

Initial Reopening Plan

It is my intent to move to the Yellow flag phase on May 18, 2020 and allow non-essential businesses to open with stringent capacity and safety rules in place. That means you should be getting ready now if you intend to open your business. Miami-Dade County will make every effort to ensure personal protective equipment (PPE) is available for purchase by businesses and commercial establishments who cannot access supplies. This does not include establishments included in Emergency Order 03-20, other than restaurants, Emergency Order 09-20 and Emergency Order 15-20. Decisions will be made in the coming weeks regarding moving to the next phases of re-opening and communicated with adequate time to prepare.

While designated businesses will be permitted to open, you are not required to open. Furthermore, if current conditions change – as reflected on our dashboard – this date may be moved out. Once we move into the Yellow flag phase, if we experience a surge in cases, we may be required to return to the Orange flag phase. Should this happen, we will communicate this to the community with adequate time to prepare prior to the effective date.

As you prepare to reopen your establishment, please consider these examples of general safeguarding guidelines for reopening. All guidelines are categorized by workforce protection measures, employee protection measures, non-employee (or customer) protection measures, business process adaptations, employer-led public health interventions and industry-wide safeguards. This list is not intended to be all-inclusive, but rather examples of actions to be taken so that you may protect your employees and your customers. If a particular commercial establishment supports multiple business lines, only those permitted to operate may be opened in any particular phase. You may wish to enforce more stringent guidelines or procedures.

General Reopening Guidelines

I. Workforce protection
   a. **Facial coverings must be worn inside businesses and commercial establishments or wherever social distancing is not possible**
   b. **Mandatory 14-day quarantine for all at-risk employees**
   c. Provide or coordinate safe transportation to work allowing for social distancing
   d. Allow for flexible schedules for childcare and sick time
   e. Staggered breaks to reduce large group gatherings
   f. **Install hand sanitizer at entry points and through site**

II. Employee protection
   a. Enforce personal protective equipment (e.g., face masks, gloves)
   b. Ensure employees (and customers) stay more than 6 feet apart (use visual markers to help with implementation)
   c. Enhanced sanitization of all common areas / touch points (doors, stairwell handles, light switch, elevator switch, etc.)
   d. Procure increased amounts of soap, hand sanitizer, cleaning materials and protective equipment

III. Non-employee Protection
   a. **Visually mark separation 6 ft. apart for areas where people would group (e.g., queues and elevators)**
   b. Discourage entry to site of visitors and contractors, unless needed for operations
   c. Discourage car valet parking
   d. Set up self-checkout lines and contactless payments, as applicable

IV. Business Process Adaptations
   a. Upgrade/Install ventilation including HVAC filters per OSHA guidance
   b. **Clean and disinfect bathrooms every two to three hours**
   c. **Eliminate the use of common water fountains and interactive displays**
   d. **Limit capacity of elevators to ensure social distancing**
   e. Designate quarantine rooms for infected individuals and deep clean after use
   f. Require non-core functions to work from home, as possible
   g. Avoid meetings of more than 5 participants, encourage virtual meetings
   h. Reduce seating in breakrooms / common areas to ensure minimum 6’ physical distance. If not possible, close common areas
   i. **Prior to re-open, flush plumbing and run water in sinks to eliminate stagnant water from the period of mall/store’s closure**

V. Employer-led public health interventions

a. **Post CDC signage in publicly trafficked locations emphasizing measures to "Stop the Spread of Germs" and to exercise social responsibility**
b. **Train all personnel in new operating protocols and modifications to existing codes of conduct to deal with COVID 19 issues**
c. Design work group shifts to minimize contacts between employees and ensure easier tracking and tracing, as possible
d. Implement testing programs for high risk employees (e.g., frequent contact with customers or suppliers)

VI. Industry-wide Safeguards

a. Acknowledge in writing the review and understanding of relevant industry association and union organizations guidelines, including capability checklists and reference to WHO, DOH and CDC guidelines
b. Establish protocol to immediately disclose infection to state DOH bodies and procedure to safeguard store (e.g., deep cleaning)
c. Setup clear reporting protocols based on leading (e.g., thermometer temp spikes, thermal scanning spikes, increased absenteeism) and lagging indicators (e.g., staff health visits above pre-defined rate, community spread in retailer locale)
d. Post a contact email address and/or telephone number for employees /customers to contact if they have questions or concerns
e. **If faced with infection, must immediately report number of infected, timing of infection and proposed remediation plan to relevant local authorities. All staff must be tested, deep sanitization of workplace must be conducted, and entire office building including non-affected offices must be closed until all common areas are sanitized.**

Specific Industry Group Protocols

For each of the following industries, a group of community members came together to work with medical experts and our county staff to develop proposed protocols for reopening in their industries. The community members represented a broad spectrum of businesses that ranged in size from very small to some of our largest employers. Discussions were lively and informed by best practices and a wealth of industry experience. These protocols were further reviewed by industry experts taking into account international experience and best practices as different jurisdictions have moved through the phases of the COVID19 pandemic.

The protocols for each group are organized similarly and a timeline follows each to illustrate where in the continuum of moving to the new normal the proposed protocols fall. These guidelines are categorized by workforce protection measures, employee protection measures, non-employee (or customer) protection measures, business process adaptations, employer-led public health interventions and industry-wide safeguards. For the specific industries listed below, in addition to the guidelines included, all industries must follow the guidelines on page 21 Just as with the general guidelines, this list is not intended to be all-inclusive, but rather examples of actions to be taken so that you may protect your employees and your customers. If a particular commercial establishment supports multiple business lines, only those permitted to operate may be opened in any particular phase. You may wish to enforce more stringent guidelines or procedures.

Retail Establishments (including Small Businesses)

I. Workforce protection

a. Assess employee assignments based on risk profiles (vulnerable populations)

b. **Enable single point of entrance**

c. **Facial coverings must be worn inside a retail establishment**

d. **Install hand sanitizing dispensers or make sanitizer available at entrances and in common areas**

e. Establish sign-in stations or check points for employees with health questionnaire on symptoms

f. Encourage employees to self-identify and report symptoms; quarantine employees for 14 days if flu-like symptoms are exhibited

g. Institute staggered breaks in order to discourage large group gathering

II. Employee protection

a. **Space out customer queues for fitting rooms and at cashiers with floor markers (every 6 ft);** adopt virtual waiting area / queue where feasible

b. Ensure commercial / delivery drivers' access is limited to receiving area and minimize interactions with staff; exclude any interactions with frontline personnel

c. Installation of plexiglass sneeze guards and moving of pin pads to facilitate social distancing at checkout stations

d. **Procure appropriate amounts of soap, hand sanitizer, cleaning materials and protection equipment (masks, gloves)**

III. Non-Employee Protection

a. **Limit the number of staff and customers to a maximum of 50 percent of mall/store occupancy**

b. **Place signs outside and inside the elevators to limit capacity to 4 passengers, with visual markers for passengers to stand on.** Signs should encourage people to take the stairs where appropriate and offer preferential treatment elderly, persons with disabilities, pregnant women, and families with small children

c. **Merchandise, particularly clothing, must not be handled or tried on my customers and returned to shelves or display racks before being properly cleaned**

d. **Cart and basket handles must be sanitized between uses**

e. **Eliminate car valet services**

f. Adapt curbside locations to be available in shopping center parking lots and throughout mall surface lots to accommodate pick-up

g. Set specific shopping hours for vulnerable groups (elderly, persons with disabilities, pregnant women)

IV. Business Process Adaptions

a. **Mark with arrows entry and exit points, creating one-way circulation paths inside stores**
b. Remove public seating areas, if possible, and enforce distancing through signaling
c. **Flush plumbing and run water in sinks to eliminate stagnant water from the period of mall/store's closure**
d. Change and/or upgrade mall/store HVAC filters (per OSHA guidance)
e. Encourage adoption of contactless payment mechanisms (e.g., credit cards)
f. Install 'physical buffers' to handle shopping items (e.g. 1 or more tables between customer and cashier for loading, checkout and bagging of items)

V. Employer-led Public Health Interventions

a. **Train all personnel in new operating protocols and modifications to existing codes of conduct to deal with Covid-19 issues**
b. **Post CDC signage in publicly trafficked locations emphasizing measures to "Stop the Spread of Germs" (CDC) and exercise social responsibility (e.g., hygiene)**
c. Design work group shifts to ensure easier tracking and tracing
d. Encourage use of contactless thermometer for daily employee check in monitoring of temperatures
e. Evaluate the need for testing program for high risk employees (e.g., frequent contact with customers or suppliers)

VI. Industry-Wide Safeguards

a. Malls and stores must indicate how much "lead time" each needs to be ready to re-open
b. Acknowledge in writing the review and understanding of relevant industry association and union organizations guidelines, including capability checklists and reference to WHO, DOH and CDC guidelines
c. Establish and employ protocol to immediately disclose infection to state DOH bodies and procedure to safeguard store (e.g., deep cleaning.
d. Establish and employ clear reporting protocols based on leading (e.g., thermometer temp spikes, thermal scanning spikes, increased absenteeism) and lagging indicators (e.g., staff health visits above pre-defined rate, community spread in retailer locale)
e. **Stores/malls shall post a contact email address and/or telephone number for customers**

Additional considerations for Personal Grooming Stores

I. Workforce Protection
   a. **Within the shop, a minimum of six feet (6') distance between customers, except for families residing at that same dwelling**
   b. **Capacity limited to 10 individuals (employees and customers) or 25% of building occupancy as required by law, whichever is smaller at any one time**
   c. As possible, install plexiglass barrier between salon chairs
   d. **Only the customers receiving the service may enter the shop (except for a parent or guardian accompanying a minor)**
   e. **All services require an appointment; appointments must be recorded for tracking purposes and for the notification of others that may have been present in the shop, if a positive COVID-19 case is reported**
      i. **Customers must wait outside of the business (practicing social distancing) or in their cars until they are called for their appointment**
      ii. **A paging system may be utilized similar to what restaurants use, so that customers do not congregate outside of or around the shop**
      iii. **Walk-ins are prohibited**

II. Employee protection
   a. **Employees to wear masks and gloves at all times,** the use of face shields is strongly encouraged
   b. **Employees must not share tools**
   c. **Hairdressers have to wear single-use aprons**
   d. **Any face to face service requires a face shield being worn by the groomer/ stylist (e.g., beard/mustache, eyelashes, eyebrow, facial)**

III. Non-employee Protection
   a. **Customers to wear face masks (coverings may be removed for a short time when necessary to perform face services as instructed by groomer/stylist)**
   b. Provide customers with disinfection spray to apply on entry/exit

IV. Business Process Adaptations
   a. **Cleaning and disinfecting agents must be EPA registered and labeled as bactericidal, virucidal and fungicidal**
      i. **Reception and Retail Area**
         1. **Discard old magazines and other non-essential items in the waiting area that cannot be disinfected**
         2. **Wipe down all soft surfaces (couches, chairs) with water and a clean towel**
         3. **Clean and disinfect all hard, non-porous surfaces such reception counter, computer keyboard, phones, door handles, light switches and point of sale equipment**
         4. **Clean and disinfect all shelving, glass and display cases; keep product containers clean and dust free**
         5. **Place signage in window to notify customers of your diligence in practicing proper infection control**

ii. **Workstations – this must be performed after each service(s) provided to the customer**
    1. **Clean and disinfect all non-porous implements used in your services (immersion, spray or wipe)**
    2. **Store properly disinfected implements in closed containers**
    3. **Clean and disinfect all electrical implements used in your services**
    4. **Clean and disinfect chairs and headrests; consider barrier methods on chairs such as disposable paper drapes or towels that can be laundered after each client**
    5. **Clean and disinfect workstation, rolling cards, drawers and any containers used for storage**
    6. **Ensure that single use porous items are new**
    7. **All items on a nail station must either be new, never used, or cleaned and disinfected (stored in a closed container until ready to use)**

iii. **Treatment Rooms/Laundry/Shampoo Bowls/Pedicure Bowls**
    1. **Clean and disinfect any appliances used**
    2. **Clean and disinfect treatment tables**
    3. **Ensure all single use items are new**
    4. **Empty wax pots, completely clean and disinfect, and refill with new wax**
    5. **Any used linens, must be washed and dried on the HOT temperature setting**
    6. **All clean linens must be stored in closed covered cabinets**
    7. **Launder (porous) or disinfect (non-porous) all capes**
    8. **Clean and disinfect all shampoo bowls, handles, hoses, spray nozzles and shampoo chairs after each use**
    9. **Clean and disinfect pedicure bowls after each use**

b. **Washing hair before a cut is compulsory**
c. Encourage paperless transactions and offer to email receipts if possible
d. **All staff must wash hands before and after each service; if possible, it is recommended to wash hands in front the customer**

Workforce protection	a. Assess employee assignments based on risk profiles (vulnerable populations)		
	b. Enable single point of entrance		
	c. Install hand sanitizing dispensers or make sanitizer available at entrances and in common areas		
	d. Establish sign-in stations or check points for employees with health questionnaire on symptoms		
	e. Encourage employees to self-identify and report symptoms; quarantine employees for 14 days if flu-like symptoms are exhibited		
	f. Institute staggered breaks in order to discourage large group gathering		
Employee Protection	a. Space out customer queues for fitting rooms and at cashiers with floor markers (every 6 ft); adopt virtual waiting area / queue where feasible		
	b. Ensure commercial / delivery drivers' access is limited to receiving area and minimize interactions with staff; exclude any interactions with frontline personnel		
	c. Installation of plexiglass sneeze guards and moving of pin pads to facilitate social distancing at checkout stations		
	d. Procure appropriate amounts of soap, hand sanitizer, cleaning materials and protection equipment (masks, gloves)		
Non-employee Protection	a. Place signs outside and inside the elevators to limit capacity to 4 passengers, with visual markers for passengers to stand on. Signs should encourage people to take the stairs where appropriate and offer preferential treatment elderly, persons with disabilities,		
	b. Eliminate car valet services		
	c. Adapt curbside locations to be available in shopping center parking lots and throughout mall surface lots to accommodate pick-up		
	d. Set specific shopping hours for vulnerable groups (elderly, persons with disabilities, pregnant women)		
Business Process adaptations	a. Mark with arrows entry and exit points, creating one-way circulation paths inside stores		
	b. Remove public seating areas, if possible, and enforce distancing through signaling		
	c. Flush plumbing and run water in sinks to eliminate stagnant water from the period of mall/store's closure		
	d. Change and/or upgrade mall/store HVAC filters (per OSHA guidance)		
	e. Encourage adoption of contactless payment mechanisms (e.g., credit cards)		
	f. Install 'physical buffers' to handle shopping items (e.g. 1 or more tables between customer and cashier for loading, checkout and bagging of items)		
Employer-led public health interventions	a. Train all personnel in new operating protocols and modifications to existing codes of conduct to deal with Covid-19 issues		
	b. Post CDC signage in publicly trafficked locations emphasizing measures to "Stop the Spread of Germs" (CDC) and exercise social responsibility (e.g., hygiene)		
	c. Design work group shifts to ensure easier tracking and tracing		
	d. Encourage use of contactless thermometer for daily employee check in monitoring of temperatures		
	e. Evaluate the need for testing program for high risk employees (e.g., frequent contact with customers or suppliers)		
Industry-wide safeguards	a. Malls and stores must indicate how much "lead time" each needs to be ready to re-open		
	b. Acknowledge in writing the review and understanding of relevant industry association and union organizations guidelines, including capability checklists and reference to WHO, DOH and CDC guidelines		
	c. Establish and employ protocol to immediately disclose infection to state DOH bodies and procedure to safeguard store (e.g., deep cleaning.		
	d. Establish and employ clear reporting protocols based on leading (e.g., thermometer temp spikes, thermal scanning spikes, increased absenteeism) and lagging indicators (e.g., staff health visits above pre-defined rate, community spread in retailer locale)		
	e. Stores/Malls shall post a contact email address and/or telephone number for customers		

Arts & Culture (includes non-profit museums and public gardens)

I. Workforce Protection
   a. **Install hand sanitizing stations at entrances and in common areas**
   b. Establish sign-in stations or check points for employees with health questionnaire on symptoms
   c. Encourage employees to self-identify and report symptoms

II. Employee Protection
   a. **Space out customer queues venue entry and at ticketing booths with floor markers (every 6 ft); adopt virtual waiting area / queue where feasible**
   b. Install Plexiglass barriers between cashier and customer
   c. Upgrade turnstiles to touchless ticket scanning
   d. **Procure appropriate amounts of soap, hand sanitizer, cleaning materials and protection equipment (masks, gloves)**

III. Non-employee Protection
   a. **Place signs outside and inside the elevators to limit capacity to 4 passengers, with visual markers for passengers to stand on.** Signs should encourage people to take the stairs where appropriate and offer preferential treatment to vulnerable groups (e.g., elderly, persons with disabilities, pregnant women, and families with small children)
   b. **Eliminate car valet**
   c. Set dedicated visiting hours or special events for vulnerable groups (e.g., elderly, persons with disabilities and pregnant women

IV. Business Process Adaptations
   a. **Mark with arrows entry and exit points, creating one-way circulation paths inside venue when possible; otherwise, enforce distancing by posting signs indicating 6' separation**
   b. Remove public seating areas, if possible – else, enforce distancing through signaling
   c. **Flush plumbing and run water in sinks to eliminate stagnant water from the period of facility closure**
   d. Change and/or upgrade HVAC filters (per OSHA guidance)
   e. Enable website to support: (i) online payment of tickets, and (ii) questionnaire for visitors
   f. **Suspend group tours and group programming; implement circulation control measures to support social distancing**
   g. **Eliminate the use of interactive exhibits**
   h. Establish special hours for members, senior citizens, individuals identifying health issues

V. Employer-led public health interventions
   a. Train all personnel in new operating protocols and modifications to existing codes of conduct to deal with Covid-19 issues

b. **Post CDC signage in publicly trafficked locations emphasizing measures to "Stop the Spread of Germs" (CDC) and exercise social responsibility (e.g., hygiene)**
c. Design work group shifts to ensure easier tracking and tracing
d. Encourage use of contactless thermometer for daily employee check in monitoring of temperatures
e. Design testing program for high risk employees (e.g., frequent contact with customers or suppliers) to be tested every 2 weeks

VI. Industry-wide safeguard
a. Acknowledge in writing the review and understanding of relevant industry association and union organizations guidelines, including capability checklists and reference to WHO, DOH and CDC guidelines
b. Establish protocol to immediately disclose infection to state DOH bodies and procedure to safeguard facility (e.g., deep cleaning)
c. Establish and employ clear reporting protocols based on leading (e.g., thermometer temp spikes, thermal scanning spikes, increased absenteeism) and lagging indicators (e.g., staff health visits above pre-defined rate, community spread in retailer locale)
d. **Post a contact email address and/or telephone number for customers to contact if they have questions or concerns**

Workforce protection	a. Install hand sanitizing stations at entrances and in common areas		
	b. Establish sign-in stations or check points for employees with health questionnaire on symptoms		
	c. Encourage employees to self-identify and report symptoms		
Employee Protection	a. Space out customer queues venue entry and at ticketing booths with floor markers (every 6 ft); adopt virtual waiting area / queue where feasible		
	b. Install Plexiglass barriers between cashier and customer		
	c. Upgrade turnstiles to touchless ticket scanning		
	d. Procure appropriate amounts of soap, hand sanitizer, cleaning materials and protection equipment (masks, gloves)		
Non-employee Protection	a. Place signs outside and inside the elevators to limit capacity to 4 passengers, with visual markers for passengers to stand on. Signs should encourage people to take the stairs where appropriate and offer preferential treatment to vulnerable groups (e.g., elderly, persons with disabilities, pregnant women, and families with small children)		
	b. Eliminate car valet		
	c. Set dedicated visiting hours or special events for vulnerable groups (e.g., elderly, persons with disabilities and pregnant women		
Business Process adaptations	a. Mark with arrows entry and exit points, creating one-way circulation paths inside venue when possible; otherwise, enforce distancing by posting signs indicating 6' separation		
	b. Remove public seating areas, if possible – else, enforce distancing through signaling		
	c. Flush plumbing and run water in sinks to eliminate stagnant water from the period of facility closure		
	d. Change and/or upgrade HVAC filters (per OSHA guidance)		
	e. Enable website to support: (i) online payment of tickets, and (ii) questionnaire for visitors		
	f. Suspend group tours and group programming; implement circulation control measures to support social distancing		
	g. Eliminate the use of interactive exhibits		
Employer-led public health interventions	a. Train all personnel in new operating protocols and modifications to existing codes of conduct to deal with Covid-19 issues		
	b. Post CDC signage in publicly trafficked locations emphasizing measures to "Stop the Spread of Germs" (CDC) and exercise social responsibility (e.g., hygiene)		
	c. Design work group shifts to ensure easier tracking and tracing		
	d. Encourage use of contactless thermometer for daily employee check in monitoring of temperatures		
	e. Design testing program for high risk employees (e.g., frequent contact with customers or suppliers) to be tested every 2 weeks		
Industry-wide safeguards	a. Acknowledge in writing the review and understanding of relevant industry association and union organizations guidelines, including capability checklists and reference to WHO, DOH and CDC guidelines		
	b. Establish and employ protocol to immediately disclose infection to state DOH bodies and procedure to safeguard facility (e.g., deep cleaning)		
	c. Establish and employ clear reporting protocols based on leading (e.g., thermometer temp spikes, thermal scanning spikes, increased absenteeism) and lagging indicators (e.g., staff health visits above pre-defined rate, community spread in retailer locale)		
	d. Post a contact email address and/or telephone number for customers to contact if they have questions or concerns		

Manufacturing

I. Workforce Protection
   a. **Create a single point of access for employees**, and if necessary, a separate single point of access for visitors
   b. Establish sign-in stations or check points restricting access to employee workstations / production areas
   c. Ensure controlled measures to minimize visitor/contractor access to facility when entering property (escorted, PPE requirements)
   d. Consider 2-step inventory model
      i. Designated space for warehousing new inbound inventory, quarantined for 24 hours
      ii. Move inventory after 24 hours into "safe for use" warehousing space for use by facility

II. Employee Protection
   a. **Procure increased amounts of soap, hand sanitizer, cleaning materials and equipment**
   b. **Install of additional hand sanitization and soaps in toilets and common areas**
   c. **Post promotional signage around hand washing and other best healthy hygiene practices**
   d. Either eliminate timeclocks, sanitize timeclocks after each employee use, or use electronic solutions to avoid touch points
   e. Apply copper tape onto high-touch surfaces that can't be avoided
   f. Create operating "pods" (~2 employees per pod) in a production line, divided by physical barriers
   g. Air-gap connected workspaces, if possible, with a "clean room" to allow employees to sanitize

III. Non-employee Protection
   a. **Place signs outside and inside the elevators to limit number of people within elevator (1 person per at a time or at 50% capacity)**; offer preferential treatment to vulnerable groups (e.g., elderly, persons with disabilities, pregnant women)

IV. Business Process Adaptations
   a. Divided critical function teams with groups alternating work in-office or using satellite sites
   b. Digitize shift handovers and group discussions within facility
   c. **Reduce seating in breakroom / common areas to ensure minimum 6' physical distance**
   d. Designate quarantine rooms for potentially infected individuals and deep-clean after each use

e. **Mark common areas with physical markers to reinforce compliance with measures (e.g., 6 ft separation in queues)**
f. Upgrade/Install ventilation per OSHA guidance
g. **Flush plumbing to eliminate stagnant water and monitor water systems in the facility**

V. Employer-led public health interventions
a. **Train all personnel in new operating protocols and modifications to existing codes of conduct to deal with COVID-19 issues**
b. Design work group shifts to ensure easier tracking and tracing
c. Evaluate the need for testing program for high risk employees (e.g., frequent contact with customers or suppliers)

VI. Industry- Wide Safeguards
a. Acknowledge in writing the review and understanding of relevant industry association and union organizations guidelines, including capability checklists and reference to WHO, DOH and CDC guidelines
b. **Establish protocol to immediately disclose infection to state DOH bodies and procedure to safeguard store (e.g., deep cleaning)**

Workforce protection	a. Create a single point of access for employees, and if necessary, a separate single point of access for visitors		
	b. Establish sign-in stations or check points restricting access to employee workstations / production areas		
	c. Ensure controlled measures to minimize visitor/contractor access to facility when entering property (escorted, PPE requirements)		
	d. Consider 2-step inventory model		
Employee Protection	a. Procure increased amounts of soap, hand sanitizer, cleaning materials and equipment		
	b. Install additional hand sanitization and soaps in toilets and common areas		
	c. Post promotional signage around hand washing and other best healthy hygiene practices		
	d. Either eliminate timeclocks, sanitize timeclocks after each employee use, or use electronic solutions to avoid touch points		
	e. Apply copper tape onto high-touch surfaces that can't be avoided		
	f. Create operating "pods" (~2 employees per pod) in a production line, divided by physical barriers		
	g. Air-gap connected workspaces, if possible, with a "clean room" to allow employees to sanitize		
Non-employee Protection	a. Place signs outside and inside the elevators to limit number of people within elevator (1 person per at a time or at 50% capacity); offer preferential treatment to vulnerable groups (e.g., elderly, persons with disabilities, pregnant women)		
Business Process adaptations	a. Divided critical function teams with groups alternating work in-office or using satellite sites		
	b. Digitize shift handovers and group discussions within facility		
	c. Reduce seating in breakroom / common areas to ensure minimum 6' physical distance		
	d. Designate quarantine rooms for potentially infected individuals and deep-clean after each use		
	e. Mark common areas with physical markers to reinforce compliance with measures (e.g., 6 ft separation in queues)		
	f. Upgrade/Install ventilation per OSHA guidance		
	g. Flush plumbing to eliminate stagnant water and monitor water systems in the facility		
Employer-led public health interventions	a. Train all personnel in new operating protocols and modifications to existing codes of conduct to deal with COVID-19 issues		
	b. Design work group shifts to ensure easier tracking and tracing		
	c. Evaluate the need for testing program for high risk employees (e.g., frequent contact with customers or suppliers)		
Industry-wide safeguards	a. Acknowledge in writing the review and understanding of relevant industry association and union organizations guidelines, including capability checklists and reference to WHO, DOH and CDC guidelines		
	b. Establish protocol to immediately disclose infection to state DOH bodies and procedure to safeguard store (e.g., deep cleaning)		

Office Space and Shopping Centers

I. Workforce Protection
   a. Prepare basic hygiene protocols to re-open areas that haven't been operated for a long time (HVAC filters, check for mold, flush plumbing and run water in sinks to eliminate stagnant water)
   b. **Install hand sanitizing stations at entrances and in common areas**

II. Employee Protection
   a. **All visitors and tenants must sanitize hands at time of building entry and wear facial coverings while in the building**
   b. **Offices with cubicles or open space designs must establish the minimum 6 feet of social distancing required; or install physical barriers between workstations (e.g., plexiglass partitions) to ensure distancing**
   c. **Procure increased amounts of soap, hand sanitizer, cleaning materials and equipment**
   d. **Call centers with multiple employees utilizing the same consoles must establish alpha/bravo shifts and clean and sanitize equipment between shifts**
   e. To the extent possible, offices should stagger arrival times of employees, alternate employees coming to the office and encourage teleworking and digital communication

III. Non-employee Protection
   a. **All visitors and tenants must sanitize hands at time of building entry.**
   b. **Place signs outside and inside the elevators and other common areas (e.g., restrooms, breakrooms) to summarize key messages: restrictions to capacity, distancing, use of facemasks**
   c. **For medical offices, create separate entrances for those with medical issues**
   d. **Play areas and gyms must be closed until such areas are open via Emergency Order declaration**

IV. Business Process Adaptations
   a. **Install CDC signage located at the entry, lobby/waiting area, elevators, escalators, restrooms, tenant entrances mandating social distancing and proper hand washing/sanitizing, over communicate the protocols throughout the building common areas**
   b. **Install visual/physical markings on floor and areas to accomplish distancing, arrange waiting areas to allow for proper social distancing (e.g., for check-in and elevators)**
   c. Distinguish between different types of buildings to determine occupancy, using space calculator to help ensure proper social distance while at desks. (e.g., go from 1 person per every 150 SF/change to 1 person per every 350 SF)
   d. When possible, require tenants come to lobby to accept deliveries to limit use of elevators and stairs by visitors; establish a drop area for packages so that they may be disinfected and/or left undisturbed overnight before being handled

e. **All building tenants and visitors must wear facial coverings while in the building**
f. **Limit use of common conference rooms, lunch rooms and other common areas or schedule use to reduce gathering of large numbers of tenants or visitors**

V. Employer-led public health interventions
   a. Adjust ventilation per OSHA guidance

VI. Industry-wide safeguards
   a. Setup clear protocols based on Leading indicators (e.g., Thermometer temp spikes, thermal scanning spikes, increased absenteeism) and Lagging indicators (e.g., Staff health visits above pre-defined rate, community spread in retailer locale)
   b. **Clean and sanitize all high touch surfaces in common areas, including railings, seats, ATMs, kiosks and elevator buttons every two to three hours; discontinue use of common drinking fountains**

Workforce protection	a. Prepare basic hygiene protocols to re-open areas that haven't been operated for a long time (HVAC filters, check for mold, flush plumbing and run water in sinks to eliminate stagnant water)		
	b. Install hand sanitizing stations at entrances and in common areas		
Employee Protection	a. All visitors and tenants must sanitize hands at time of building entry and wear facial coverings while in the building		
	b. Offices with cubicles or open space designs must establish the minimum 6 feet of social distancing required; or install physical barriers between workstations (e.g., plexiglass partitions) to ensure distancing		
	c. Procure increased amounts of soap, hand sanitizer, cleaning materials and equipment		
	d. Call centers with multiple employees utilizing the same consoles must establish alpha/bravo shifts and clean and sanitize equipment between shifts		
	e. To the extent possible, offices should stagger arrival times of employees, alternate employees coming to the office and encourage teleworking and digital communication		
Non-employee Protection	a. All visitors and tenants must sanitize hands at time of building entry.		
	b. Place signs outside and inside the elevators and other common areas (e.g., restrooms, breakrooms) to summarize key messages: restrictions to capacity, distancing, use of facemasks		
	c. For medical offices, create separate entrances for those with medical issues		
	d. Play areas and gyms should be closed until such areas are open via Emergency Order declaration		
Business Process adaptations	a. Install CDC signage located at the entry, lobby/waiting area, elevators, escalators, restrooms, tenant entrances mandating social distancing and proper hand washing/sanitizing, over communicate the protocols throughout the building common areas		
	b. Install visual/physical markings on floor and areas to accomplish distancing, arrange waiting areas to allow for proper social distancing (e.g., for check-in and elevators)		
	c. Distinguish between different types of buildings to determine occupancy, using space calculator to help ensure proper social distance while at desks. (e.g., go from 1 person per every 150 SF/change to 1 person per every 350 SF)		
	d. When possible, require tenants come to lobby to accept deliveries to limit use of elevators and stairs by visitors; establish a drop area for packages so that they may be disinfected and/or left undisturbed overnight before being handled		
	e. All building tenants and visitors must wear facial coverings while in the building		
	f. Limit use of common conference rooms, lunch rooms and other common areas or schedule use to reduce gathering of large numbers of tenants or visitors		
Employer-led public health interventions	a. Adjust ventilation per OSHA guidance		
Industry-wide safeguards	a. Setup clear protocols based on Leading indicators (e.g., Thermometer temp spikes, thermal scanning spikes, increased absenteeism) and Lagging indicators (e.g., Staff health visits above pre-defined rate, community spread in retailer locale)		
	b. Clean and sanitize all high touch surfaces in common areas, including railings, seats, ATMs, kiosks and elevator buttons every two to three hours; discontinue use of common drinking fountains		

Warehousing/Trade and Logistics

I. Workforce Protection
   a. **Install hand sanitizing dispensers or make sanitizer available at entrances and in common areas**
   b. Establish sign-in stations or check points for employees with health questionnaire on symptoms
   c. Encourage employees to self-identify and report symptoms before returning to work
   d. **Perform deep disinfection of stored goods between shifts (i.e., mechanical sprayer / thermal foggers)**

II. Employee Protection
   a. **Ensure enough masks available for all employees that are in contact with other people (including office workers, warehouse workers unable to social distance, and customer facing shipping and delivery workers), as well as sufficient quantities of soap, hand sanitizer, gloves as necessary**
   b. Have employees plan on working remotely when and where possible, and encourage employees to stay home if sick or caring for a family member
   c. **Acquire uniforms to supply employees with enough uniforms to be able to wear a clean uniform each shift**
   d. Restructure shifts, reducing overlap and staggering break times to ensure social distancing once employees return
   e. **Barriers between all workstations**
   f. Divide critical function teams with groups alternating work in-office or using satellite sites

III. Non-employee Protection
   a. **Place signs notifying visitors, other non-employees of strict PPE requirements (i.e., masks for all visitors); ensure signs are posted in multiple languages**
      (English, Spanish, Creole)
   b. Use supplier and customer networks to inform non-employees of new safeguarding protocols
   c. Streamline visiting process and communicate to employees, including no-contact warehouse pickups and no in-person supplier/distributor meetings

IV. Business Process adaptations
   a. **Mark with arrows entry and exit points, creating one-way circulation paths inside warehouses**
   b. Ensure acquisition of enough equipment to be able to limit workers from sharing; institute policies to sanitize equipment where sharing of equipment is unavoidable
   c. Institute protocols for touchless paperwork, including acquiring tablet computers, or setting guidelines for employees to use their own emails or mobile phones if necessary
   d. Change and/or upgrade site HVAC filters (per OSHA guidance)

e. Remove public seating areas, if possible, and enforce distancing through signaling
f. Acquire necessary technology to enable adoption of contactless payment mechanisms (e.g., credit cards) for delivery and drop-offs

V. Employer-led public health interventions
a. **Establish trainings for all personnel in new operating protocols and modifications to existing codes of conduct to deal with Covid-19 issues**
b. **Post CDC signage in publicly trafficked locations emphasizing measures to "Stop the Spread of Germs" (CDC) and exercise social responsibility (e.g., hygiene)**
c. Design work group shifts to ensure easier tracking and tracing, and design no-overlap shifts
d. Acquire contactless (or regular, with heavy sanitization protocols) thermometers for daily employee check in monitoring of temperatures
e. Evaluate the need for testing program for high risk employees (e.g., frequent contact with customers or suppliers; travel between sites; direct contact delivery)

VI. Industry-wide safeguards
a. **Clean and disinfect multi-touch equipment like handgrips carts, steering wheels, pallet trucks, etc. every time a user changes and after each shift**
b. **Wash hands or use hand sanitizer between deliveries** and utilize alternative delivery options to minimize personal contact (i.e. pick up and drop off locations) and touchless paperwork and confirmations
c. Acknowledge in writing the review and understanding of relevant industry association and union organizations guidelines, including capability checklists and reference to WHO, DOH and CDC guidelines
d. **Establish protocol to immediately disclose infection to state DOH bodies and procedure to safeguard store (e.g., deep cleaning)**
e. Setup clear reporting protocols based on leading (e.g., thermometer temp spikes, thermal scanning spikes, increased absenteeism) and lagging indicators (e.g., staff health visits above pre-defined rate, community spread in retailer locale)

Workforce protection	a. Install hand sanitizing dispensers or make sanitizer available at entrances and in common areas		
	b. Establish sign-in stations or check points for employees with health questionnaire on symptoms		
	c. Encourage employees to self-identify and report symptoms before returning to work		
	d. Perform deep disinfection of stored goods between shifts (i.e., mechanical sprayer / thermal foggers)		
Employee Protection	a. Ensure enough masks available for all employees that are in contact with other people (including office workers, warehouse workers unable to social distance, and customer facing shipping and delivery workers), as well as sufficient quantities of soap, hand sanitizer, gloves as necessary		
	b. Have employees plan on working remotely when and where possible, and encourage employees to stay home if sick or caring for a family member		
	c. Acquire uniforms to supply employees with enough uniforms to be able to wear a clean uniform each shift		
	d. Restructure shifts, reducing overlap and staggering break times to ensure social distancing once employees return		
	e. Barriers between all workstations		
	f. Divide critical function teams with groups alternating work in-office or using satellite sites		
Non-employee Protection	a. Place signs notifying visitors, other non-employees of strict PPE requirements (i.e., masks for all visitors); ensure signs are posted in multiple languages (English, Spanish, Creole)		
	b. Use supplier and customer networks to inform non-employees of new safeguarding protocols		
	c. Streamline visiting process and communicate to employees, including no-contact warehouse pickups and no in-person		
Business Process adaptations	a. Mark with arrows entry and exit points, creating one-way circulation paths inside warehouses		
	b. Ensure acquisition of enough equipment to be able to limit workers from sharing; institute policies to sanitize equipment where sharing of equipment is unavoidable		
	c. Institute protocols for touchless paperwork, including acquiring tablet computers, or setting guidelines for employees to use their own emails or mobile phones if necessary		
	d. Change and/or upgrade site HVAC filters (per OSHA guidance)		
	e. Remove public seating areas, if possible, and enforce distancing through signaling		
	f. Acquire necessary technology to enable adoption of contactless payment mechanisms (e.g., credit cards) for delivery and drop-offs		
Employer-led public health interventions	a. Establish trainings for all personnel in new operating protocols and modifications to existing codes of conduct to deal with Covid-19 issues		
	b. Post CDC signage in publicly trafficked locations emphasizing measures to “Stop the Spread of Germs” (CDC) and exercise social responsibility (e.g., hygiene)		
	c. Design work group shifts to ensure easier tracking and tracing, and design no-overlap shifts		
	d. Acquire contactless (or regular, with heavy sanitization protocols) thermometers for daily employee check in monitoring of temperatures		
	e. Evaluate the need for testing program for high risk employees (e.g., frequent contact with customers or suppliers; travel between sites; direct contact delivery)		
Industry-wide safeguards	a. Clean and disinfect multi-touch equipment like handgrips carts, steering wheels, pallet trucks, etc. every time a user changes and after each shift		
	b. Wash hands or use hand sanitizer between deliveries and utilize alternative delivery options to minimize personal contact (i.e. pick up and drop off locations) and touchless paperwork and confirmations		
	c. Acknowledge in writing the review and understanding of relevant industry association and union organizations guidelines, including capability checklists and reference to WHO, DOH and CDC guidelines		
	d. Establish protocol to immediately disclose infection to state DOH bodies and procedure to safeguard store (e.g., deep cleaning)		
	e. Setup clear reporting protocols based on leading (e.g., thermometer temp spikes, thermal scanning spikes, increased absenteeism) and lagging indicators (e.g., staff health visits above pre-defined rate, community spread in retailer locale)		

Specialized Protocols

For each of the following categories, a group of experienced industry professionals came together to work with medical experts and our county staff to develop proposed protocols for reopening in these specialized areas: restaurants (dining in), hotels and accommodations and pools. In each of these areas, discussions were lengthy, in order to fully consider the broad and unique challenges that must be addressed. Again, these proposed protocols are informed by best practices and a wealth of experience. These protocols were further reviewed by medical and industry experts taking into account international experience and best practices as different jurisdictions have moved through the phases of the COVID19 pandemic. You may wish to enforce more stringent guidelines or procedures.

Restaurants

Dining establishments in Miami-Dade must follow these protocols to ensure a responsible opening and prioritizes the health, safety, and well-being of both patrons and staff. It applies to any legally established indoor and/or outdoor dining use. It shall remain the responsibility of the restaurants to comply with all applicable laws, including the Americans with Disabilities Act.

Recommendations are in conformance with the Centers for Disease Control and Prevention (CDC), World Health Organization, and the Florida Department of Health guidelines. Revisions may be recommended when advisable based on future health indicators.

Facility Preparation

- Before re-opening, plumbing **must** be flushed to eliminate stagnant water from the period of closure (see CDC guidelines: https://www.cdc.gov/coronavirus/2019-ncov/php/building-water-system.html).
- **Must** change and/or upgrade restaurant HVAC filters as necessary to maximize fresh air (using the maximum filtration for the design of the ventilation system) and increase outdoor airflow rates where possible. Filters should be changed regularly.
    - Install high-efficiency air filters and HVAC systems.*
    - In addition to HEPA filtration, install Ultraviolet Germicidal Irradiation (UVGI) in small common areas that cannot be adequately ventilated.*

  *The CDC recommendations for both of these measures are available at https://www.cdc.gov/infectioncontrol/guidelines/environmental/background/air.html#table6

- **Must** develop and implement plans as appropriate to address any parking garage or other facility access points leading to restaurant entrances (e.g., limiting capacity in elevators; sanitizing elevator touchpoints; cleaning stairway handrails; frequent cleaning or suspending the use of parking payment machines and alternatives for valet parking arrangements (valet must be avoided in the first phase*); etc.). These plans must be available for review and inspection.

  *Where parking is available, guests who arrive in their own cars will self-park. Valet will not be an option where onsite parking is available. Where parking is unavailable, valet may be utilized. Valet operator will step away 6 feet after opening car door (visual markers should be placed on the ground to assist). After parking, vehicle operator will switch or sanitize gloves prior to servicing the next vehicle**.**

- **Must** have self-dispensing hand sanitizer or handwashing station at the entrance to the restaurant.
- Trash bins with lids that open without the need to touch the lids **must** be placed and available for use to staff and guests in all entrance areas.
- **Must** put in place a disposal plan for safe handling and dispensing of used PPEs in restaurants and relevant exterior areas (e.g. use designated solid waste bags that are double-bagged and securely sealed).

- Health & safety signage/visual aids with messaging similar to that appended to this document **must** be posted for customers and staff with easy visibility to all intended audiences. Signage should promote hand hygiene and physical distancing and request customers not to enter the restaurant if they are unwell or have COVID-19 symptoms; Translate into all relevant languages.
- All restaurants **must** create visible floor markings for appropriate 6-foot distancing for each party in any waiting areas, whether exterior or interior.
- Distinct areas **must** be created for customer waiting, order pickup/take out and any third-party delivery services.
- **Must** Introduce plexiglass barriers at tills and counters as an additional level of protection for staff.
- All playgrounds **must** remain closed until Emergency Orders are lifted.

Operational Preparations

Supervisory Procedures

A team consisting of the heads of each restaurant's internal operational units **must** be convened to evaluate the health status of restaurant staff prior to opening for business and on an ongoing basis as described below:

- Records **must** be kept documenting:
  - Any unusual rise in worker absenteeism, especially those related to respiratory infections.
  - Numbers of staff that test positive for the virus and follow an established protocol* for managing the consequences resulting from each positive individual.
  - This documentation **must** include **Closing Procedures in Case of Exposure**. Restaurants **must** have ready procedures to quickly mobilize to shut down the restaurant, notify all staff and execute deep cleaning protocols per CDC guidelines.**
  - Lessons learned each day and corrective actions and policies implemented.
- The team will maintain:
  - Communication with managers of different units within the restaurant (Cooking staff, waiters, busboys, hosts, and if relevant, valet service members (valet service should be avoided for the first phase).
  - Contact information on staff, including emergency telephone numbers (ideally cell phone numbers) and e-mail addresses.
  - Physical or Electronic Logbook of actions, measures, and improvements implemented.
  - Physical or Electronic Logbook of training of staff including date of training, type of training noting the amount of time of training, and continuing training.
- An individual **must** be assigned each shift to monitor and supervise the food, equipment, procedures, and management of the health and safety measures for restaurant guests and staff. Cleaning Task Checklists **must** be created and used daily to ensure enhanced cleaning and sanitizing procedures are uniformly followed by each shift. An individual **must** be specifically assigned within the kitchen to monitor incidents of close contact as defined in the below under "Employee Social Distancing."

- Regular announcements should be made reminding employees and customers to follow physical distancing and to wash their hands.
- Restaurants electing to avail themselves of outdoor dining allowances **must** consider the impact of inclement weather in the formulation of their operational plans and on the maintenance of social distances during rain events.
- Self-audits or third-party audits are **recommended** and adapted to focus on enhanced COVID-19 procedures.

*If a COVID-19 case for a visitor or a staff member is reported, the establishment **must** strictly follow Florida Department of Health (https://floridahealthcovid19.gov/exposure/) and CDC guidelines for notification and for cleaning and sanitizing (https://www.cdc.gov/coronavirus/2019-ncov/community/guidance-business-response.html and https://www.cdc.gov/coronavirus/2019-ncov/community/general-business-faq.html).

**https://www.cdc.gov/coronavirus/2019-ncov/community/organizations/cleaning-disinfection.html

Capacity Limitations

Physical distancing is **critical** to help slow the spread of COVID-19. Social distancing protocols **must** be observed by patrons and staff, as outlined below.

- Any indoor restaurant operation **must** be limited by the Governor's Executive Order but no more than 50% of its building occupancy with the maintenance of social distancing of 6 feet between parties*. Any outdoor seating **must** maintain similar distancing but in no event may the combined indoor and outdoor operation exceed 100% of its legally permitted building occupancy. All bar counters **must** remain closed to seating.

  *To estimate the occupancy of a space, divide the square footage of the room by the square footage required per person (or per group of guests who live in the same household).

- A per table party limit of 4 persons **must** be maintained whether seating is indoor or outdoors unless the members of the party are from the same household. When parties are from the same household, tables may seat up to 6 persons. Restaurants must also make reasonable accommodations to party sizes to accommodate guests with disabilities such as allowing additional seating for health care aides. Whenever possible, it is recommended to have a maximum of 4 persons for 100 square feet (10 square meters).
- Tables **must** be arranged such that the distance from the back of one chair to the back of another chair shall be at least 6 feet apart and guests shall face each other from a distance of at least 3 feet (3 foot of internal table distance does not apply to parties consisting of one household unit).* In order to facilitate compliance with these distancing requirements, restaurants **must** establish a procedure to inquire from arriving parties whether or not they consist of one household unit. It is recommended that seating configurations be prearranged to ensure that parties reporting themselves as being from different households are seated at tables accommodating the 3 foot internal distancing requirement.

  *Importantly, being from the same family but living in different homes does require maintenance of the 3 foot internal table distancing within parties; 3 foot internal table distancing must be maintained for any members of a party that do not live in the same household.

Employee Procedures

Use of a full-body disinfectant booth (example, CleanTech J-1) to sanitize all employees prior to entry is recommended; however, a restaurant's voluntary installation of a sanitation booth does not negate the need for establishment of the below procedures.

Training

Proprietors **must** ensure all restaurant staff have a clear understanding of how a business will be operating with all necessary health & safety protocols.

- Staff working in restaurants **must** be provided with written instructions and training on how to prevent the spread of COVID-19 per existing Florida Department of Health literature (see attached).
- Normal routine fitness to work procedures employed by food businesses as part of their Food Safety Management Systems (FSMS) must ensure that infected workers are excluded from food premises.
- Staff who are unwell or have symptoms of COVID-19 must not be at work and must be informed about how to contact medical professionals.*

*This is imperative because if an infected worker handles food, it is possible that they could introduce the virus to uncooked food they are working on, or onto surfaces within the food business, by coughing and sneezing, or through hand contact. Also, in the case of COVID19, it is not uncommon that infected people may be asymptomatic or pre-symptomatic and may not display any signs or symptoms of disease or may present with mild symptoms that are easily overlooked. Some infected people, not yet displaying symptoms, are contagious and capable of spreading SARS-CoV2 (the virus responsible for COVID19).

Health Screening Questions

The manager (or designee) **must** ask every employee the following health screening questions before each shift to help identify any symptoms of COVID-19*:

- Have you experienced
  - a fever 99.5 °F (37.5°C), cough (any kind dry or productive), sore throat, shortness of breath or breathing difficulties, fatigue, chills, muscle pain, headache, or loss of taste or smell since your last shift?
- Have you come into contact with anyone who has at least two of the symptoms listed above since your last shift?
- Have you come into contact with anyone who has tested positive for COVID-19 since your last shift?

* Health screening questions can be administered on-line through a secure employee portal and sent electronically to the restaurant prior to the employee arriving for work or via telephone.

Temperature Screening

Employees **must** take their temperature at home before coming to work and must not come to work if the thermometer reading reveals a temperature of 99.5 °F (37.5°C). They **must** report their temperature as being above or below this threshold upon arrival at work. **Specific employee temperatures should not be kept by restaurants; rather, the information is to be recorded in a daily log as "Pass/Fail."***

*It shall remain the responsibility of the restaurants to comply with all applicable laws, including HIPPA, when engaging in screening procedures.

Alternatively, restaurants may elect to take employee temperatures prior to their entry into the facility. Thermometers **must** be single use or touchless/infrared and should be kept in a cool place and out of direct sunlight. Restaurants using infrared thermometers **must** take care to carefully calibrate these thermometers according to the manufacturer's recommended calibration procedure and schedule. Temperature taking should be conducted *in the shade* and when employees have rested (approximately 10-15 minutes) if they bike or walk to work.

Employees **must not** enter restaurants prior to the self-reporting of acceptable temperature readings or the taking of their temperature by restaurants electing to take employee temperatures. Temperature screening is **required until the end of phase 1 and recommend after phase 1**.**

*It is recommended that each facility have reliable single-use thermometers available in case a patron or employee becomes symptomatic while at the restaurant

**Keep in mind that not having a temperature does not exclude someone from being contagious. It shall remain the responsibility of the restaurants to comply with all applicable laws, including HIPPA, when engaging in screening procedures.

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Time Clock

If a time clock or other conventional record-keeping device is used, it **must** be cleaned with sanitizer after each employee use. **The restaurant will provide a chlorine or alcohol wipe for the cleaning of these devices by each employee.** Consider the use of an electronic wearable device for each employee that would automatically capture the time when an employee arrives and departs.

Handwashing and Need for Increased Frequency of Handwashing

Restaurants need to ensure that adequate sanitary facilities are provided and ensure that food workers thoroughly and frequently wash their hands. Employees **must** wash hands and change gloves (if applicable to workstation -see below) at least every 30 minutes and every time a team member changes tasks (including upon arrival at the restaurant before starting work).

Hand cleaning between tables is needed each time servers or staff come into physical contact with guests at the tables or with their food, drinks, dishware, silverware, napkins or other serving equipment. Hands must be washed before, after, and between deliveries to different tables (whether it be food or other table objects).

Restaurants **must** facilitate easy hand cleaning with soap and water between tables by servers and other staff. This can be done by either:

- Installation of permanent or portable touchless faucets, liquid soap dispenses, and paper towel dispensers with easy accessibility within dining areas is recommended (this is in addition to existing bathroom facilities).
- Alternatively, simple handwashing stations can be created throughout the restaurant and dining area through the use of commercially available wet towel bucket dispensers

(employing single use paper towels and water) in conjunction with automatic soap dispensers. Wet cloth towels (with water) may also be used as an alternative to paper towels (so long as they are employed as single use) (example: Kimtech Wettask system). Handwashing stations must be accompanied by nearby touchless trash bins to dispose of used paper or cloth towels.

All restaurants must employ some form of in-dining room handwashing station method that allows staff to wash their hands before and after coming into physical contact with table contents. Hand sanitizers can be used *as an additional measure* but should not replace handwashing.

Face Mask Requirement for all Employees and Third-Party Affiliates

All restaurant employees are considered to be food handlers for the purpose of this document and **must wear masks**. Food handlers are people who directly touch open food as part of their work, **but it also includes staff who may touch food contact surfaces or other surfaces in rooms where open food is handled.** The term can, therefore, apply not only to host, managers, servers, bussers, and food runners but also to managers, cleaners, maintenance contractors, delivery workers, and food inspectors.

Gloves

Glove use is to be reserved to employees involved in direct food preparations as defined by existing industry regulatory standards* (traditionally back of house staff) but also includes bussers and foodrunners. In restaurants where servers or other staff also act as bussers or foodrunners, glove use should be replaced by handwashing after each physical encountered as described above under "Handwashing". Safe glove use includes:

- **Do NOT touch mouth, nose or eyes** when wearing gloves.
- All gloves **must** be changed frequently, at least every 30 minutes or when changing tasks.
- Gloves **must** be changed after carrying out non-food related activities, such as opening/closing doors by hand, and emptying bins.
- Hands **must** be washed between glove changes and when gloves are removed.
- Removal of disposable gloves can lead to contamination of hands. Safe glove removal procedures may be found at https://www.cdc.gov/vhf/ebola/pdf/poster-how-to-remove-gloves.pdf.
- Disposable gloves are **not** a substitute for handwashing.**

*Wearing disposable gloves can give a false sense of security and may result in staff not washing hands as frequently as required. The COVID-19 virus can contaminate disposable gloves in the same way it gets onto workers' hands. Handwashing is a greater protective barrier to infection than wearing disposable gloves.

** KNOW that viruses and bacteria will build up on the surface of the hands even when you wear gloves, so handwashing is critical when gloves are removed to avoid subsequent contamination of food.

Employee Social Distancing Measures

- Limit the number of staff in a food preparation area at any one time.
- Organize staff into working groups or teams to facilitate reduced interaction between groups.

- Stagger workstations on either side of processing lines, so that food workers are not facing one another.
- Space out workstations, which may require a reduction in the speed of production lines.
- Provide PPE such as face masks, hair nets, disposable gloves (in food preparation areas) per existing industry regulations. Use of PPE is routine in high-risk areas of food premises that produce ready-to-eat and cooked foods. When staff are dressed in PPE it is possible to reduce the distance between workers from 6 feet to 3 feet. Any breach of the 3 foot distance between workers **must** not exceed 15 consecutive minutes per incident. An individual **must** be specifically assigned within the kitchen to monitor incidents of close contact;
- Frequency of surface cleaning and sanitizing **must** be increased.
- The number of staff in break rooms **must** be limited and disinfected regularly.
- **It is recommended that front-of-house staff not enter back-of-house areas where possible.**

General Hygiene

EPA guidance on effective use of disinfectants is available at https://www.epa.gov/sites/production/files/2020-04/documents/disinfectants-onepager.pdf

- Kitchen areas must have handwashing stations fully equipped with soap and self-dispensing paper towels. Ideally the faucets operation is hands-free.
- Wash and frequently sanitize items such as ladles, tongs, and condiment holders.
- Keep internal doors open where possible to minimize contact.
- Washing of dishes, silverware, and table linen:
    - All dishes, silverware, and glassware must be washed and disinfected in a dishwashing machine, including items that have not been used, as they might have been in contact with the hands of guests or staff.
    - If for any reason manual washing is required, the usual steps must be followed (wash, disinfect, rinse), taking the maximum level of precautions. Drying must be carried out using disposable paper towels. Likewise, tablecloths and napkins should be washed in the usual manner.
    - Laundry: All table linen will be washed at high temperatures and per CDC guidelines
    - Textiles, linens, and clothes should be put in special, marked laundry bags and handled carefully to prevent raising dust, with consequent potential contamination of surrounding surfaces or people
- **Employee Meals:** Meals from home shall not be allowed in the kitchen.
- **Manager's Office: Must** be disinfected with every shift change, with particular attention to high touchpoints (mouse, keyboard, etc.).

Customer Experience

Customers must wear masks at all times unless seated at a table.

Front door

Hands-free sanitizer **must** be available at the entrance. Front door **must** be operated using one or more of the following:

- Use electronic self-opening mechanism or employ a door person to open and close doors for customers. Doors **must** be disinfected and wiped down doors every 30 minutes (self-opening doors do not require this frequency of wiping).
- Provide wipes/paper towels to customers at entrance and exit for individual use along with trash receptacle. Trash **must** be disposed of regularly and must be contained in a bin with a touchless lid that opens without the need to touch the lid. Doors **must** be disinfected and wiped down every 30 minutes.

Host Stands must be operated as follows:

- Hand sanitizer **must** be available at the host stand.
- Host staff **must** maintain social distance from the customer as escorting to the table.
- Mints, toothpicks and other articles **must not** be provided as self-service. If individually wrapped, they can be provided at the table.
- Where possible, parties must wait in vehicles for their tables. Host stand waiting areas must contain visible floor markings as noted above for appropriate 6-foot distancing for each party in any waiting areas, whether exterior or interior.

The Bar

Bar use for seating is presently prohibited by the Governor's Order. Should bar use be allowed, it must be in accordance with the following:

- Any bar use **must** be treated as a table for in-house dining unless it is acting as a takeout area.
- Any bar seating **must** be socially distanced at 6 feet between parties.
- Bars **must not** be used as a waiting area. **Absolutely no congregation will be permitted at bars.**

Table

No self-service of any kind including drink fountains, buffets or salad bars shall be permitted for Phase 1 – opening.

Restaurant Staff

- **Any employees approaching tables must wear masks.**
- **Gloves must be worn by bussers and food runners; as noted above, any other staff not wearing gloves that places or removes food or objects from a table while patrons are sitting at the table must wash their hands before, after and between each physical encounter with a guest table (where the table or its contents were physically touched).**
- The server **must** maintain maximum social distance feasible while interacting with customers.
- The number of staff approaching tables should be minimized.
- No self-service by customers**.**

Table Setting **must** conform to the following*:

- All menus **must** be disposable and single-use, or the menu can be provided on a web page/QR code that the customer can be instructed to view on their personal device. Signage should instruct the customers on the use of internet and web page.
- If silverware is not disposable, only roll-ups will be allowed. Employees providing cutlery to patrons must wash hands before handling cutlery and placing at tables. No open cutlery is permitted as a preset.
- No water/wine glasses are permitted as presets.
- No condiments or breadbaskets are permitted as presets (but may be made available after the party is seated).
- All condiments **must** be single-use.
- Hand sanitizing wipes or another form of handwashing method **must** be provided at each table
- Tables and chairs **must** be sanitized mechanically, using an EPA approved disinfectant that is safe for the furniture, after each party's use or, if not used, every 60 minutes.

*The presentation or setting of single-service and single use articles and cleaned and sanitized utensils shall be done in a manner designed to prevent the contamination of food and lip-contact surfaces. As per FDA Food Code 4-904.13:

(A) Except as specified in (B) of this section, tableware that is preset shall be protected from contamination by being wrapped, covered, or inverted

(B) Preset tableware may be exposed if:

1. Unused settings are removed when a consumer in seated; or
2. Settings not removed when a consumer is seated are cleaned and sanitized before further use.

Order Taking at Quick Service Restaurant Counter/Window

- **Contactless Procedures**: **Must** minimize contact at drive-thru and front counter for delivery of food and drinks as well as payment.
- **Screen Shields**: When proper social distancing cannot be ensured, acrylic barriers **must** be installed.
- **Kiosks**: **Must** be sanitized after each guest use or, if not used, every 60 minutes.
- **Utensils**: **Must** be made available at the front counter only. All utensils **must** be wrapped (no self-service).
- **Drinks**: **Must** be made available at the front counter only (no self-service). New cups **must** be provided for each refill.
- **Food Packaging**: All food **must** be packaged to-go and trays will not be available.

Payment

- Contactless/Cashless transactions are encouraged.
- Check presenters **must not** be used.
- Any necessary payment devices **must** be sanitized after each use**. Provide wipes so that each customer wipes the device on use.**

Restroom

- **Must** be maintained as single-use for Phase 1 – opening period (with exceptions for special needs guests).
- **Surfaces**: **Must** disinfect high touch surfaces hourly (door handles, cubicle closures, sink

levers, manual dispensers, air dryers (if applicable), etc.).

- Any surfaces that become soiled with respiratory secretions or other body fluids, e.g. toilet, handwashing basins must be cleaned with a regular household disinfectant solution containing 0.1% sodium hypochlorite (that is, equivalent to 1000 ppm).
- Surfaces must be rinsed with clean water *after* sufficient contact time for the chlorine. The clean water rinse should happen after 10 minutes contact time for chlorine.
- Whenever possible, use only disposable cleaning materials.
    - If a known or suspected COVID19 person used the restaurant restroom, discard any cleaning equipment made of cloths and absorbent materials, e.g. mophead and wiping cloths.
- When pertinent, disinfect properly non-porous cleaning materials with 0.5% sodium hypochlorite solution or according to manufacturer's instructions before using for other rooms.

- **Guest Handwashing**: **Must** maintain adequate levels of hand soap, paper towels, and hand sanitizer (if applicable). If paper towels are not provided, the restaurant **must** install a hands-free door pull (elbow or foot-operated). The preferred drying method is recommended to be self-dispensing.
- **Trash**: **Must** have a trash can by the door if paper towels are used. The trash bin must have a lid, and the lid should open **without** the need to handle (touch) the lid. Trash and sanitary trash **must** be discarded regularly.

Exit

- Guests **must** wear masks or face covering **that covers the mouth and the nose** as they leave their tables.
- Guests **must** maintain social distancing as exiting the restaurant.
- The restaurant **must** wipe down door handles with each exit (or mirror applicable entry procedures noted above) as guests exit.
- Provide a separate exit from the entrance if feasible and mirror the applicable entry procedures stated above.

Other Customer Experiences

Curbside Pickup

- **Curbside Service**: Where possible, **recommend the** use of curbside and contactless procedures to deliver orders to guests in the designated parking area.

Drive-Thru

- **Contactless Procedures**: **Recommend** use of a designated pan to receive payment, wearing of gloves (back of the house in food prep and front of the house in service), use of tray or pan to deliver food/drinks, and removal of any self-service elements.
- **Screen Shields**: Acrylic barriers are **recommended** to be installed as sneeze guards.

Delivery

- **Packaging: All** delivery services **must** ensure that packaging is secure for the guest so drivers cannot tamper with the product. Recommend to seal or staple packaging.
- **Social Distancing: Contactless** procedures **must** be followed when transferring orders to delivery drivers. Ensure that delivery drivers maintain minimum 6-foot social distancing while waiting for orders.
- All third party, contract services and vendor deliveries **must** maintain minimum 6-foot social distancing, wear face masks when entering restaurants and wash hands/sanitize between stops and/or deliveries.

Swimming Pools

These protocols were developed to serve community pools, pools at hotels and pools at condominiums, apartments and other residential complexes.

I. Workforce and Visitor Protections
   a. **Situate hand sanitizing stations and/or disinfectant wipes around the pool deck area and in public restrooms**
   b. **Establish a one-way flow into and out of the pool deck if there is a single entry/exit point, complemented by directional tape and personnel to monitor**
   c. Place additional fans or other ventilation systems to assist in directing air circulation away from guest or employee areas
   d. **If they have been removed, place lifesaving equipment (life ring and safety hook) back on the pool deck in an easily seen and accessible spot.**
   e. **Deep clean prior to open (e.g., pool furniture, gate latches, handrails, lifesaving equipment)**

II. Business process adaptations
   a. Designate one or more individuals to be responsible for reviewing and ensuring daily pool safety
   b. P**lace clear markings on the floors and other areas to ensure guests follow social distancing guidelines/spacing (including bathrooms)**
   c. **Remove chairs and lounge chairs on the pool deck to achieve appropriate (i.e. at least 6-feet) spacing between guests**
   d. **Place bins outside of 4 feet pool wet deck**
   e. **For pool bars, remove bar stools and chairs, mark spacing distances, and place barriers between guest and employees to ensure 6-feet distancing**
   f. **Enable all entry gates to pool area and doors to self-close and self-latch**
   g. **Ensure vacuum port covers are installed**
   h. **Remove any solar blankets from pool**
   i. **Check handrails, ladders, diving boards, etc. to ensure they are securely installed**
   j. **Ensure pool recirculation pump is set to run at least 3 hours before the pool opens to 3 hours after the pool is closed (24 hours/day for vacuum DE filters)**

III. Public health interventions
   a. Provide training to employees on: (i) personal protective equipment and how to properly dispose them; (ii) how to detect symptoms of the virus; (iii) procedures to follow in case an infection is confirmed
   b. Place signage in several high visibility areas around the pool noting the social distancing policies that are in effect for all persons on the pool deck and in the pool; use visual or infographics educational material provided by CDC and DOH on this issue
   c. Ensure pool rules sign is posted and easily visible from all areas of the pool
   d. Clean or back wash filters to remove any build-up of dirt or debris
   e. Ensure anti-entrapment devices are installed and working properly

Hotels and Accommodations

These protocols were developed by the hotel industry to guide lodging and accommodation facilities of all sizes.

Safety and Health of our Guests:

Supervision

- A 'monitoring/response' team involving members of each relevant department will convene and evaluate the health status of hotel staff each morning.
  - The team will report:
    - Any unusual rise in worker absenteeism, especially those related to respiratory infections,
    - Numbers of staff that test positive for the virus and follow an established protocol for managing the consequences resulting from each positive individual,
    - Lessons learned each day and corrective actions and policies implemented, and
    - Observations of any guests that are exhibiting signs of COVID-19.
  - The team will maintain:
    - Communication with managers of different sectors,
    - Contact information on staff, including emergency telephone numbers (ideally cell phone numbers) and e-mail addresses, and
    - Logbook of actions, measures, and improvements implemented.
- An individual will be assigned each shift to monitor and supervise the equipment, procedures, and management of the health and safety measures for our guests.

Cleaning & Sanitation

- Hotels will make the best effort to follow guidance of the CDC, OSHA, and the World Health Organization.
- Our hotels will use CDC guidelines to clean and disinfect* all public spaces to include but not limited to, front desk check-in counters, elevator and elevator buttons, door handles, public bathrooms, room keys and locks, escalators and stair handrails, gym equipment, dining surfaces, and seating areas.

*Hotels will clean and disinfect high-touch areas every 4 hours. Staff will be trained to wear the appropriate PPE for cleaning and disinfecting as well as, how to use the cleaning products. (https://www.cdc.gov/coronavirus/2019-ncov/community/pdf/ReOpening_America_Cleaning_Disinfection_Decision_Tool.pdf) and (https://www.cdc.gov/coronavirus/2019-ncov/community/pdf/Reopening_America_Guidance.pdf).

- Guest Rooms: Industry leading cleaning and disinfecting protocols that meet EPA approved standards for SARS-CoV2 are used to clean guest rooms (https://www.epa.gov/pesticide-registration/list-n-disinfectants-use-against-sars-cov-2). Staff will also follow CDC guidelines to clean and disinfect public places.
- Laundry: All bed linen and laundry will continue to be washed at high temperatures and in accordance with CDC guidelines.
- If possible to source, install high efficiency air filters and HVAC systems.

- Install or adjust existing trash bins to those with lids that open without the need to touch the lids placed and available for use to staff and guests in all common areas.

Physical Distancing

- Guests will be advised to practice physical distancing by standing at least six feet away from other groups of people not traveling from the same household while standing in lines, using elevators or moving around the property. Restaurant tables and other physical layouts will be arranged to achieve appropriate 6 feet distancing. Employees will be reminded not to touch their faces and to practice physical distancing by standing at least six feet away from guests and other employees whenever possible. All outlets will comply with, or exceed, local or state mandated occupancy limits.

Facial Coverings

- Staff and guests must wear a mask or cloth face covering that covers the nose and the mouth. Guests must adhere to wearing their masks in public areas. (CDC guidelines now recommend that people wear cloth face coverings when they are in public settings). Both staff and guests will be informed that wearing a face covering does not eliminate the need for social distancing and proper hand hygiene. (https://www.cdc.gov/coronavirus/2019-ncov/prevent-getting-sick/diy-cloth-face-coverings.html) and (https://www.cdc.gov/coronavirus/2019-ncov/prevent-getting-sick/cloth-face-cover.html)

Hand Sanitizer

- Post signage to remind people to wash hands with soap and water and/ or use hand sanitizer. Hand sanitizer dispensers (at least 60% alcohol content) will be placed at key guest and employee entrances and public areas throughout the hotel, unless restrooms with soap and water are readily available close by with signage directing guests to such bathrooms for proper hand hygiene.

Signage

- Front of the House: Health and hygiene reminders to include the proper way to wear, handle and dispose masks (the latter if not cloth face covering).
- Heart of the House: Signage will be posted throughout the property reminding employees of the proper way to wear, handle and dispose masks (if not cloth face covering), when to use gloves**, wash hands, and to avoid touching their faces. Staff will be trained on proper glove etiquette to ensure employees wash hands before and after wearing gloves.

**** Wearing disposable gloves can give a false sense of security and may result in staff not washing hands as frequently as required. The COVID-19 virus can contaminate disposable gloves in the same way it gets onto workers' hands. Handwashing is a greater protective barrier to infection than wearing disposable gloves.

Employee & Guest Health Concerns

- Our employees will be given clear instructions every 2 months as per Florida Health Department (FHD) on how to respond swiftly and report all presumed cases of COVID-19 on property to the Florida Health Department (FHD The COVID-19 Call Center is available 24/7 | 1 (866) 779-6121 | COVID-19@flhealth.gov). We will be ready to provide support to our guests as well, at safe social distancing spacing intervals. Employees are instructed to stay home if they do not feel well and are instructed to contact a manager if they notice a coworker or guest with a cough, shortness of breath, sense of breathlessness, fever, loss of taste and/or loss of smell, sore throat, runny nose, muscle aches or other known symptoms of COVID-19. Employees and guests who are exhibiting either fever or two or more of the symptoms of COVID-19 while at the property MUST immediately notify their manager (employees) or hotel security (guests).
- Until further notice no pets will be allowed in any guest rooms at any hotel (an exception to the rule would be permitted for a Service Animal as defined by the Americans with Disabilities Act –"any dog that is individually trained to do work or perform tasks for the benefit of an individual with a disability, including a physical, sensory, psychiatric, intellectual, or other mental disability.") Only the handler may touch the dog. Hotels will only accept pets for service and therapy dogs as required by federal and state guidelines. There is a known risk from and to pets from COVID-19.

Case Notification

- If we are alerted to a presumptive case of COVID-19 at the resort, we will work with and follow the appropriate actions recommended by FHD.

Guest Guidelines

- Guests must maintain social distancing between other groups/guests and wear masks or cloth face coverings outside of their hotel room.
- Guests must not gather in any area of the hotel in groups larger than 10 and must follow CDC's social distancing guidelines.
- Guests must follow posted guidelines for social distancing and healthy habits.

Hotel Guest Elevators

- An employee will be present to sanitize the button panels at regular intervals, at least once per hour.
- Signage will be posted to explain the current procedures.
- Safety distancing guidelines per elevator
- If able to be sourced, provide hand sanitizer or paper towels to customers on every floor, at each elevator point so that each guest can avoid directly touching common areas and clean their hands if they have to touch a common area.
- Elevator occupancy is to be limited to promote social distancing to include markings on elevator floor identifying proper occupant position. The distance in the elevator will be marked to organize guests to stand at 3-feet distances between occupants who are all wearing facial coverings or masks, unless traveling as a family unit.

Guest Sanitation Amenities:

- Each guest will receive COVID-19 awareness information (will be provided digitally from the hotels with the capability).
- If able to be sourced, a spray bottle of sanitizer or wipes will be provided in each room for guest use.

Safety and Health of our Employees:

Hand Sanitizer

- Hand sanitizer dispensers will be placed at key guest and employee entrances and public areas throughout the hotel

Signage

- Front of the House: Health and hygiene reminders to include the proper way to wear, handle and dispose masks (the latter if they are non-cloth face coverings).
- Heart of the House: Signage will be posted throughout the property reminding employees of the proper way to wear, handle and dispose masks, use gloves***, wash hands, sneeze and to avoid touching their faces. The signage will remind staff of proper glove etiquette to ensure employees wash hands before and after wearing gloves.

***If gloves are not used properly, they can be a source of contamination and can give a false sense of security that may result in staff not washing hands as frequently as required. The COVID-19 virus can contaminate disposable gloves in the same way it gets onto workers' hands. Handwashing is a greater protective barrier to infection than wearing disposable gloves.

- Signage must inform social distancing, hand hygiene, and respiratory etiquette:
  - Social distancing means
    - Refraining from hugging, kissing, fist-bumps, or shaking hands
    - Maintaining a distance of at least six feet
  - Hand hygiene means
    - regularly and thoroughly cleaning hands with soap and water for a minimum of 20 seconds, or if hand washing is unavailable with an alcohol-based hand rub
    - Avoid touching eyes, nose, and mouth.
    - Hand disinfection is indicated after exchanging objects (e.g. money, credit cards) with guests.
  - Respiratory etiquette means
    - covering mouth and nose with bent elbow or tissue when coughing or sneezing
    - Immediate disposal of used tissue into a bin with a touchless lid.

Employee Guidelines

- Hotels will first recall displaced employees prior to hiring new employees.
- To the extent practicable, hotels will honor employees' requests to remain on layoff if they are caring for children at home due to school closures, offering the opportunity to return when schools resume operations
- Staff that has not already been, must be trained prior to opening in OSHA guidelines, hotel layout and procedures.
- Staff must wear PPE as prescribed above at all times, unless working within their own offices with no other individuals present.
- Staff must wash hands with soap and water or use hand sanitizer every 2 hours.
- Staff shall follow posted guidelines for social distancing and hotel operations.

Maintaining Employee Health to Protect the Public:

- Conduct daily temperature/symptoms check for staff, contractors and vendors.
- Masks or cloth face covers will be required for staff, contractors, and vendors.
- Require physical distancing of at least 6 feet in all public spaces and amenities.

Training

- Training will be provided in English and Spanish, and Creole if the hotel maintains a large staff population of that background.
- The training provider will be Miami Dade College. Each hotel will have a Lead Trainer responsible for providing ongoing training and daily reinforcement, based on each hotel's needs. The Lead Trainer will have received a certificate of completion from a FL DOH accredited training institution.
- All employees will receive a comprehensive program of training on COVID-19, based on compliance with published guidelines by the Center for Disease Control (CDC), Occupational Safety and Health Administration (OSHA), World Health Organization (WHO) and Department of Health. Training will include procedures relating to disinfection, safety training, social distancing, how to properly use and dispose all PPE, prior to returning to work whenever possible, or within 5 days of the return date.
- Hotel staff will have readily available the telephone numbers of health authorities, medical centers, hospitals within proximity to their respective hotel.
- Staff training regarding COVID-19 will:
  - enable them to safely carry out assigned tasks,
  - take actions via following procedures to reduce the spread of COVID-19,
  - be able to answer guest questions about hotel policies that address:
    - preventive measures,
    - obtaining medical and pharmacy services,
    - provide advice about self-quarantine if guests develop respiratory symptoms,
    - Room occupancy policy for accompanying persons in the event of a suspected or confirmed case of COVID-19.
  - How to protect themselves from respiratory infections

Prevention Measures

- Promote frequent and thorough hand washing, 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.
- Discourage workers from using other workers' phones, desks, offices, or other work tools and equipment, when possible. Each employee will clean their workstations (e.g. computer keyboards, mouse and mousepad, etc. after each use)
- Maintain regular housekeeping practices, including routine cleaning and disinfecting of surfaces, equipment, and other elements of the work environment. When choosing cleaning chemicals, employers will consult information on Environmental Protection Agency (EPA)-approved disinfectant labels with claims against emerging viral pathogens. Follow the manufacturer's instructions for use of all cleaning and disinfection products (e.g., concentration, application method and contact time, PPE).
- Do not allow guests to handle food,
- Close all recreational areas for children, if applicable.

Hotel Operational Standards:

Guest Arrival Procedure

- Where parking is available, guest who arrive in their own cars will self-park. Valet will not be an option where onsite parking is available.
- Where parking is unavailable, valet may be utilized.
  - Valet operators must wear and utilize PPE as prescribed above.
  - Valet operator will step away 6 feet after opening car door
    - Visual marker will be placed on the ground to assist
  - Guests need to remove and carry their own luggage (if physically able)
  - After parking, vehicle operator will switch or sanitize gloves prior to servicing the next vehicle or re-entry into the building

Guest Check In

- Employees who self-identify as high risk should be reassigned, if possible.
- In preparation that a guest may be ill, the reception desk should have immediately available the telephone numbers of the following:
  - health authorities,
  - Medical centers, public and private hospitals, and
  - Assistance centers (Florida COVID-19 phone number).
- Guests entry will be staggered by group/individual with a limit of 10 occupants in the lobby or 10/500SF (including employees);

- Guest will wait for assistance in lobby on furniture or visible markers that are 6 feet apart.
- Only 1 person/group will approach front desk for assistance (should be one guest/person per station if stations are six feet apart)
- Guest check-in should be accomplished with minimal contact points. If chip and pin hardware can be placed so it is accessible to the guest, guests should insert their own credit card into the chip reader for approvals. Hardware will be sanitized after each use.
- Hotels with the capability to provide virtual or remote check-in procedures are encouraged to be utilized.
- The reception desk will have a medical kit that includes the following items:
    - Germicidal disinfectant/wipes for surface cleaning Tissues
    - Face/eye masks (separate or combined, face shield, goggles). Note that disposable face masks can only be used once
    - Gloves (disposable)
    - Protective apron (disposable); and
    - Biohazard disposable waste bag

Cleaning and Sanitation

- Hotel will make the best effort to follow guidance of the CDC, OSHA and World Health Organization
- All hotels must use EPA approved cleaning solutions only
- The frequency of cleaning and disinfecting in the front and heart of the house will be conducted twice daily in all public spaces to include but not limited to, front desk check-in counters, elevator and elevator buttons, door handles, public bathroom rooms, room keys and locks, escalators and stair handrails, gym equipment, dining surfaces and seating areas.
- **Guest Rooms:** Industry leading cleaning and disinfecting protocols are used to clean guest rooms.
- **Laundry:** All bed linens and laundry will continue to be washed at high temperatures and in accordance with CDC guidelines
- **Linen:** Suspend room service for guest stays
- Install high efficiency air filters and HVAC systems

Physical Distancing

- Insist that all guests and staff practice social distancing measures coupled with the use of hand hygiene and respiratory etiquette. This includes:
    - No hugging, kissing, fist-bumps, or shaking hands with guests as well as among staff;
    - Maintaining a distance of at least 6 feet; and
    - Avoiding anyone who is coughing or sneezing.

- Guests will be advised to practice physical distancing by standing at least six feet away from other groups of people not traveling with them while standing in lines, using elevators or moving around the property. Restaurant tables and other physical layouts will be arranged to ensure appropriate distancing. Employees will be reminded not to touch their faces and to practice physical distancing by standing at least six feet away from guests and other employees whenever possible. All outlets will comply with, or exceed, local or state mandated occupancy limits.

Hand Sanitizer

- Hand sanitizer dispensers will be placed at key guest and employee entrances and public areas throughout the hotel, unless restrooms with waiter and soap are available close by (with directional signage to such) for their use.
    - Hand sanitizer dispensers and/or tissue paper will be placed at every common use door and elevator, unless restrooms with water and soap are available close by (with directional signage to such) for guests to use.
    - Hand sanitizer dispenser and tissue paper will be placed at the exit and entrance to dining areas (dining hall, restaurants, and bars).
- Perform regular checks every shift out to ensure
    - Proper functioning of soap and disinfectant solution dispensers, hand dryers, disposable tissue dispensers, and other similar devices.
    - That they have ample amounts of soap or disinfectant solution
    - Rapidly repair or replace defective units

Room Cleaning

- Use approved disinfectant to thoroughly clean all high-touch points including telephone, remote control, bathroom sinks, toilets, shower, tubs, hair dryers, desks and mirrors.

Food Service

- All menus must be disposable and single-use, or the menu can be provided on a web page if available.
- Use Grab n Go facilities and ensure guest honor social distancing while in line
- Room service restrictions, e.g., delivery only to door with PPE

Meeting and Convention Spaces:

- Meeting and banquet set-up arrangements will allow for physical distancing between guests in all meetings and events based on CDC4 and state recommendations. Self-serve buffet-style food service will be suspended and replaced by alternative service styles.
- Cleaning & Disinfecting Protocol – All equipment and meeting amenities will be disinfected before and after each use or be single use if not able to be sanitized.
- Disinfect each meeting room prior to being occupied
- All linen, including underlays will be replaced after each use
- Reduce and manage crowd densities
- Phase one – less than 10 persons gathering

- Phase two – less than 50 persons gathering
- Phase three – Limited social distancing
- Banquets will follow restaurant social distancing and dining standards

Physical distancing protocol:

- All food and beverage items to be individually plated and served;
- Each patron will receive one Individually wrapped sanitizing wipe when food is served;
- Coffee and other break items will be attended and served by a server;
- Flatware to be provided as a roll up or grab and go concept;
- Condiments to be served in individual sealed containers;
- Seating capacity and floor plans to be reviewed on event by event basis to ensure the CDC physical distancing rules apply

G**uest considerations:**

- Individual bottled water will be provided instead of water carafes on meeting tables and all water stations;
- Develop examples of physically distanced floor plans for Hotel Sales & Convention Services use; and
- Create modified menus to showcase styles of service and items currently available.

Communications/Outreach:

- Signage for guidelines most be posted where applicable
  - Must be in multiple languages – English and Spanish
  - Clear and concise
- Checklist and visuals for employees in respective will be posted
- Friendly signage explaining new processes to guest is highly recommended

Hotel Guest Elevators

- An employee will be present to sanitize the button panels at regular intervals, at least once per hour.
- Signage will be posted to explain the current procedures.
- Safety distancing guidelines per elevator
- Hand sanitizer dispensers and/or tissue paper will be placed at every common use door and elevator.

Building:

- Flush plumbing to eliminate stagnant water if establishment has been non-operational during closure period
- Hotels must change and/or upgrade HVAC filters as necessary to maximize fresh air (using the maximum filtration for the design of the ventilation system) and increase outdoor airflow rates where possible.

- Increase fresh air flow whenever possible to dilute containments, while keeping humidity levels as low as possible.****

****https://www.cdc.gov/infectioncontrol/guidelines/environmental/background/air.html

- Workspaces for offices and the front desk will need to be spaced at least 6 feet between each employee
- Front desks need to provide a physical buffer between guest and employee; such as a plexiglass shield
- Evaluate high touch points within building. High touch points need to be removed, updated, attended to for cleaning following each use or limit usage to staff that can operate using PPE
- Establish a disposal plan for contaminated materials, such as PPE and soiled cleaning supplies.
- Furniture in common areas must be shifted to accommodate social distancing guidelines.
- Maintain the regular/routine concentration of disinfectant in water for consumption and in pools.

Supplies:

- Surgical or cloth masks for all employees. Signage must be placed in all common areas showing guidance on proper usage;
- Gloves for all employees that must be changed or sanitized between all uses;
- EPA-registered disinfectants for cleaning;
- Hand sanitizer or hand washing stations for common areas; and
- Thermal monitoring capabilities – No touch thermometer

Operations:

- Hotels will offer services in a phased approach to match along with county-approved phased operational services, where applicable.
- All industry standards for cleaning and operations must adhered to
    - i. Allowed Phase 1 services:
        1. Accommodations
        2. Dining (as prescribed by County Order)
        3. Pools (as prescribed by County Order)

           Appendix with recommendations will be provided upon approval
    - ii. Not Allowed Phase 1 Services:
        1. Turn down service (upon request)
        2. Spas
        3. Self-Care
        4. Childcare Services
        5. Gyms
        6. Onsite Entertainment Venue

7. Counter/Walk up Bars

iii. Allowed Phased 2 Uses (to include phase 1 services)
    1. Turndown service
    2. Childcare Services
    3. Gyms
    4. Spas

iv. Not Allowed Phase 2 Services:
    - Onsite Entertainment Venues

v. Phase 3 will allow for all services to be provided while ensuring frequent and proper cleaning of high touch surfaces/areas.
    - CDC guidelines in place at this time must be followed.

Appendices

1. Listing of Business Establishments
2. Screening for COVID-19 display
3. COVID-19 Guidance for Businesses and Employees
4. OSHA COVID-19 Control and Prevention
5. CDC Guidance Solid Waste and Wastewater Management Workers and Employers
6. OSHA Guidance on Preparing Workplaces for COVID-19
7. OSHA Guidance for Cleaning and Disinfecting
8. CDC Environmental Cleaning and Disinfection Recommendations
9. EPA List of Cleaning Products

Appendix 1 – Business Establishments - DRAFT/TO BE UPDATED

The list below has been compiled using publicly available information based on federal definitions of business industries, sectors and subsectors. It is intended to provide Miami-Dade County residents and business owners a guide on how their establishment is defined and governed by the Emergency Orders issued by the County. As we work towards a New Normal, the designation of businesses may change. For ease, businesses have been sorted in alphabetical order.

	Subsector	**Designation**
Accessories Stores	Motor Vehicle and Parts Dealers	A. Essential / currently open
Accounting	Professional, Scientific, and Technical Services	A. Essential / currently open
Advertising Services	Professional, Scientific, and Technical Services	A. Essential / currently open
Aerospace Product and Parts Manufacturing	Transportation Equipment Manufacturing	C. Lower proximity
Agents for Artists, Athletes, Entertainers, and Other Public Figures	Performing Arts, Spectator Sports, and Related Industries	B. Can be performed remotely
Agriculture Machinery Manufacturing	Machinery Manufacturing	C. Lower proximity
Air Transportation Support Activities	Support Activities for Transportation	A. Essential / currently open
Air-Conditioning Equipment Manufacturing	Machinery Manufacturing	C. Lower proximity
Allied Product Manufacturing	Leather & allied product manufacturing	C. Lower proximity
Alumina and Aluminum Production and Processing	Primary Metal Manufacturing	C. Lower proximity

Ambulatory Health Care Services	Ambulatory Health Care Services	A. Essential / currently open
Amusement Industries	Amusement, Gambling, and Recreation Industries	E. Higher proximity and hard to safeguard
Amusement Parks	Amusement, Gambling, and Recreation Industries	E. Higher proximity and hard to safeguard
Animal Food Manufacturing	Food Manufacturing	A. Essential / currently open
Animal Slaughtering and Processing	Food Manufacturing	A. Essential / currently open
Apparel Accessories	Apparel Manufacturing	C. Lower proximity
Apparel Knitting Mills	Apparel Manufacturing	C. Lower proximity
Apparel Manufacturing	Apparel Manufacturing	C. Lower proximity
Apparel Wholesalers	Merchant Wholesalers, Nondurable Goods	D. Higher proximity but can be safeguarded
Appliance Stores	Electronics & appliance stores	E. Higher proximity and hard to safeguard
Arcades	Amusement, Gambling, and Recreation Industries	E. Higher proximity and hard to safeguard
Architectural and Related Services	Professional, Scientific, and Technical Services	A. Essential / currently open
Architectural Metals Manufacturing	Fabricated Metal Product Manufacturing	C. Lower proximity
Artificial Fibers and Filaments Manufacturing	Chemical Manufacturing	A. Essential / currently open
Assisted Living Facilities for the Elderly	Nursing and Residential Care Facilities	A. Essential / currently open
Audio Equipment Manufacturing	Computer & electronic product manufacturing	C. Lower proximity
Automobile Dealers	Motor Vehicle and Parts Dealers	A. Essential / currently open

Automotive Equipment Rental and Leasing	Rental & leasing services	A. Essential / currently open
Automotive Maintenance	Repair & maintenance	A. Essential / currently open
Automotive Parts Stores	Motor Vehicle and Parts Dealers	A. Essential / currently open
Automotive Repair	Repair & maintenance	A. Essential / currently open
Bakeries Manufacturing	Food Manufacturing	A. Essential / currently open
Basic Chemical Manufacturing	Chemical Manufacturing	A. Essential / currently open
Beer Merchant Wholesalers	Merchant Wholesalers, Nondurable Goods	D. Higher proximity but can be safeguarded
Beer Stores	Food and Beverage Stores	A. Essential / currently open
Beverage Manufacturing	Beverage and Tobacco Product Manufacturing	A. Essential / currently open
Boarding Houses	Accommodation	D. Higher proximity but can be safeguarded
Boat Building	Transportation Equipment Manufacturing	C. Lower proximity
Boiler Manufacturing	Fabricated Metal Product Manufacturing	C. Lower proximity
Book Stores	Sporting Goods, Hobby, Book, and Music Stores	E. Higher proximity and hard to safeguard
Bookkeeping	Professional, Scientific, and Technical Services	A. Essential / currently open
Building Equipment Contractors	Specialty Trade Contractors	D. Higher proximity but can be safeguarded
Building Finishing Contractors	Specialty Trade Contractors	D. Higher proximity but can be safeguarded
Building Material Dealers	Building Material and Garden Equipment and Supplies Dealers	E. Higher proximity and hard to safeguard

Building Supplies Dealers	Building Material and Garden Equipment and Supplies Dealers	E. Higher proximity and hard to safeguard
Business Schools	Educational Services	F. Education
Business Support Services	Administrative & support services	C. Lower proximity
Cable Programming	Broadcasting (except Internet)	A. Essential / currently open
Cement Product Manufacturing	Nonmetallic Mineral Product Manufacturing	C. Lower proximity
Charter Bus Industry	Transit and Ground Passenger Transportation	A. Essential / currently open
Chemical and Allied Products Merchant Wholesalers	Merchant Wholesalers, Nondurable Goods	D. Higher proximity but can be safeguarded
Chemical Product and Preparation Manufacturing	Chemical Manufacturing	A. Essential / currently open
Child Day Care Services	Social Assistance	A. Essential / currently open
Civil Engineering Construction	Heavy and Civil Engineering Construction	A. Essential / currently open
Clay Product and Refractory Manufacturing	Nonmetallic Mineral Product Manufacturing	C. Lower proximity
Cleaning Compound Manufacturing	Chemical Manufacturing	A. Essential / currently open
Clothing Stores	Clothing & clothing accessories stores	E. Higher proximity and hard to safeguard
Coal Mining	Mining (except Oil and Gas)	C. Lower proximity
Coating, Engraving, Heat Treating, and Allied Activities	Fabricated Metal Product Manufacturing	C. Lower proximity
Colleges	Educational Services	F. Education

Commercial Equipment Rental and Leasing	Rental & leasing services	A. Essential / currently open
Commercial Machinery Manufacturing	Machinery Manufacturing	C. Lower proximity
Commercial Machinery Rental and Leasing	Rental & leasing services	A. Essential / currently open
Commercial Refrigeration Equipment Manufacturing	Machinery Manufacturing	C. Lower proximity
Commodity Exchanges	Securities intermediation & related activities	B. Can be performed remotely
Communications Equipment Manufacturing	Computer & electronic product manufacturing	C. Lower proximity
Community Food Relief Services	Social Assistance	A. Essential / currently open
Computer Equipment Manufacturing	Computer & electronic product manufacturing	C. Lower proximity
Computer Systems Design and Related Services	Professional, Scientific, and Technical Services	A. Essential / currently open
Computer Training	Educational Services	F. Education
Concrete Product Manufacturing	Nonmetallic Mineral Product Manufacturing	C. Lower proximity
Confectionery Product Manufacturing	Food Manufacturing	A. Essential / currently open
Construction Machinery Manufacturing	Machinery Manufacturing	C. Lower proximity
Construction Materials Merchant Wholesalers	Merchant Wholesalers, Durable Goods	D. Higher proximity but can be safeguarded
Consumer Goods Rental	Rental & leasing services	D. Higher proximity but can be safeguarded

Continuing Care Retirement Communities	Nursing and Residential Care Facilities	A. Essential / currently open
Converted Paper Product Manufacturing	Paper Manufacturing	C. Lower proximity
Couriers Services	Couriers and Messengers	A. Essential / currently open
Credit Intermediation Activities	Credit Intermediation and Related Activities	B. Can be performed remotely
Cut and Sew Apparel Manufacturing	Apparel Manufacturing	C. Lower proximity
Cutlery Manufacturing	Fabricated Metal Product Manufacturing	C. Lower proximity
Dairy Product Manufacturing	Food Manufacturing	A. Essential / currently open
Data Processing, Hosting, and Related Services	Data Processing, Hosting, and Related Services	A. Essential / currently open
Death Care Services	Personal & laundry services	A. Essential / currently open
Deep Sea, Coastal, and Great Lakes Water Transportation	Water Transportation	D. Higher proximity but can be safeguarded
Department Stores	General Merchandise Stores	A. Essential / currently open
Depository Credit Intermediation	Credit Intermediation and Related Activities	B. Can be performed remotely
Developmental Disability Facilities	Nursing and Residential Care Facilities	A. Essential / currently open
Diagnostic Laboratories	Ambulatory Health Care Services	A. Essential / currently open
Direct Selling Establishments	Nonstore Retailers	D. Higher proximity but can be safeguarded
Distilled Alcoholic Beverage Merchant Wholesalers	Merchant Wholesalers, Nondurable Goods	D. Higher proximity but can be safeguarded

Dormitories	Accommodation	D. Higher proximity but can be safeguarded
Drinking Places (Alcoholic Beverages)	Food Services and Drinking Places	E. Higher proximity and hard to safeguard
Drugs and Druggists' Sundries Merchant Wholesalers	Merchant Wholesalers, Nondurable Goods	D. Higher proximity but can be safeguarded
Dry cleaning Services	Personal & laundry services	A. Essential / currently open
Eating Places	Food Services and Drinking Places	D. Higher proximity but can be safeguarded
Educational Support Services	Educational Services	F. Education
Electric Lighting Equipment Manufacturing	Electrical Equipment, Appliance, and Component Manufacturing	C. Lower proximity
Electric Power Generation, Transmission and Distribution	Utilities	A. Essential / currently open
Electrical Component Manufacturing	Electrical Equipment, Appliance, and Component Manufacturing	C. Lower proximity
Electrical Equipment Manufacturing	Electrical Equipment, Appliance, and Component Manufacturing	C. Lower proximity
Electronic Component Manufacturing	Computer & electronic product manufacturing	C. Lower proximity
Electronic Equipment Repair and Maintenance	Repair & maintenance	C. Lower proximity
Electronic Goods Wholesalers	Merchant Wholesalers, Durable Goods	D. Higher proximity but can be safeguarded
Electronic Shopping	Nonstore Retailers	A. Essential / currently open

Electronics Stores	Electronics & appliance stores	E. Higher proximity and hard to safeguard
Elementary and Secondary Schools	Educational Services	F. Education
Emergency Relief Services	Social Assistance	A. Essential / currently open
Employment Services	Administrative & support services	C. Lower proximity
Engine, Turbine, and Power Transmission Equipment Manufacturing	Machinery Manufacturing	C. Lower proximity
Engineered Wood Product Manufacturing	Wood Product Manufacturing	C. Lower proximity
Engineering and Related Services	Professional, Scientific, and Technical Services	A. Essential / currently open
Equipment Repair and Maintenance	Repair & maintenance	A. Essential / currently open
Express Delivery Services	Couriers and Messengers	A. Essential / currently open
Fabric Coating Mills	Textile Mills	C. Lower proximity
Fabric Finishing Mills	Textile Mills	C. Lower proximity
Fabric Mills	Textile Mills	C. Lower proximity
Fabricated Metal Product Manufacturing	Fabricated Metal Product Manufacturing	C. Lower proximity
Facilities Support Services	Administrative & support services	C. Lower proximity
Family Services	Social Assistance	A. Essential / currently open
Farm Product Raw Material Merchant Wholesalers	Merchant Wholesalers, Nondurable Goods	D. Higher proximity but can be safeguarded
Ferroalloy Manufacturing	Primary Metal Manufacturing	C. Lower proximity
Fiber, Yarn, and Thread Mills	Textile Mills	C. Lower proximity

Financial Investment Activities	Securities intermediation & related activities	B. Can be performed remotely
Florists	Miscellaneous Store Retailers	E. Higher proximity and hard to safeguard
Food Manufacturing	Food Manufacturing	A. Essential / currently open
Footwear Manufacturing	Leather & allied product manufacturing	C. Lower proximity
Forest Nurseries	Forestry and Logging	C. Lower proximity
Forging	Fabricated Metal Product Manufacturing	C. Lower proximity
Foundation, Structure, and Building Exterior Contractors	Specialty Trade Contractors	D. Higher proximity but can be safeguarded
Foundries	Primary Metal Manufacturing	C. Lower proximity
Freight Transportation Arrangement	Support Activities for Transportation	A. Essential / currently open
Freight Trucking	Truck Transportation	D. Higher proximity but can be safeguarded
Fruit and Vegetable Preserving	Food Manufacturing	A. Essential / currently open
Furniture Merchant Wholesalers	Merchant Wholesalers, Durable Goods	D. Higher proximity but can be safeguarded
Furniture Related Product Manufacturing	Furniture & related product manufacturing	C. Lower proximity
Furniture Stores	Furniture & home furnishings stores	E. Higher proximity and hard to safeguard
Gambling Industries	Amusement, Gambling, and Recreation Industries	E. Higher proximity and hard to safeguard
Garden Equipment and Supplies Stores	Building Material and Garden Equipment and Supplies Dealers	E. Higher proximity and hard to safeguard
Gasoline Stations	Gasoline Stations	A. Essential / currently open

Gathering of Forest Products	Forestry and Logging	C. Lower proximity
General Freight Trucking	Truck Transportation	D. Higher proximity but can be safeguarded
General Government Support	Executive, Legislative, and Other General Government Support	A. Essential / currently open
General Medical	Hospitals	A. Essential / currently open
General Merchandise Stores	General Merchandise Stores	A. Essential / currently open
General Purpose Machinery Manufacturing	Machinery Manufacturing	C. Lower proximity
General Rental Centers	Rental & leasing services	D. Higher proximity but can be safeguarded
Giving Services	Religious, Grantmaking, Civic, Professional, and Similar Organizations	A. Essential / currently open
Glass Manufacturing	Nonmetallic Mineral Product Manufacturing	C. Lower proximity
Glass Product Manufacturing	Nonmetallic Mineral Product Manufacturing	C. Lower proximity
Grain and Oilseed Milling	Food Manufacturing	A. Essential / currently open
Grantmaking Services	Religious, Grantmaking, Civic, Professional, and Similar Organizations	A. Essential / currently open
Grocery and Related Product Merchant Wholesalers	Merchant Wholesalers, Nondurable Goods	A. Essential / currently open
Grocery Stores	Food and Beverage Stores	A. Essential / currently open
Ground Passenger Transportation	Transit and Ground Passenger Transportation	A. Essential / currently open
Hand tool Manufacturing	Fabricated Metal Product Manufacturing	C. Lower proximity

Hardware Equipment and Supplies Merchant Wholesalers	Merchant Wholesalers, Durable Goods	D. Higher proximity but can be safeguarded
Hardware Manufacturing	Fabricated Metal Product Manufacturing	C. Lower proximity
Health Care Stores	Health & personal care stores	E. Higher proximity and hard to safeguard
Heating Equipment Manufacturing	Machinery Manufacturing	C. Lower proximity
Heating Equipment Merchant Wholesalers	Merchant Wholesalers, Durable Goods	D. Higher proximity but can be safeguarded
Heavy Construction	Heavy and Civil Engineering Construction	A. Essential / currently open
Highway, Street, and Bridge Construction	Heavy and Civil Engineering Construction	A. Essential / currently open
Hobby Stores	Sporting Goods, Hobby, Book, and Music Stores	E. Higher proximity and hard to safeguard
Home Furnishing Merchant Wholesalers	Merchant Wholesalers, Durable Goods	D. Higher proximity but can be safeguarded
Home Furnishings Stores	Furniture & home furnishings stores	E. Higher proximity and hard to safeguard
Home Health Care Services	Ambulatory Health Care Services	A. Essential / currently open
Household Appliance Manufacturing	Electrical Equipment, Appliance, and Component Manufacturing	C. Lower proximity
Household Appliances Wholesalers	Merchant Wholesalers, Durable Goods	D. Higher proximity but can be safeguarded
Household Manufacturing	Furniture & related product manufacturing	C. Lower proximity
Housing Relief Services	Social Assistance	A. Essential / currently open

Independent Artists, Writers, and Performers	Performing Arts, Spectator Sports, and Related Industries	E. Higher proximity and hard to safeguard
Individual Services	Social Assistance	A. Essential / currently open
Industrial Equipment Rental and Leasing	Rental & leasing services	A. Essential / currently open
Industrial Equipment Repair and Maintenance	Repair & maintenance	A. Essential / currently open
Industrial Machinery Manufacturing	Machinery Manufacturing	C. Lower proximity
Industrial Machinery Rental and Leasing	Rental & leasing services	A. Essential / currently open
Industrial Machinery Repair and Maintenance	Repair & maintenance	A. Essential / currently open
Information Services	Other Information Services	C. Lower proximity
Inland Water Transportation	Water Transportation	D. Higher proximity but can be safeguarded
Institutional Furniture Manufacturing	Furniture & related product manufacturing	C. Lower proximity
Insurance Agencies	Insurance Carriers and Related Activities	B. Can be performed remotely
Insurance and Employee Benefit Funds	Funds, Trusts, and Other Financial Vehicles	B. Can be performed remotely
Insurance Brokerages	Insurance Carriers and Related Activities	B. Can be performed remotely
Insurance Carriers	Insurance Carriers and Related Activities	B. Can be performed remotely
Insurance Related Activities	Insurance Carriers and Related Activities	B. Can be performed remotely
Investigation Services	Administrative & support services	C. Lower proximity
Investment Pools and Funds	Funds, Trusts, and Other Financial Vehicles	B. Can be performed remotely
Iron Manufacturing	Primary Metal Manufacturing	C. Lower proximity
Iron Mills	Primary Metal Manufacturing	C. Lower proximity

Jewelry Stores	Clothing & clothing accessories stores	E. Higher proximity and hard to safeguard
Junior Colleges	Educational Services	F. Education
Kitchen Cabinet Manufacturing	Furniture & related product manufacturing	C. Lower proximity
Land Subdivision	Heavy and Civil Engineering Construction	A. Essential / currently open
Laundry Services	Personal & laundry services	A. Essential / currently open
Lawn Equipment and Supplies Stores	Building Material and Garden Equipment and Supplies Dealers	E. Higher proximity and hard to safeguard
Leather and Hide Tanning and Finishing	Leather & allied product manufacturing	C. Lower proximity
Leather Goods Stores	Clothing & clothing accessories stores	E. Higher proximity and hard to safeguard
Leather Manufacturing	Leather & allied product manufacturing	C. Lower proximity
Legal Services	Professional, Scientific, and Technical Services	A. Essential / currently open
Lessors of Nonfinancial Intangible Assets (except Copyrighted Works)	Lessors of Nonfinancial Intangible Assets (except Copyrighted Works)	B. Can be performed remotely
Lessors of Real Estate	Real Estate	D. Higher proximity but can be safeguarded
Lime and Gypsum Product Manufacturing	Nonmetallic Mineral Product Manufacturing	C. Lower proximity
Limousine Service	Transit and Ground Passenger Transportation	A. Essential / currently open
Liquor Stores	Food and Beverage Stores	A. Essential / currently open
Local Delivery	Couriers and Messengers	A. Essential / currently open
Local Messengers	Couriers and Messengers	A. Essential / currently open

Logging	Forestry and Logging	C. Lower proximity
Luggage Stores	Clothing & clothing accessories stores	E. Higher proximity and hard to safeguard
Lumber Merchant Wholesalers	Merchant Wholesalers, Durable Goods	D. Higher proximity but can be safeguarded
Machine Shops; Turned Product; and Screw, Nut, and Bolt Manufacturing	Fabricated Metal Product Manufacturing	C. Lower proximity
Machinery, Equipment, and Supplies Merchant Wholesalers	Merchant Wholesalers, Durable Goods	D. Higher proximity but can be safeguarded
Mail-Order Houses	Nonstore Retailers	A. Essential / currently open
Management of Companies and Enterprises	Management of Companies and Enterprises	A. Essential / currently open
Management Training	Educational Services	F. Education
Management, Scientific, and Technical Consulting Services	Professional, Scientific, and Technical Services	A. Essential / currently open
Managers for Artists, Athletes, Entertainers, and Other Public Figures	Performing Arts, Spectator Sports, and Related Industries	B. Can be performed remotely
Manufacturing and Reproducing Magnetic and Optical Media	Computer & electronic product manufacturing	C. Lower proximity
Medical Equipment and Supplies Manufacturing	Miscellaneous Manufacturing	C. Lower proximity
Medical Laboratories	Ambulatory Health Care Services	A. Essential / currently open
Mental Health Facilities	Nursing and Residential Care Facilities	A. Essential / currently open

Metal and Mineral (except Petroleum) Merchant Wholesalers	Merchant Wholesalers, Durable Goods	D. Higher proximity but can be safeguarded
Metal Ore Mining	Mining (except Oil and Gas)	C. Lower proximity
Metalworking Machinery Manufacturing	Machinery Manufacturing	C. Lower proximity
Mining Machinery Manufacturing	Machinery Manufacturing	C. Lower proximity
Mining Support Activities	Support Activities for Mining	A. Essential / currently open
Miscellaneous Durable Goods Merchant Wholesalers	Merchant Wholesalers, Durable Goods	D. Higher proximity but can be safeguarded
Miscellaneous Manufacturing	Miscellaneous Manufacturing	C. Lower proximity
Miscellaneous Nondurable Goods Merchant Wholesalers	Merchant Wholesalers, Nondurable Goods	D. Higher proximity but can be safeguarded
Miscellaneous Store Retailers	Miscellaneous Store Retailers	E. Higher proximity and hard to safeguard
Monetary Authorities-Central Bank	Monetary Authorities - Central Bank	B. Can be performed remotely
Motion Picture and Video Industries	Motion Picture and Sound Recording Industries	D. Higher proximity but can be safeguarded
Motor Vehicle and Motor Vehicle Parts and Supplies Merchant Wholesalers	Merchant Wholesalers, Durable Goods	D. Higher proximity but can be safeguarded
Motor Vehicle Body and Trailer Manufacturing	Transportation Equipment Manufacturing	C. Lower proximity
Motor Vehicle Dealers	Motor Vehicle and Parts Dealers	A. Essential / currently open

Motor Vehicle Manufacturing	Transportation Equipment Manufacturing	C. Lower proximity
Motor Vehicle Parts Manufacturing	Transportation Equipment Manufacturing	C. Lower proximity
Museums, Historical Sites, and Similar Institutions	Museums, Historical Sites, and Similar Institutions	D. Higher proximity but can be safeguarded
Musical Instrument Stores	Sporting Goods, Hobby, Book, and Music Stores	E. Higher proximity and hard to safeguard
Natural Gas Distribution	Utilities	A. Essential / currently open
Navigational, Measuring, Electromedical, and Control Instruments Manufacturing	Computer & electronic product manufacturing	C. Lower proximity
News Dealers	Sporting Goods, Hobby, Book, and Music Stores	E. Higher proximity and hard to safeguard
Newspaper, Periodical, Book, and Directory Publishers	Publishing Industries (except Internet)	A. Essential / currently open
Nondepository Credit Intermediation	Credit Intermediation and Related Activities	B. Can be performed remotely
Nonferrous Metal (except Aluminum) Production and Processing	Primary Metal Manufacturing	C. Lower proximity
Nonmetallic Mineral Mining and Quarrying	Mining (except Oil and Gas)	C. Lower proximity
Nonmetallic Mineral Product Manufacturing	Nonmetallic Mineral Product Manufacturing	C. Lower proximity
Nonmetallic Mineral Product Manufacturing	Computer & electronic product manufacturing	C. Lower proximity

Nonresidential Building Construction	Construction of Buildings	D. Higher proximity but can be safeguarded
Nonscheduled Air Transportation	Air Transportation	H. Airports
Notions Merchant Wholesalers	Merchant Wholesalers, Nondurable Goods	D. Higher proximity but can be safeguarded
Nursing Care Facilities (Skilled Nursing Facilities)	Nursing and Residential Care Facilities	A. Essential / currently open
Office Administrative Services	Administrative & support services	C. Lower proximity
Office Furniture (including Fixtures) Manufacturing	Furniture & related product manufacturing	C. Lower proximity
Office Supplies, Stationery, and Gift Stores	Miscellaneous Store Retailers	E. Higher proximity and hard to safeguard
Offices of Dentists	Ambulatory Health Care Services	A. Essential / currently open
Offices of Other Health Practitioners	Ambulatory Health Care Services	A. Essential / currently open
Offices of Physicians	Ambulatory Health Care Services	A. Essential / currently open
Offices of Real Estate Agents and Brokers	Real Estate	D. Higher proximity but can be safeguarded
Oil and Gas Extraction	Oil and Gas Extraction	A. Essential / currently open
Other Transportation Equipment Manufacturing	Transportation Equipment Manufacturing	C. Lower proximity
Other Wood Product Manufacturing	Wood Product Manufacturing	C. Lower proximity
Outpatient Care Centers	Ambulatory Health Care Services	A. Essential / currently open
Paint, Coating, and Adhesive Manufacturing	Chemical Manufacturing	A. Essential / currently open

Paper and Paper Product Merchant Wholesalers	Merchant Wholesalers, Nondurable Goods	D. Higher proximity but can be safeguarded
Parts Manufacturing	Transportation Equipment Manufacturing	C. Lower proximity
Payroll Services	Professional, Scientific, and Technical Services	A. Essential / currently open
Performing Arts Companies	Performing Arts, Spectator Sports, and Related Industries	E. Higher proximity and hard to safeguard
Peripheral Equipment Manufacturing	Computer & electronic product manufacturing	C. Lower proximity
Personal and Household Goods Repair and Maintenance	Repair & maintenance	D. Higher proximity but can be safeguarded
Personal Care Services	Personal & laundry services	E. Higher proximity and hard to safeguard
Personal Care Stores	Health & personal care stores	E. Higher proximity and hard to safeguard
Personal Services	Personal & laundry services	E. Higher proximity and hard to safeguard
Pesticide, Fertilizer, and Other Agricultural Chemical Manufacturing	Chemical Manufacturing	A. Essential / currently open
Petroleum and Coal Products Manufacturing	Petroleum & coal products manufacturing	C. Lower proximity
Petroleum and Petroleum Products Merchant Wholesalers	Merchant Wholesalers, Nondurable Goods	D. Higher proximity but can be safeguarded
Pharmaceutical and Medicine Manufacturing	Chemical Manufacturing	A. Essential / currently open

Piece Goods Wholesalers	Merchant Wholesalers, Nondurable Goods	D. Higher proximity but can be safeguarded
Pipeline Transportation	Pipeline Transportation	A. Essential / currently open
Pipeline Transportation of Crude Oil	Pipeline Transportation	A. Essential / currently open
Pipeline Transportation of Natural Gas	Pipeline Transportation	A. Essential / currently open
Plastics Product Manufacturing	Plastics & rubber products manufacturing	C. Lower proximity
Plumbing Equipment and Supplies Merchant Wholesalers	Merchant Wholesalers, Durable Goods	D. Higher proximity but can be safeguarded
Plywood Product Manufacturing	Wood Product Manufacturing	C. Lower proximity
Postal Service	Postal Service	A. Essential / currently open
Precision Equipment Repair and Maintenance	Repair & maintenance	A. Essential / currently open
Primary Metal Manufacturing	Transportation Equipment Manufacturing	C. Lower proximity
Printing and Related Support Activities	Printing & related support activities	C. Lower proximity
Professional and Commercial Equipment and Supplies Merchant Wholesalers	Merchant Wholesalers, Durable Goods	D. Higher proximity but can be safeguarded
Professional Schools	Educational Services	F. Education
Professional Services	Professional, Scientific, and Technical Services	A. Essential / currently open

Promoters of Performing Arts, Sports, and Similar Events	Performing Arts, Spectator Sports, and Related Industries	E. Higher proximity and hard to safeguard
Psychiatric and Substance Abuse Hospitals	Hospitals	A. Essential / currently open
Public Relations and Related Services	Professional, Scientific, and Technical Services	A. Essential / currently open
Pulp, Paper, and Paperboard Mills	Paper Manufacturing	C. Lower proximity
Radio and Television Broadcasting	Broadcasting (except Internet)	A. Essential / currently open
Rail Transportation	Rail Transportation	D. Higher proximity but can be safeguarded
Rail Transportation Support Activities	Support Activities for Transportation	A. Essential / currently open
Railroad Rolling Stock Manufacturing	Transportation Equipment Manufacturing	C. Lower proximity
Real Estate Activities	Real Estate	D. Higher proximity but can be safeguarded
Recreation Industries	Amusement, Gambling, and Recreation Industries	E. Higher proximity and hard to safeguard
Refrigeration Equipment Manufacturing	Machinery Manufacturing	C. Lower proximity
Relief Services	Social Assistance	A. Essential / currently open
Religious Organizations	Religious, Grantmaking, Civic, Professional, and Similar Organizations	A. Essential / currently open
Remediation Services	Waste Management and Remediation Services	A. Essential / currently open

Residential Building Construction	Construction of Buildings	D. Higher proximity but can be safeguarded
Residential Care Facilities	Nursing and Residential Care Facilities	A. Essential / currently open
Residential Intellectual Facilities	Nursing and Residential Care Facilities	A. Essential / currently open
Resin Manufacturing	Chemical Manufacturing	A. Essential / currently open
Restaurants	Food Services and Drinking Places	D. Higher proximity but can be safeguarded
Road Transportation Support Activities	Support Activities for Transportation	A. Essential / currently open
Rooming	Accommodation	D. Higher proximity but can be safeguarded
Rubber Product Manufacturing	Plastics & rubber products manufacturing	C. Lower proximity
RV Parks	Accommodation	D. Higher proximity but can be safeguarded
RV Recreational Camps	Accommodation	D. Higher proximity but can be safeguarded
Satellite Telecommunications	Telecommunications	A. Essential / currently open
Sawmills	Wood Product Manufacturing	C. Lower proximity
Scenic and Sightseeing Transportation, Land	Scenic & sightseeing transportation	E. Higher proximity and hard to safeguard
Scenic and Sightseeing Transportation, Other	Scenic & sightseeing transportation	E. Higher proximity and hard to safeguard
Scenic and Sightseeing Transportation, Water	Scenic & sightseeing transportation	E. Higher proximity and hard to safeguard
Scheduled Air Transportation	Air Transportation	H. Airports

School and Employee Bus Transportation	Transit and Ground Passenger Transportation	A. Essential / currently open
Schools	Educational Services	F. Education
Scientific Research and Development Services	Professional, Scientific, and Technical Services	A. Essential / currently open
Scientific Services	Professional, Scientific, and Technical Services	A. Essential / currently open
Seafood Product Preparation and Packaging	Food Manufacturing	A. Essential / currently open
Securities Exchanges	Securities intermediation & related activities	B. Can be performed remotely
Security Services	Administrative & support services	C. Lower proximity
Semiconductor Component Manufacturing	Computer & electronic product manufacturing	C. Lower proximity
Service Industry Machinery Manufacturing	Machinery Manufacturing	C. Lower proximity
Services to Buildings and Dwellings	Administrative & support services	C. Lower proximity
Sewage Systems	Utilities	A. Essential / currently open
Ship Building	Transportation Equipment Manufacturing	C. Lower proximity
Shipping Container Manufacturing	Fabricated Metal Product Manufacturing	C. Lower proximity
Shoe Stores	Clothing & clothing accessories stores	E. Higher proximity and hard to safeguard
Soap Manufacturing	Chemical Manufacturing	A. Essential / currently open
Social Advocacy Organizations	Religious, Grantmaking, Civic, Professional, and Similar Organizations	A. Essential / currently open
Software Publishers	Publishing Industries (except Internet)	A. Essential / currently open

Sound Recording Industries	Motion Picture and Sound Recording Industries	D. Higher proximity but can be safeguarded
Specialized Design Services	Professional, Scientific, and Technical Services	A. Essential / currently open
Specialty Food Manufacturing	Food Manufacturing	A. Essential / currently open
Specialty Food Stores	Food and Beverage Stores	A. Essential / currently open
Specialty Hospitals	Hospitals	A. Essential / currently open
Specialty Trade Contractors	Specialty Trade Contractors	D. Higher proximity but can be safeguarded
Spectator Sports	Performing Arts, Spectator Sports, and Related Industries	E. Higher proximity and hard to safeguard
Sporting Goods Stores	Sporting Goods, Hobby, Book, and Music Stores	E. Higher proximity and hard to safeguard
Spring Product Manufacturing	Fabricated Metal Product Manufacturing	C. Lower proximity
Stamping	Fabricated Metal Product Manufacturing	C. Lower proximity
Steel Mills	Primary Metal Manufacturing	C. Lower proximity
Steel Product Manufacturing from Purchased Steel	Primary Metal Manufacturing	C. Lower proximity
Storage	Warehousing & storage	D. Higher proximity but can be safeguarded
Structural Metals Manufacturing	Fabricated Metal Product Manufacturing	C. Lower proximity
Subscription Programming	Broadcasting (except Internet)	A. Essential / currently open
Substance Abuse Facilities	Nursing and Residential Care Facilities	A. Essential / currently open
Sugar Product Manufacturing	Food Manufacturing	A. Essential / currently open

Supplies Merchant Wholesalers	Merchant Wholesalers, Durable Goods	D. Higher proximity but can be safeguarded
Support Services	Administrative & support services	C. Lower proximity
Surgical Hospitals	Hospitals	A. Essential / currently open
Synthetic Fibers and Filaments Manufacturing	Chemical Manufacturing	A. Essential / currently open
Synthetic Rubber Manufacturing	Chemical Manufacturing	A. Essential / currently open
Tank Manufacturing	Fabricated Metal Product Manufacturing	C. Lower proximity
Tax Preparation	Professional, Scientific, and Technical Services	A. Essential / currently open
Taxi Service	Transit and Ground Passenger Transportation	A. Essential / currently open
Technical Schools	Educational Services	F. Education
Technical Services	Professional, Scientific, and Technical Services	A. Essential / currently open
Telecommunications	Telecommunications	A. Essential / currently open
Textile Coating Mills	Textile Mills	C. Lower proximity
Textile Finishing Coating Mills	Textile Mills	C. Lower proximity
Textile Furnishings Mills	Textile Product Mills	C. Lower proximity
Textile Product Mills	Textile Product Mills	C. Lower proximity
Timber Tract Operations	Forestry and Logging	C. Lower proximity
Tire Stores	Motor Vehicle and Parts Dealers	A. Essential / currently open
Tobacco Manufacturing	Beverage and Tobacco Product Manufacturing	A. Essential / currently open
Toilet Preparation Manufacturing	Chemical Manufacturing	A. Essential / currently open
Tortilla Manufacturing	Food Manufacturing	A. Essential / currently open

Trade Schools	Educational Services	F. Education
Transit Passenger Transportation	Transit and Ground Passenger Transportation	A. Essential / currently open
Transportation Support Activities	Support Activities for Transportation	A. Essential / currently open
Travel Arrangement Services	Administrative & support services	C. Lower proximity
Travel Reservation Services	Administrative & support services	C. Lower proximity
Traveler Accommodation	Accommodation	D. Higher proximity but can be safeguarded
Universities	Educational Services	F. Education
Urban Transit Systems	Transit and Ground Passenger Transportation	A. Essential / currently open
Used Merchandise Stores	Miscellaneous Store Retailers	E. Higher proximity and hard to safeguard
Utility System Construction	Heavy and Civil Engineering Construction	A. Essential / currently open
Vending Machine Operators	Nonstore Retailers	A. Essential / currently open
Veneer Product Manufacturing	Wood Product Manufacturing	C. Lower proximity
Ventilation Equipment Manufacturing	Machinery Manufacturing	C. Lower proximity
Video Equipment Manufacturing	Computer & electronic product manufacturing	C. Lower proximity
Vocational Rehabilitation Services	Social Assistance	A. Essential / currently open
Warehouse Clubs and Supercenters	General Merchandise Stores	A. Essential / currently open
Warehousing	Warehousing & storage	D. Higher proximity but can be safeguarded

Waste Collection	Waste Management and Remediation Services	A. Essential / currently open
Waste Disposal	Waste Management and Remediation Services	A. Essential / currently open
Waste Management Services	Waste Management and Remediation Services	A. Essential / currently open
Waste Treatment	Waste Management and Remediation Services	A. Essential / currently open
Water Systems	Utilities	A. Essential / currently open
Water Transportation Support Activities	Support Activities for Transportation	A. Essential / currently open
Wholesale Electronic Agents	Wholesale Electronic Markets and Agents and Brokers	C. Lower proximity
Wholesale Electronic Brokers	Wholesale Electronic Markets and Agents and Brokers	C. Lower proximity
Wholesale Electronic Markets	Wholesale Electronic Markets and Agents and Brokers	C. Lower proximity
Wine Merchant Wholesalers	Merchant Wholesalers, Nondurable Goods	D. Higher proximity but can be safeguarded
Wine Stores	Food and Beverage Stores	A. Essential / currently open
Wire Product Manufacturing	Fabricated Metal Product Manufacturing	C. Lower proximity
Wired Telecommunications Carriers	Telecommunications	A. Essential / currently open
Wireless Telecommunications Carriers	Telecommunications	A. Essential / currently open
Wood Preservation	Wood Product Manufacturing	C. Lower proximity

Workers' Camps	Accommodation	D. Higher proximity but can be safeguarded

Screening for COVID-19

FloridaHealth.gov/COVID-19 • Florida Department of Health

1 Are you experiencing symptoms?

Symptoms may appear in 2–14 days after exposure to the virus.

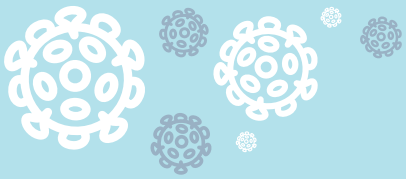
FEVER

COUGH

SHORTNESS OF BREATH

2 Have you returned from international travel or a cruise within the last 14 days and have any of the symptoms above?

3 Have you been around someone diagnosed with COVID-19?



If you answered "yes" to any of the above questions, call your health care provider or your county health department (CHD) by scanning the code for the local CHD finder. Or call 1-866-779-6121.

Guidance

- Self monitor for fever, cough, or other respiratory symptoms for 14 days.
- Avoid contact with sick people.
- Delay any additional travel plans until no longer sick.
- Wash hands often with soap and water for at least 20 seconds.
- Cover mouth and nose with a tissue or sleeve when coughing or sneezing. Throw the tissue in the trash.

Florida Health Office of Communications 03/11/20

COVID-19
Guidance for Businesses & Employees

Florida Department of Health • FloridaHealthCOVID19.gov

Reduce Transmission Among Employees

Encourage sick employees to stay home

- Employees who have symptoms **(fever, cough, or shortness of breath)** should notify their supervisor and stay home.
- Employees should not return to work until the criteria to discontinue home isolation are met, in consultation with healthcare providers. **Learn more at tinyurl.com/vgx83aq**.
- Employees who are well but who have a sick family member at home with COVID-19 should notify their supervisor. Follow the Centers for Disease Control and Prevention's (CDC) recommended precautions at **tinyurl.com/sdf3p46**.
- Reduce the in-office workforce to 50% by encouraging employees to telecommute if possible.
- For more information, refer to the Florida Public Health Advisory at **FloridaHealthCOVID19.gov/News**.

Have Flexible Sick Leave Policies

- Ensure that sick leave policies are flexible and consistent with public health guidance and that employees are aware of and understand these policies.

- Maintain flexible policies that permit employees to stay home to care for a sick family member or take care of children due to school and childcare closures.
- Employers should not require a positive COVID-19 test result or a healthcare provider's (HCP) note for employees who are sick to validate their illness, qualify for sick leave, or to return to work. HCP offices and medical facilities may be extremely busy and not able to provide such documentation quickly.

Maintain a Healthy Work Environment

- Provide tissues and no-touch disposal receptacles if possible.
- Provide soap and water in the workplace.

- Place hand sanitizers with at least 60% alcohol in multiple locations to encourage hand hygiene.
- Discourage handshaking—encourage the use of other noncontact methods of greeting.
- Encourage social distancing by maintaining a distance of **6 feet** from others when possible.

Perform Routine Cleaning and Disinfection

- Routinely clean and disinfect all frequently touched surfaces in the workplace, such as workstations, keyboards, telephones, handrails, and doorknobs.
- Discourage workers from using other workers' phones, desks, offices, or other work tools and equipment, when possible. If necessary, clean and disinfect them before and after use.

- Provide disposable wipes so that commonly used surfaces can be wiped down by employees before each use.

Advise Employees Before Travel

- Check the CDC's Traveler's Health Notices for the latest guidance and recommendations for each country to which you will travel.
- Advise employees to check themselves for symptoms of COVID-19 (fever, cough, or shortness of breath) before starting travel and notify their supervisor and stay home if they are sick.
- Ensure employees who become sick while traveling or on temporary assignment understand that they should notify their supervisor and promptly call a healthcare provider for advice if needed.

Florida Health Office of Communications 03-30-20

COVID-19

Control and Prevention

Measures for protecting workers from exposure to, and infection with, the novel coronavirus, COVID-19 depend on the type of work being performed and exposure risk, including potential for interaction with infectious people and contamination of the work environment. Employers should adapt infection control strategies based on a thorough hazard assessment, using appropriate combinations of engineering and administrative controls, safe work practices, and personal protective equipment (PPE) to prevent worker exposures. Some OSHA standards that apply to preventing occupational exposure to COVID-19 also require employers to train workers on elements of infection prevention, including PPE.

OSHA has developed this interim guidance to help prevent worker exposure to COVID-19.

General guidance for all U.S. workers and employers

U.S. Department of Defense

Regardless of specific exposure risks, following good hand hygiene practices can help workers stay healthy year round.

For all workers, regardless of specific exposure risks, it is always a good practice to:

- 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.
- Avoid touching your eyes, nose, or mouth with unwashed hands.
- Avoid close contact with people who are sick.

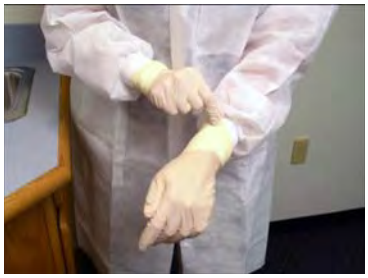
The U.S. Centers for Disease Control and Prevention has developed interim guidance for businesses and employers to plan for and respond to COVID-19. The interim guidance is intended to help prevent workplace exposures to acute respiratory illnesses, including COVID-19. The guidance also addresses considerations that may help employers prepare for more widespread, community outbreaks of COVID-19, in the event that this kind of transmission begins to occur. The guidance is intended for non-healthcare settings; healthcare workers and employers should consult guidance specific to them, below.

Interim guidance for most U.S. workers and employers of workers unlikely to have occupational exposures to COVID-19

For most types of workers, the risk of infection with COVID-19 is similar to that of the general American public.

Employers and workers in operations where there is no specific exposure hazard should remain aware of the evolving outbreak situation. Changes in outbreak conditions may warrant additional precautions in some workplaces not currently highlighted in this guidance.

Interim guidance for U.S. workers and employers of workers with potential occupational exposures to COVID-19



CDC/Kimberly Smith, Christine Ford

OSHA's infection prevention recommendations follow the hierarchy of controls, including using engineering and administrative controls and safe work practices to protect workers from exposure

Workers and employers involved in healthcare, deathcare, laboratory, airline, border protection, and solid waste and wastewater management operations and travel to areas with ongoing, person-to-person transmission of COVID-19 should remain aware of the evolving outbreak situation.

As discussed on the Hazard Recognition page, employers should assess the hazards to which their workers may be exposed; evaluate the risk of exposure; and select, implement, and ensure workers use controls to prevent exposure. Control measures may include a combination of engineering and administrative controls, safe work practices, and PPE.

Identify and Isolate Suspected Cases

In all workplaces where exposure to the COVID-19 may occur, prompt identification and isolation of potentially infectious individuals is a critical first step in protecting workers, visitors, and others at the worksite.

to COVID-19. Depending on work tasks and potential exposures, appropriate PPE for protecting workers from the virus may include gloves, gowns, masks, goggles or face shields, and/or respirators.

- Immediately isolate people suspected of having COVID-19. For example, move potentially infectious people to isolation rooms and close the doors. On an aircraft, move potentially infectious people to seats away from passengers and crew, if possible and without compromising aviation safety. In other worksites, move potentially infectious people to a location away from workers, customers, and other visitors.
- Take steps to limit spread of the person's infectious respiratory secretions, including by providing them a facemask and asking them to wear it, if they can tolerate doing so. Note: A surgical mask 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, including in screening, triage, or healthcare facilities.
- Restrict the number of personnel entering isolation areas, including the room of a patient with suspected/confirmed COVID-19.
- Protect workers in close contact* with the sick person by using additional engineering and administrative control, safe work practices and PPE.
  **CDC defines "close contact" as being about six (6) feet (approximately two (2) meters) from an infected person or within the room or care area of an infected patient for a prolonged period while not wearing recommended PPE. Close contact also includes instances where there is direct contact with infectious secretions while not wearing recommended PPE. Close contact generally does not include brief interactions, such as walking past a person.*

Environmental Decontamination

When someone touches a surface or object contaminated with the virus that causes COVID-19, and then touches their own eyes, nose, or mouth, they may expose themselves to the virus.

Because the transmissibility of COVID-19 from contaminated environmental surfaces and objects is not fully understood, employers should carefully evaluate whether or not work areas occupied by people suspected to have virus may have been contaminated and whether or not they need to be decontaminated in response.

Outside of healthcare and deathcare facilities, there is typically no need to perform special cleaning or decontamination of work environments when a person suspected of having the virus has been present, unless those environments are visibly contaminated with blood or other body fluids. In limited cases where further cleaning and decontamination may be necessary, consult U.S. Centers for Disease Control and Prevention (CDC) guidance for cleaning and disinfecting environments, including those contaminated with other coronavirus.

Workers who conduct cleaning tasks must be protected from exposure to blood, certain body fluids, and other potentially infectious materials covered by OSHA's Bloodborne Pathogens standard (29 CFR 1910.1030) and from hazardous chemicals used in these tasks. In these cases, the PPE (29 CFR 1910 Subpart I) and Hazard Communication (29 CFR 1910.1200) standards may also apply. Do not use compressed air or water sprays to clean potentially contaminated surfaces, as these techniques may aerosolize infectious material.

See the interim guidance for specific worker groups and their employers, below, for further information.

Worker Training

Train all workers with reasonably anticipated occupational exposure to COVID-19 (as described in this document) 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 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. Applicable standards include the PPE (29 CFR 1910.132), Eye and Face Protection (29 CFR 1910.133), Hand Protection (29 CFR 1910.138), and Respiratory Protection (29 CFR 1910.134) standards. The OSHA website offers a variety of training videos on respiratory protection.

When the potential exists for exposure to human blood, certain body fluids, or other potentially infectious materials, workers must receive training required by the Bloodborne Pathogens (BBP) standard (29 CFR 1910.1030), including information about how to recognize tasks that may involve exposure and the methods, such as engineering controls, work practices, and PPE, to reduce exposure. Further information on OSHA's BBP training regulations and policies is available for employers and workers on the OSHA Bloodborne Pathogens and Needlestick Prevention Safety and Health Topics page.

OSHA's Training and Reference Materials Library contains training and reference materials developed by the OSHA Directorate of Training and Education as well as links to other related sites. The materials listed for Bloodborne Pathogens, PPE, Respiratory Protection, and SARS may provide additional material for employers to use in preparing training for their workers.

OSHA's Personal Protective Equipment Safety and Health Topics page also provides information on training in the use of PPE.

Interim guidance for specific worker groups and their employers

This section provides information for specific worker groups and their employers who may have potential exposures to COVID-19. Guidance for each worker group generally follows the hierarchy of controls, including engineering controls, administrative controls, safe work practices, and PPE. However, not all types of controls are provided in each section; in those cases, employers and workers should consult the interim general guidance for U.S. workers and employers of workers with potential occupational exposures to COVID-19, above.

Healthcare Workers and Employers

This section provides guidance for healthcare workers and employers. This guidance supplements the interim guidance for U.S. workers and employers of workers with potential occupational exposures to COVID-19, above.

Until more is known about how the COVID-19 spreads, CDC and OSHA recommend using a combination of standard precautions, contact precautions, airborne precautions, and eye protection (e.g., goggles or face shields) to protect healthcare workers with exposure to the virus.

CDC provides the most updated infection prevention and control recommendations for healthcare workers managing suspected or confirmed cases of COVID-19.

Employers of healthcare workers are responsible for following applicable OSHA requirements, including OSHA's Bloodborne Pathogens (29 CFR 1910.1030), Personal Protective Equipment (29 CFR 1910.132), and Respiratory Protection (29 CFR 1910.134) standards. See the Standards page for additional information on OSHA requirements.

Engineering Controls

Engineering controls are the first line of defense in healthcare facilities to shield healthcare workers, patients, and visitors from individuals with suspected/confirmed COVID-19. This includes physical barriers or partitions in triage areas to guide patients, curtains separating patients in semi-private areas, and airborne infection isolation rooms (AIIRs) with proper ventilation.

Place patients with suspected or confirmed COVID-19 in an AIIR if available at the healthcare facility. AIIRs are single-patient rooms with negative pressure that provide a minimum of 6 air exchanges (existing structures) or 12 air exchanges (new construction or renovation) per hour. Ensure that the room air exhausts directly to the outside, or passes through a HEPA filter, if recirculated.

If an AIIR is not available, isolate the patient in a private room. Keep the door closed.

Isolation tents or other portable containment structures may serve as alternative patient-placement facilities when AIIRs are not available and/or examination room space is limited. Ensure that the room air exhausts directly to the outside, or passes through a HEPA filter, if recirculated.

The CDC/Healthcare Infection Control Practices Advisory Committee (HICPAC) Guidelines for Environmental Infection Control in Healthcare Facilities contains additional information on negative-pressure room control for airborne infection isolation.

Administrative Controls

Consistent with the general interim guidance described above, isolate patients with suspected or confirmed COVID-19 to prevent transmission of the disease to other individuals. If possible, isolating suspected cases separately from confirmed cases may also help prevent transmission.

Restrict the number of personnel entering the room of a patient with suspected/confirmed COVID-19. This may involve training healthcare workers in appropriate use of PPE so they can perform tasks such as housekeeping and meal service to reduce the need for environmental and food service workers to enter areas where suspected or confirmed COVID-19 patients are isolated.

Follow CDC guidelines for signs for and labeling of patient room doors when transmission-based precautions (i.e., contact and airborne precautions) are in place.

Minimize aerosol-generating procedures (AGPs), performing only those that are necessary for clinical diagnosis and care of a patient. Minimize the number of staff present when performing AGPs.

Safe Work Practices

Perform as many tasks as possible in areas away from a patient with suspected/confirmed COVID-19 (e.g., do not remain in an isolation area to perform charting; use closed-circuit television systems to communicate with patients in an isolation area when a worker does not need to be physically present).

Work from clean to dirty (i.e., touching clean body sites or surfaces before touching dirty or heavily contaminated areas) and limit opportunities for touch contamination (e.g., adjusting glasses, rubbing nose, or touching face with gloves that have been in contact with suspected/confirmed COVID-19 patients or contaminated/potentially contaminated surfaces). Also, prevent touch contamination by avoiding unnecessary touching of environmental surfaces (such as light switches and door handles) with contaminated gloves.

Ensure that there are systems in place to: differentiate clean areas (e.g., where PPE is put on) from potentially contaminated areas (e.g., where PPE is removed); handle waste and other potentially infectious materials; and clean, disinfect, and maintain reusable equipment and PPE.

Use caution when handling needles or other sharps, and dispose of contaminated sharps in puncture-proof, labeled, closable sharps containers.

Train and retrain workers on how to follow the established protocols.

Personal Protective Equipment

Healthcare workers must use proper PPE when exposed to a patient with confirmed/suspected COVID-19 or other sources of COVID-19 (See OSHA's PPE standards at 29 CFR 1910 Subpart I).

CDC and OSHA recommend that healthcare workers wear:

- Gowns
- Gloves
- National Institute for Occupational Safety and Health (NIOSH)-certified, disposable N95 or better respirators
- Eye/face protection (e.g., goggles, face shield)

Use respiratory protection as part of a comprehensive respiratory protection program that meets the requirements of OSHA's Respiratory Protection standard (29 CFR 1910.134) and includes medical exams, fit testing, and training.

When doffing potentially contaminated PPE such as a N95 respirator, do not touch the outside of the respirator without wearing gloves.

After removing PPE, always wash hands with soap and water, if available. Ensure that hand hygiene facilities (e.g., sink or alcohol-based hand rub) are readily available at the point of use (e.g., at or adjacent to the PPE doffing area).

Further Information

Emergency medical services (EMS) and medical transport:

- Workers and employers involved in EMS or other medical transport operations will likely need to adapt guidelines for the mobile work environment. That may mean relying on PPE (e.g., respirators) to protect workers when use of AIIRs or other isolation mechanisms are not practical and when staff have potentially prolonged, close contact with suspected or confirmed COVID-19 patients in transit.

Home care:

- CDC has developed interim guidance for healthcare providers who are coordinating the home care and isolation or quarantine of people confirmed or suspected to have COVID-19.

Cleaning and disinfection:

- Follow standard practices for high-level disinfection and sterilization of semi-critical and critical medical devices contaminated with COVID-19, as described in the CDC Guideline for Disinfection and Sterilization in Healthcare Facilities, 2008.
- At this time, there is no EPA-approved list of disinfectants effective against COVID-19. EPA does not categorize disinfectants as hospital- or commercial-grade or keep a list of EPA-registered antimicrobial products registered for use in healthcare facilities. As a result, products effective at inactivating the virus must be determined based on data associated with inactivating similar or hardier (i.e., more difficult to inactivate) viruses. COVID-19 is a coronavirus and highly susceptible to inactivation by many commonly used disinfectants. Currently, OSHA recommends following SARS disinfection practices (see section D-10 in the linked document) for environmental areas contaminated with COVID-19.

The CDC advises the use of EPA-registered chemical germicides that provide low or intermediate level disinfection for SARS during general use (surface and noncritical patient-care equipment) because these products inactivate related viruses with similar physical and biochemical properties. CDC's Guideline for Disinfection and Sterilization in Healthcare Facilities, 2008 provides information on the effectiveness of germicides on coronaviruses.

Deathcare Workers and Employers

This section provides guidance for deathcare workers, such as coroners, medical examiners, autopsy technicians, funeral directors, and other mortuary workers. This guidance supplements the general, interim guidance for U.S. workers and employers of workers with potential occupational exposures to COVID-19, above.

Until more is known about how the COVID-19 spreads, CDC and OSHA recommend using a combination of standard precautions, contact precautions, airborne precautions, and eye protection (e.g., goggles or face shields) to protect mortuary and other deathcare workers with exposure to the virus.

Mortuary and other deathcare workers who have contact with the remains of people who have died from COVID-19 infection must be protected from exposure to infected blood and body fluids, contaminated objects, or other contaminated environmental surfaces.

Employers of mortuary and other deathcare workers are responsible for following applicable OSHA requirements, including OSHA's Bloodborne Pathogens (29 CFR 1910.1030), Personal Protective Equipment (29 CFR 1910.132), and Respiratory Protection (29 CFR 1910.134) standards. See the Standards page for additional information on OSHA requirements.

Prompt cremation or burial of the remains of individuals who have died of COVID-19 can help prevent worker exposure to the virus. (State and local requirements may dictate whether or not the remains of individuals who have died of certain infectious diseases can be buried or if they must be cremated.)

Follow recognized good biosafety practices to prevent or minimize transmission of infectious agents (i.e., COVID-19). To protect workers from COVID-19 exposure, OSHA recommends suspension of *post mortem* or autopsy procedures on patients with suspected/confirmed COVID-19 infection. Although the infection process is not fully understood, this recommendation considers the potential for very high viral load (i.e., the number of viral particles in the body) at death and sources of exposure to workers performing autopsy procedures. If deemed necessary and appropriate, OSHA recommends strict adherence to basic safety procedures used for any autopsy on human remains, the general guidanceapplicable to all workers provided at the beginning of this page, and the controls described below.

Engineering Controls

Perform autopsies on remains of people who have died from COVID-19 infection in autopsy suites that have adequate air-handling systems. This includes systems that maintain negative pressure relative to adjacent areas and that provide a minimum of 6 air exchanges (existing structures) or 12 air exchanges (new construction or renovation) per hour. Ensure that room air exhausts directly to the outside, or passes through a HEPA filter, if recirculated. Direct air (from exhaust systems around the autopsy table) downward and away from workers performing autopsy procedures. CDC's Guidelines for Isolation Precautions: Preventing Transmission of Infectious Agents in Healthcare Settings provides guidelines for AIIR use and recommendations for air exchange rates, which are similar to what should be followed in autopsy suites. Section VIII - Infection Control for Laboratory and Pathology Procedures of CDC's Infection Control in Healthcare, Home, and Community Settings for SARS also provides guidance applicable to pathology work, including autopsies, for coronaviruses.

Use a biosafety cabinet for the handling and examination of smaller specimens and other containment equipment whenever possible.

Equipment, such as saws, should be equipped with vacuum shrouds to capture aerosols.

Administrative Controls

Restrict the number of personnel entering the autopsy suite. This may involve training mortuary workers, such as medical examiners or autopsy technicians, to perform environmental services tasks (e.g., cleaning and decontamination) in lieu of additional workers entering such areas.

Minimize aerosol-generating procedures (AGPs), performing only those that are necessary to perform the autopsy or prepare remains for cremation or burial.

Minimize the number of staff present when performing AGPs. Exclude those who may be necessary for other procedures but not specifically the AGP.

Safe Work Practices

Follow standard safety procedures for preventing injuries to/through the skin during autopsy. Use caution when handling needles or other sharps, and dispose of contaminated sharps in puncture-proof, labeled, closable sharps containers.

Personal Protective Equipment

All mortuary workers and other deathcare workers who have contact with human remains known or suspected to be contaminated with COVID-19 must wear appropriate PPE (see OSHA's PPE standards, 29 CFR 1910 Subpart I). For workers performing autopsies, this includes typical autopsy PPE, such as:

- Double surgical gloves interposed with a layer of cut-proof synthetic mesh gloves
- Scrub suit worn under an impermeable gown or apron
- Goggles or face shield
- Shoe covers
- Surgical cap

Additionally, because of the sustained likelihood of aerosol generation during various steps of autopsy procedures, use respiratory protection as part of a comprehensive respiratory protection program that meets the requirements of OSHA's Respiratory Protection standard (29 CFR 1910.134) and includes NIOSH-certified disposable N95 or better respirators, medical exams, fit testing, and training. Powered, air-purifying respirators (PAPRs) with HEPA filters may provide increased worker comfort during extended autopsy procedures.

Remove PPE before leaving the autopsy suite and follow appropriate disposal requirements. After removing PPE, always wash hands with soap and water, if available. Ensure that hand hygiene facilities (e.g., sink or alcohol-based hand rub) are readily available at the point of use (e.g., at or adjacent to the PPE doffing area).

For other workers handling human remains:

- Wear nonsterile, nitrile gloves when handling potentially infectious materials.
- If there is a risk of cuts, puncture wounds or other injuries that break the skin, wear heavy-duty gloves over the nitrile gloves.
- Wear a clean, long-sleeved fluid-resistant or impermeable gown to protect the clothing.
- Use a plastic face shield or a surgical mask and goggles to protect the face, eyes, nose and mouth from potentially infectious body fluids.
- If there is a risk of aerosol generation while handling human remains, use respiratory protection as part of a comprehensive respiratory protection program that meets the requirements of OSHA's Respiratory Protection standard (29 CFR 1910.134) and includes NIOSH-certified N95 or better respirators, medical exams, fit testing, and training. PAPRs with HEPA filters may provide increased worker comfort during extended autopsy procedures.

See the OSHA Fact Sheet, Health and Safety Recommendations for Workers Who Handle Human Remains, for more guidelines to ensure worker safety when handling human remains.

Laboratory Workers and Employers

This section provides guidance for clinical and research laboratory workers and employers. This guidance supplements the general, interim guidance for U.S. workers and employers of workers with potential occupational exposures to COVID-19, above.

Until more is known about how the COVID-19 spreads, CDC and OSHA recommend using a combination of standard precautions, contact precautions, airborne precautions, and eye protection (e.g., goggles or face shields) to protect laboratory workers with exposure to the virus.

Clinical laboratory employers and workers who handle specimens associated with COVID-19 infections should follow both CDC's interim laboratory biosafety guidelines and OSHA's recommendations in this section.

Laboratory workers who handle clinical specimens from patients with suspected/confirmed COVID-19 or samples of COVID-19 as part of research and development work must be protected from exposure.

Follow recognized good biosafety practices to prevent or minimize transmission of infectious agents (i.e., COVID-19). Laboratories should already be using standard precautions as specified in the general guidance above, and should be following standard laboratory practices. These practices should continue when working with COVID-19 samples/specimens. This includes clinical and microbiological laboratories performing routine diagnostic, analytical, or other research-related tests on serum, blood, sputum (respiratory), and other specimens.

Employers of laboratory workers are responsible for following applicable OSHA requirements, including OSHA's Bloodborne Pathogens (29 CFR 1910.1030), Personal Protective Equipment (29 CFR 1910.132), Respiratory Protection (29 CFR 1910.134), and Occupational Exposure to Hazardous Chemicals in Laboratories (29 CFR 1910.1450) standards.

Laboratory employers should routinely review standard laboratory practices and safety and health procedures with lab workers; train and test the competency of workers in appropriate implementation of these procedures and practices; and ensure consistent adherence to them.

Laboratory personnel working with samples suspected/confirmed to contain COVID-19 should immediately report to their supervisor any incidents or accidents involving potential or actual exposure to COVID-19, as well as development of symptoms consistent with COVID-19.

Employers should implement appropriate protocols for handling, storing, and shipping specimens and ensure adherence by all laboratory workers. Packaging, shipping, and transport of specimens suspected or known to be contaminated with COVID-19 may be regulated by:

- OSHA's Bloodborne Pathogens standard (29 CFR 1910.1030), if the specimen either is blood or contains another body fluid that is visibly contaminated with blood
- The U.S. Department of Transportation's Hazardous Materials Regulations
- CDC and USDA permitting requirements for biological select agents and toxins
- State and local requirements

Laboratories should ensure that their facilities and precautions meet the appropriate Biosafety Level (BSL) for the type of work conducted (including the specific biological agents – in this case, COVID-19) in the lab. The CDC's Biosafety in Microbiological and Biomedical Laboratories (BMBL), 5th Edition provides detailed guidance on BSLs in Section IV - Laboratory Biosafety Level Criteria. Increasing BSL levels involves more worker training, higher levels of containment of samples and other sources of pathogens, specially-designed air handling systems, additional worker PPE, and other stricter controls. For example, at BSL-2, access to laboratories and other controlled work areas is

limited when work is occurring and certain procedures are conducted in biosafety cabinets or other containment equipment. At BSL-3, in addition to controlling access to laboratories and work areas, all work involving infectious materials is conducted in biosafety cabinets or other containment equipment.

Virus isolation in cell culture and initial characterization of viral agents recovered in cultures of COVID-19 specimens are not recommended at this time, except at a BSL-3 facility.

Consistent with the BMBL guidance, the following procedures may be conducted at BSL-2:

- Pathologic examination and processing of formalin-fixed or otherwise inactivated tissues
- Molecular analysis of extracted nucleic acid preparations
- Electron microscopic studies with glutaraldehyde-fixed grids
- Routine examination of bacterial and fungal cultures
- Routine staining and microscopic analysis of fixed smears
- Final packaging of specimens for transport to diagnostic laboratories for additional testing (specimens should already be in a sealed, decontaminated primary container)

Perform activities involving manipulation of untreated specimens in BSL-2 facilities using a Class II BSC. A site-specific risk assessment should be performed to determine if enhanced biosafety precautions, such as those consistent with BSL-3, are warranted based on situational needs (e.g. high testing volumes), including when:

- Aliquoting and/or diluting specimens
- Inoculating bacterial or mycological culture media
- Performing diagnostic tests that do not involve propagation of viral agents in vitro or in vivo
- Nucleic acid extraction procedures involving potentially infected specimens
- Preparation and chemical- or heat-fixing of smears for microscopic analysis

In addition to the general guidance, applicable to all workers provided at the beginning of this tab, OSHA recommends the following controls for laboratory workers:

Engineering Controls

To maximize worker protection, perform as much work as possible in a properly maintained and certified biosafety cabinet (BSC). Class I BSCs use negative pressure and high-efficiency particulate arrest (HEPA) filters to contain agents and protect workers and the environment. Class II and III BSCs provide higher levels of containment and filtration that also protect samples or other products in the BSC from contamination.

Ensure that all procedures involving manipulation of untreated specimens or that have the potential to generate aerosols (e.g., vortexing or sonication of specimens in an open tube, etc.) are conducted in a BSC while following BSL-3 practices. [4] Use appropriate physical containment devices (such as sealed centrifuge rotors or safety carriers with gaskets) for centrifugation.

The OSHA Fact Sheet, Laboratory Safety Biosafety Cabinets (BSC), provides guidance on training and effective use of BSCs.

Administrative Controls

Train all laboratory personnel on any additional procedures developed by the employer for safely handling specimens from patients with suspected/confirmed COVID-19. This includes training on the communication procedures in effect between the clinical and laboratory staff to ensure timely notification and proper labeling of suspected/confirmed COVID-19 contaminated specimens. Training must be offered during scheduled work times and at no cost to the employee.

Use administrative controls that maximize the protectiveness of engineering controls, including BSCs. For example, maintain chemical reagents involved in research or diagnostic work below their lower explosive limits, especially in BSCs.

Safe Work Practices

Use work practices that maximize the protectiveness of engineering controls, including BSCs. For example, if a BSC does not operate continuously, turn it on and allow it to operate for several minutes before use to allow airflow to stabilize. Similarly, wait a few moments before beginning work after inserting arms into a BSC to allow the protective air curtain around the arms to stabilize.

Use technical procedures that minimize the formation of aerosols and droplets. As a corollary, avoid procedures that generate aerosols and droplets (e.g., pipetting, vortexing tubes) and perform any necessary aerosol-generating procedures in containment (e.g., inside a BSC) and/or while using appropriate precautions, including worker PPE.

Use caution when handling needles or other sharps, and dispose of contaminated sharps in puncture-proof, labeled, closable sharps containers.

See general guidance for recommendations on disinfection of environmental surfaces and noncritical patient-care equipment potentially contaminated with COVID-19.

Use an autoclave to inactivate infectious material in all waste prior to disposal. Adhere to applicable federal, state

and local regulations when disposing of laboratory waste.

Personal Protective Equipment

All laboratory workers working with COVID-19 must wear appropriate PPE (29 CFR 1910.132). The BSL provides guidance for selecting appropriate PPE for the tasks that are conducted. This may include disposable nonsterile gloves, laboratory coat/gown, and eye protection when handling specimens at BSL-2 or above. The lab coat or solid-front gown should have a knit or grip cuff. Use double gloves that extend over the sleeve of the lab coat or gown.

At BSL-3, including when conducting procedures that may generate aerosols, use a NIOSH-certified N95 (or higher) respirator as part of a comprehensive respiratory protection program that meets the requirements of OSHA's Respiratory Protection standard (29 CFR 1910.134) and includes medical exams, fit testing, and training.

When using a BSC, remove the outer pair of gloves before exiting the BSC, and don a new pair when reentering the BSC.

Further Information

Biosafety in Microbiological and Biomedical Laboratories (BMBL), 5th Edition provides guidance on protecting workers in laboratory environments. The following sections may be particularly relevant:

- Section VII - Occupational Health and Immunoprophylaxis
- Section VIII - E – Viral Agents Agent Summary

The WHO resource, Laboratory Biosafety Manual - Third Edition, contains additional practical guidance on biosafety techniques for use in laboratories at all levels.

Airline Workers and Employers

Airline workers and employers can consult the general, interim guidance for U.S. workers and employers of workers with potential occupational exposures to COVID-19, above.

These workers and employers, in addition to airline crewmembers, can also find information in CDC's interim recommendations for airlines and airline crew.

Note: The occupational safety and health of flight crewmembers (i.e., pilot, flight engineer, flight navigator) are under the jurisdiction of the Federal Aviation Administration (FAA) and not covered by OSHA standards while they are on aircraft in operation. However, under a policy statement issued by FAA and a Memorandum of Understanding (MOU) between the FAA and OSHA, Occupational Safety and Health Standards for Aircraft Cabin Crewmembers, the other aircraft cabin crewmembers are covered by OSHA's Bloodborne Pathogens (29 CFR 1910.1030), Noise, (29 CFR 1910.95) and Hazard Communication (29 CFR 1910.1200) standards while they are on aircraft in operation (which occurs from the time the aircraft is first boarded by a crewmember, preparatory to a flight, to the time the last crewmember leaves the aircraft after completion of that flight, including stops on the ground during which at least one crewmember remains on the aircraft, even if the engines are shut down). These include flight attendants, workers assigned to clean and restock the cabin, and other workers assigned to perform duty in an aircraft cabin when the aircraft is in operation.

Border Protection Workers and Employers

This section provides guidance for workers and employers involved in border protection and screening operations. This guidance supplements the general, interim guidance for U.S. workers and employers of workers with potential occupational exposures to COVID-19, above.

Generally, border protection officers and other workers at most ports of entry do not need special precautions beyond those already used to protect workers from the hazards they encounter during their routine job tasks.

However, various combination of engineering and administrative controls, safe work practices, and PPE may be appropriate for border protection workers, depending on the results of their employers' hazard and risk assessments.

Engineering controls

Use physical barriers to separate border protection officers and other workers from incoming travelers, at least at the point of initial screening and, in particular, when such travelers are arriving from areas where the COVID-19 is spreading.

Use designated areas, such as dedicated, private rooms with closeable doors, to isolate travelers suspected of having COVID-19, including those with obvious or self-reported signs and/or symptoms of infection.

If workers are screening passengers for fever, use contactless (i.e., thermal sensor) thermometers to prevent workers from needing to touch sick travelers and to maximize the distance that can be kept between workers and such travelers.

Personal Protective Equipment

Most border protection officers and other workers are unlikely to need PPE beyond what they use to protect themselves during routine job tasks. However, employers should consider whether their hazard and risk assessments warrant use of items such as gloves or eye and face protection.

Border protection officers entering rooms where travelers with suspected COVID-19 have been isolated, such as during augmented (i.e., secondary, tertiary) screening steps, may need to be protected with higher level PPE, including gowns and NIOSH-certified disposable N95 or better respirators. In those cases, respirators must be used as part of a comprehensive respiratory protection program that meets the requirements of OSHA's Respiratory Protection standard (29 CFR 1910.134) and includes medical exams, fit testing, and training.

After removing PPE, always wash hands with soap and water, if available. Ensure that hand hygiene facilities (e.g., sink or alcohol-based hand rub) are readily available at the point of use (e.g., at or adjacent to the PPE doffing area).

Solid Waste and Wastewater Management Workers and Employers

This section provides guidance for solid waste and wastewater management workers and employers. This guidance supplements the general, interim guidance for U.S. workers and employers of workers with potential occupational exposures to COVID-19, above.

Generally, management of waste that is suspected or known to contain or be contaminated with COVID-19 does not require special precautions beyond those already used to protect workers from the hazards they encounter during their routine job tasks in solid waste and wastewater management.

Some state, local, tribal and/or territorial health or environmental department(s) may have different or additional requirements for managing solid waste and wastewater.

Municipal Waste

Workers and employers should manage municipal (e.g., household, business) solid waste with potential or known COVID-19 contamination like any other non-contaminated municipal waste.

Use typical engineering and administrative controls, safe work practices, and PPE, such as puncture-resistant gloves and face and eye protection, to prevent worker exposure to the waste streams (or types of wastes), including any contaminants in the materials, they manage. Such measures can help protect workers from sharps and other items that can cause injuries or exposures to infectious materials.

Medical Waste

For medical waste with potential or known COVID-19 contamination, manage like any other regulated medical waste. COVID-19 is not a Category A infectious substance.

Use typical engineering and administrative controls, safe work practices, and PPE, such as puncture-resistant gloves and face and eye protection, to prevent worker exposure to the waste streams (or types of wastes), including any contaminants in the materials, they manage. Such measures can help protect workers from sharps and other items that can cause injuries or exposures to infectious materials.

For regulated medical waste information, consult the regulated medical waste information in CDC's Guidelines for Environmental Infection Control in Health-Care Facilities (2003). This document provides additional information related to management of waste streams from hospitals and other healthcare facilities.

CDC also provides information on medical waste management as a Question and Answer page on its coronavirus website.

Recycling

As with municipal waste, employers and workers in the recycling industry should continue to use typical engineering and administrative controls, safe work practices, and PPE, such as puncture-resistant gloves and face and eye protection, to prevent worker exposure to recyclable materials they manage, including any contaminants in the materials.

Wastewater

Coronaviruses are susceptible to the same disinfection conditions in the healthcare setting as other viruses, so current disinfection conditions in wastewater treatment facilities is expected to be sufficient. This includes conditions for practices such as oxidation with hypochlorite (i.e., chlorine bleach) and peracetic acid, as well as inactivation through the use of ultraviolet irradiation.

There is no evidence to suggest that additional, COVID-19-specific protections are needed for employees involved in wastewater management operations, including those at wastewater treatment facilities. Wastewater treatment plant operations should ensure workers follow routine practices to prevent exposure to wastewater, including using the engineering and administrative controls, safe work practices, and PPE normally required for work tasks when handling untreated wastewater.

Business Travelers

Employers and workers considering or planning travel to areas affected by the COVID-19 outbreak should consult CDC's coronavirus information for travelers.

The U.S. Department of State has also issued a travel advisory for China in response to the ongoing outbreak.

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U.S. Centers for Disease Control and Prevention (CDC) Guidance Solid Waste And Wastewater Management Workers And Employers

Personal Protective Equipment (PPE): OSHA's Safety and Health Topics page provides information on training in the use of PPE for workers who conduct cleaning tasks and from hazardous chemicals used in these tasks. Potentially infectious materials are covered by OSHA's Blood borne Pathogens standard (29 CFR 1910.1030). *PPE* (29 CFR 1910.132), *Eye and Face Protection* (29 CFR 1910.133), *Hand Protection* (29 CFR 1910.138), and *Respiratory Protection* (29 CFR 1910.134) standards.

Hazard Communication and hazardous chemicals protection: Applicable standards are found in (29 CFR 1910 Subpart I) (29 CFR 1910.1200). The CDC guidance for Solid Waste and Wastewater Management workers and employers supplements the general, interim guidance for U.S. workers and employers of workers with potential occupational exposures to COVID-19. Management of waste that is suspected or known to contain or be contaminated with COVID-19 does not require special precautions beyond those already used to protect workers from the hazards they encounter during their routine job tasks in solid waste and wastewater management.

Water & Wastewater Treatment Plants/Facilities

Coronaviruses are susceptible to the same disinfection conditions in the healthcare setting as other viruses. Current disinfection practices in water and wastewater treatment plants and facilities are expected to be sufficient. This includes practices such as oxidation with **Sodium Hypochlorite** (chlorine bleach) and **Peracetic Acid**, as well as inactivation through the use of ultraviolet irradiation.

The CDC and OSHA have stated there is no evidence to suggest that additional, COVID-19-specific protections are needed for employees involved in water and wastewater management operations.

Recycling

Employers and workers in the recycling industry should continue to use typical engineering and administrative controls, safe work practices, and PPE, such as puncture-resistant gloves and face and eye protection to prevent worker exposure to recyclable materials including any contaminants in/on materials they are managing.

Municipal Waste

Workers and employers should manage municipal (e.g., household, business) solid waste with potential or known COVID-19 contamination like any other non-contaminated municipal waste.

Use typical engineering and administrative controls, safe work practices, and PPE, such as puncture-resistant gloves and face and eye protection, to prevent worker exposure to the waste streams (or types of wastes), including any contaminants in the materials they manage.

***Medical Waste** – Hospitals, Assisted Living, Rehabilitation Centers and other healthcare facilities:*

For medical waste with potential or known COVID-19 contamination, manage like any other regulated medical waste. COVID-19 is not a Category A infectious substance. (*Category A Infectious Substances are infectious substances in a form that, when exposure to it occurs, is capable of causing permanent disability, life-threatening or fatal disease in otherwise healthy humans or animals*). Use typical engineering and administrative controls, safe work practices, and PPE, such as puncture-resistant gloves and face and eye protection.

- CDC's Guidelines for Environmental Infection Control in Health-Care Facilities (2003). This document provides regulated medical waste information and additional information related to management of medical waste streams.

Guidance on Preparing Workplaces for COVID-19

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www.osha.gov

Occupational Safety and Health Act of 1970

"To assure safe and healthful working conditions for working men and women; by authorizing enforcement of the standards developed under the Act; by assisting and encouraging the States in their efforts to assure safe and healthful working conditions; by providing for research, information, education, and training in the field of occupational safety and health."

This guidance is not a standard or regulation, and it creates no new legal obligations. It contains recommendations as well as descriptions of mandatory safety and health standards. The recommendations are advisory in nature, informational in content, and are intended to assist employers in providing a safe and healthful workplace. The Occupational Safety and Health Act requires employers to comply with safety and health standards and regulations promulgated by OSHA or by a state with an OSHA-approved state plan. In addition, the Act's General Duty Clause, Section 5(a)(1), requires employers to provide their employees with a workplace free from recognized hazards likely to cause death or serious physical harm.

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Guidance on Preparing Workplaces for COVID-19

U.S. Department of Labor
Occupational Safety and Health Administration

OSHA 3990-03 2020

U.S. Department of Labor

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Introduction

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

To reduce the impact of COVID-19 outbreak conditions on businesses, workers, customers, and the public, it is important for all employers to plan now for COVID-19. For employers who have already planned for influenza pandemics, planning for COVID-19 may involve updating plans to address the specific exposure risks, sources of exposure, routes of transmission, and other unique characteristics of SARS-CoV-2 (i.e., compared to pandemic influenza viruses). Employers who have not prepared for pandemic events should prepare themselves and their workers as far in advance as possible of potentially worsening outbreak conditions. Lack of continuity planning can result in a cascade of failures as employers attempt to address challenges of COVID-19 with insufficient resources and workers who might not be adequately trained for jobs they may have to perform under pandemic conditions.

The Occupational Safety and Health Administration (OSHA) developed this COVID-19 planning guidance based on traditional infection prevention and industrial hygiene practices. It focuses on the need for employers to implement engineering, administrative, and work practice controls and personal protective equipment (PPE), as well as considerations for doing so.

This guidance is intended for planning purposes. Employers and workers should use this planning guidance to help identify risk levels in workplace settings and to determine any appropriate control measures to implement. Additional guidance may be needed as COVID-19 outbreak conditions change, including as new information about the virus, its transmission, and impacts, becomes available.

The U.S. Department of Health and Human Services' Centers for Disease Control and Prevention (CDC) provides the latest information about COVID-19 and the global outbreak: www.cdc.gov/coronavirus/2019-ncov.

The OSHA COVID-19 webpage offers information specifically for workers and employers: www.osha.gov/covid-19.

This guidance is advisory in nature and informational in content. It is not a standard or a regulation, and it neither creates new legal obligations nor alters existing obligations created by OSHA standards or the *Occupational Safety and Health Act* (OSH Act). Pursuant to the OSH Act, employers must comply with safety and health standards and regulations issued and enforced either by OSHA or by an OSHA-approved State Plan. In addition, the OSH Act's General Duty Clause, Section 5(a)(1), requires employers to provide their employees with a workplace free from recognized hazards likely to cause death or serious physical harm. OSHA-approved State Plans may have standards, regulations and enforcement policies that are different from, but at least as effective as, OSHA's. Check with your State Plan, as applicable, for more information.

About COVID-19

Symptoms of COVID-19

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

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

How COVID-19 Spreads

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

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

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

Medium exposure risk jobs include those that require frequent and/or close contact with (i.e., within 6 feet of) other people who may be infected with SARS-CoV-2.

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

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

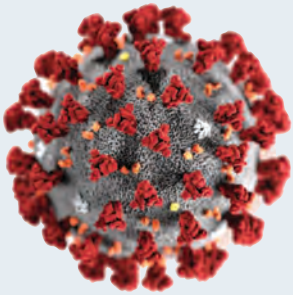
Although the United States has implemented public health measures to limit the spread of the virus, it is likely that some person-to-person transmission will continue to occur.

The CDC website provides the latest information about COVID-19 transmission: www.cdc.gov/coronavirus/2019-ncov/about/transmission.html.

How a COVID-19 Outbreak Could Affect Workplaces

Similar to influenza viruses, SARS-CoV-2, the virus that causes COVID-19, has the potential to cause extensive outbreaks. Under conditions associated with widespread person-to-person spread, multiple areas of the United States and other countries may see impacts at the same time. In the absence of a vaccine, an outbreak may also be an extended event. As a result, workplaces may experience:

- **Absenteeism.** Workers could be absent because they are sick; are caregivers for sick family members; are caregivers for children if schools or day care centers are closed; have at-risk people at home, such as immunocompromised family members; or are afraid to come to work because of fear of possible exposure.
- **Change in patterns of commerce.** Consumer demand for items related to infection prevention (e.g., respirators) is likely to increase significantly, while consumer interest in other goods may decline. Consumers may also change shopping patterns because of a COVID-19 outbreak. Consumers may try to shop at off-peak hours to reduce contact with other people, show increased interest in home delivery services, or prefer other options, such as drive-through service, to reduce person-to-person contact.
- **Interrupted supply/delivery.** Shipments of items from geographic areas severely affected by COVID-19 may be delayed or cancelled with or without notification.



This illustration, created at the Centers for Disease Control and Prevention (CDC), reveals ultrastructural morphology exhibited by the 2019 Novel Coronavirus (2019-nCoV). Note the spikes that adorn the outer surface of the virus, which impart the look of a corona surrounding the virion, when viewed electron microscopically. This virus was identified as the cause of an outbreak of respiratory illness first detected in Wuhan, China.

Photo: CDC / Alissa Eckert & Dan Higgins

Steps All Employers Can Take to Reduce Workers' Risk of Exposure to SARS-CoV-2

This section describes basic steps that every employer can take to reduce the risk of worker exposure to SARS-CoV-2, the virus that causes COVID-19, in their workplace. Later sections of this guidance—including those focusing on jobs classified as having low, medium, high, and very high exposure risks—provide specific recommendations for employers and workers within specific risk categories.

Develop an Infectious Disease Preparedness and Response Plan

If one does not already exist, develop an infectious disease preparedness and response plan that can help guide protective actions against COVID-19.

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 plans.

Plans should consider and address the level(s) of risk associated with various worksites and job tasks workers perform at those sites. Such considerations may include:

- Where, how, and to what sources of SARS-CoV-2 might workers be exposed, including:
  - The general public, customers, and coworkers; and
  - Sick individuals or those at particularly high risk of infection (e.g., international travelers who have visited locations with widespread sustained (ongoing) COVID-19 transmission, healthcare workers who have had unprotected exposures to people known to have, or suspected of having, COVID-19).
- Non-occupational risk factors at home and in community settings.

- Workers' individual risk factors (e.g., older age; presence of chronic medical conditions, including immunocompromising conditions; pregnancy).
- Controls necessary to address those risks.

Follow federal and state, local, tribal, and/or territorial (SLTT) recommendations regarding development of contingency plans 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.

Plans should also consider and address the other steps that employers can take to reduce the risk of worker exposure to SARS-CoV-2 in their workplace, described in the sections below.

Prepare to Implement Basic Infection Prevention Measures

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), 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 emerging viral pathogens claims are expected to be effective against SARS-CoV-2 based on data for harder to kill viruses. Follow the manufacturer's instructions for use of all cleaning and disinfection products (e.g., concentration, application method and contact time, PPE).

Develop Policies and Procedures for Prompt Identification and Isolation of Sick People, if Appropriate

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

- 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 companies that provide your business with contract or temporary employees 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.
- Recognize that workers with ill family members may need to stay home to care for them. See CDC's Interim Guidance for Preventing the Spread of COVID-19 in Homes and Residential Communities: www.cdc.gov/coronavirus/2019-ncov/hcp/guidance-prevent-spread.html.
- 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.

- Work with insurance companies (e.g., those providing employee health benefits) and state and local health agencies to provide information to workers and customers about medical care in the event of a COVID-19 outbreak.

Implement Workplace Controls

Occupational safety and health professionals use a framework called the "hierarchy of controls" to select ways of controlling workplace hazards. In other words, the best way to control a hazard is to systematically remove it from the workplace, rather than relying on workers to reduce their exposure. During a COVID-19 outbreak, when it may not be possible to eliminate the hazard, the most effective protection measures are (listed from most effective to least effective): engineering controls, administrative controls, safe work practices (a type of administrative control), and PPE. There are advantages and disadvantages to each type of control measure when considering the ease of implementation, effectiveness, and cost. In most cases, a combination of control measures will be necessary to protect workers from exposure to SARS-CoV-2.

In addition to the types of workplace controls discussed below, CDC guidance for businesses provides employers and workers with recommended SARS-CoV-2 infection prevention strategies to implement in workplaces: www.cdc.gov/coronavirus/2019-ncov/specific-groups/guidance-business-response.html.

Engineering Controls

Engineering controls involve isolating employees from work-related hazards. In workplaces where they are appropriate, these types of controls reduce exposure to hazards without relying on worker behavior and can be the most cost-effective solution to implement. Engineering controls for SARS-CoV-2 include:

- 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 SARS-CoV-2 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 COVID-19 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 COVID-19 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 for SARS-CoV-2 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 SARS-CoV-2, PPE may also be needed to prevent certain exposures. While correctly using PPE can help prevent some exposures, it should not take the place of other prevention strategies.

Examples of PPE include: gloves, goggles, face shields, face masks, and respiratory protection, when appropriate. During an outbreak of an infectious disease, such as COVID-19, recommendations for PPE specific to occupations or job tasks may change depending on geographic location, updated risk assessments for 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 with SARS-CoV-2 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 with SARS-CoV-2 and those performing aerosol-generating procedures, need to use respirators:

- National Institute for Occupational Safety and Health (NIOSH)-approved, N95 filtering facepiece respirators or better must be used in the context of a comprehensive, written respiratory protection program that includes fit-testing, training, and medical exams. See OSHA's Respiratory Protection standard, 29 CFR 1910.134 at www.osha.gov/laws-regs/regulations/standardnumber/1910/1910.134.
- 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: a 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). See CDC/NIOSH guidance for optimizing respirator supplies at: www.cdc.gov/coronavirus/2019-ncov/hcp/respirators-strategy.

- Consider using PAPRs or SARs, which are more protective than filtering facepiece respirators, for any work operations or procedures likely to generate aerosols (e.g., cough induction procedures, some dental procedures, invasive specimen collection, blowing out pipettes, shaking or vortexing tubes, filling a syringe, centrifugation).
- Use a surgical N95 respirator when both respiratory protection and resistance to blood and body fluids is needed.
- Face shields may also be worn on top of a respirator to prevent bulk contamination of the respirator. Certain respirator designs with forward protrusions (duckbill style) may be difficult to properly wear under a face shield. Ensure that the face shield does not prevent airflow through the respirator.
- Consider factors such as function, fit, ability to decontaminate, disposal, and cost. OSHA's Respiratory Protection eTool provides basic information on respirators such as medical requirements, maintenance and care, fit testing, written respiratory protection programs, and voluntary use of respirators, which employers may also find beneficial in training workers at: www.osha.gov/SLTC/etools/respiratory. Also see NIOSH respirator guidance at: www.cdc.gov/niosh/topics/respirators.
- Respirator training should address selection, use (including donning and doffing), proper disposal or disinfection, inspection for damage, maintenance, and the limitations of respiratory protection equipment. Learn more at: www.osha.gov/SLTC/respiratoryprotection.
- The appropriate form of respirator will depend on the type of exposure and on the transmission pattern of COVID-19. See the NIOSH "Respirator Selection Logic" at: www.cdc.gov/niosh/docs/2005-100/default.html or the OSHA "Respiratory Protection eTool" at www.osha.gov/SLTC/etools/respiratory.

Follow Existing OSHA Standards

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

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

- OSHA's Personal Protective Equipment (PPE) standards (in general industry, 29 CFR 1910 Subpart I), which require using gloves, eye and face protection, and respiratory protection. See: www.osha.gov/laws-regs/regulations/standardnumber/1910#1910_Subpart_I.
  - When respirators are necessary to protect workers or where employers require respirator use, employers must implement a comprehensive respiratory protection program in accordance with the Respiratory Protection standard (29 CFR 1910.134). See: www.osha.gov/laws-regs/regulations/standardnumber/1910/1910.134.
- The General Duty Clause, Section 5(a)(1) of the Occupational Safety and Health (OSH) Act of 1970, 29 USC 654(a)(1), which requires employers to furnish to each worker "employment and a place of employment, which are free from recognized hazards that are causing or are likely to cause death or serious physical harm." See: www.osha.gov/laws-regs/oshact/completeoshact.

OSHA's Bloodborne Pathogens standard (29 CFR 1910.1030) applies to occupational exposure to human blood and other potentially infectious materials that typically do not include respiratory secretions that may transmit SARS-CoV-2. However, the provisions of the standard offer a framework that may help control some sources of the virus, including exposures to body fluids (e.g., respiratory secretions) not covered by the standard. See: www.osha.gov/laws-regs/regulations/standardnumber/1910/1910.1030.

The OSHA COVID-19 webpage provides additional information about OSHA standards and requirements, including requirements in states that operate their own OSHA-approved State Plans, recordkeeping requirements and injury/illness recording criteria, and applications of standards related to sanitation and communication of risks related to hazardous chemicals that may be in common sanitizers and sterilizers. See: www.osha.gov/SLTC/covid-19/standards.html.

Classifying Worker Exposure to SARS-CoV-2

Worker risk of occupational exposure to SARS-CoV-2, the virus that causes COVID-19, during an outbreak may vary from very high to high, medium, or lower (caution) risk. The level of risk depends in part on the industry type, need for contact within 6 feet of people known to be, or suspected of being, infected with SARS-CoV-2, or requirement for repeated or extended contact with persons known to be, or suspected of being, infected with SARS-CoV-2. To help 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 American workers will likely fall in the lower exposure risk (caution) or medium exposure risk levels.

Occupational Risk Pyramid for COVID-19

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 with (i.e., within 6 feet of) people who may be infected with SARS-CoV-2, but who are not known 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 with SARS-CoV-2 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.

Jobs Classified at Lower Exposure Risk (Caution): What to Do to Protect Workers

For workers who do not have frequent contact with the general public, employers should follow the guidance for "Steps All Employers Can Take to Reduce Workers' Risk of Exposure to SARS-CoV-2," on page 7 of this booklet and implement control measures described in this section.

Engineering Controls

Additional engineering controls are not recommended for workers in the lower exposure risk group. Employers should ensure that engineering controls, if any, used to protect workers from other job hazards continue to function as intended.

Administrative Controls

- Monitor public health communications about COVID-19 recommendations and ensure that workers have access to that information. Frequently check the CDC COVID-19 website: www.cdc.gov/coronavirus/2019-ncov.
- Collaborate with workers to designate effective means of communicating important COVID-19 information.

Personal Protective Equipment

Additional PPE is not recommended for workers in the lower exposure risk group. Workers should continue to use the PPE, if any, that they would ordinarily use for other job tasks.

Jobs Classified at Medium Exposure Risk: What to Do to Protect Workers

In workplaces where workers have medium exposure risk, employers should follow the guidance for "Steps All Employers Can Take to Reduce Workers' Risk of Exposure to SARS-CoV-2," on page 7 of this booklet and implement control measures described in this section.

Engineering Controls

- Install physical barriers, such as clear plastic sneeze guards, where feasible.

Administrative Controls

- Consider offering face masks to ill employees and customers to contain respiratory secretions until they are able leave the workplace (i.e., for medical evaluation/care or to return home). In the event of a shortage of masks, a reusable face shield that can be decontaminated may be an acceptable method of protecting against droplet transmission. See CDC/NIOSH guidance for optimizing respirator supplies, which discusses the use of surgical masks, at: www.cdc.gov/coronavirus/2019-ncov/hcp/respirators-strategy.

- Keep customers informed about symptoms of COVID-19 and ask sick customers to minimize contact with workers until healthy again, such as by posting signs about COVID-19 in stores where sick customers may visit (e.g., pharmacies) or including COVID-19 information in automated messages sent when prescriptions are ready for pick up.
- Where appropriate, limit customers' and the public's access to the worksite, or restrict access to only certain workplace areas.
- Consider strategies to minimize face-to-face contact (e.g., drive-through windows, phone-based communication, telework).
- Communicate the availability of medical screening or other worker health resources (e.g., on-site nurse; telemedicine services).

Personal Protective Equipment (PPE)

When selecting PPE, consider factors such as function, fit, decontamination ability, disposal, and cost. Sometimes, when PPE will have to be used repeatedly for a long period of time, a more expensive and durable type of PPE may be less expensive overall than disposable PPE. Each employer should select the combination of PPE that protects workers specific to their workplace.

Workers with medium exposure risk may need to wear some combination of gloves, a gown, a face mask, and/or a face shield or goggles. PPE ensembles for workers in the medium exposure risk category will vary by work task, the results of the employer's hazard assessment, and the types of exposures workers have on the job.

High exposure risk jobs are those with high potential for exposure to known or suspected sources of COVID-19.

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 that involve aerosol generation or specimen collection/handling.

In rare situations that would require workers in this risk category to use respirators, see the PPE section beginning on page 14 of this booklet, which provides more details about respirators. For the most up-to-date information, visit OSHA's COVID-19 webpage: www.osha.gov/covid-19.

Jobs Classified at High or Very High Exposure Risk: What to Do to Protect Workers

In workplaces where workers have high or very high exposure risk, employers should follow the guidance for "Steps All Employers Can Take to Reduce Workers' Risk of Exposure to SARS-CoV-2," on page 7 of this booklet and implement control measures described in this section.

Engineering Controls

- Ensure appropriate air-handling systems are installed and maintained in healthcare facilities. See "Guidelines for Environmental Infection Control in Healthcare Facilities" for more recommendations on air handling systems at: www.cdc.gov/mmwr/preview/mmwrhtml/rr5210a1.htm.
- CDC recommends that patients with known or suspected COVID-19 (i.e., person under investigation) should be placed in an airborne infection isolation room (AIIR), if available.
- Use isolation rooms when available for performing aerosol-generating procedures on patients with known or suspected COVID-19. For postmortem activities, use autopsy suites or other similar isolation facilities when performing 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. See the CDC postmortem guidance at: www.cdc.gov/coronavirus/2019-ncov/hcp/guidance-postmortem-specimens.html. OSHA also provides guidance for postmortem activities on its COVID-19 webpage: www.osha.gov/covid-19.

- Use special precautions associated with Biosafety Level 3 when handling specimens from known or suspected COVID-19 patients. For more information about biosafety levels, consult the U.S. Department of Health and Human Services (HHS) "Biosafety in Microbiological and Biomedical Laboratories" at www.cdc.gov/biosafety/publications/bmbl5.

Administrative Controls

If working in a healthcare facility, follow existing guidelines and facility standards of practice for identifying and isolating infected individuals and for protecting workers.

- Develop and implement policies that reduce exposure, such as cohorting (i.e., grouping) COVID-19 patients when single rooms are not available.
- Post signs requesting patients and family members to immediately report symptoms of respiratory illness on arrival at the healthcare facility and use disposable face masks.
- Consider offering enhanced medical monitoring of workers during COVID-19 outbreaks.
- Provide all workers with job-specific education and training on preventing transmission of COVID-19, including initial and routine/refresher training.
- Ensure that psychological and behavioral support is available to address employee stress.

Safe Work Practices

- Provide emergency responders and other essential personnel who may be exposed while working away from fixed facilities with alcohol-based hand rubs containing at least 60% alcohol for decontamination in the field.

Personal Protective Equipment (PPE)

Most workers at high or very high exposure risk likely need to wear gloves, a gown, a face shield or goggles, and either a face mask or a respirator, depending on their job tasks and exposure risks.

Those who work closely with (either in contact with or within 6 feet of) patients known to be, or suspected of being, infected with SARS-CoV-2, the virus that causes COVID-19, should wear respirators. In these instances, see the PPE section beginning on page 14 of this booklet, which provides more details about respirators. For the most up-to-date information, also visit OSHA's COVID-19 webpage: www.osha.gov/covid-19.

PPE ensembles may vary, especially for workers in laboratories or morgue/mortuary facilities who may need additional protection against blood, body fluids, chemicals, and other materials to which they may be exposed. Additional PPE may include medical/surgical gowns, fluid-resistant coveralls, aprons, or other disposable or reusable protective clothing. Gowns should be large enough to cover the areas requiring protection. OSHA may also provide updated guidance for PPE use on its website: www.osha.gov/covid-19.

NOTE: Workers who dispose of PPE and other infectious waste must also be trained and provided with appropriate PPE.

The CDC webpage "Healthcare-associated Infections" (www.cdc.gov/hai) provides additional information on infection control in healthcare facilities.

Workers Living Abroad or Travelling Internationally

Employers with workers living abroad or traveling on international business should consult the "Business Travelers" section of the OSHA COVID-19 webpage (www.osha.gov/covid-19), which also provides links to the latest:

- CDC travel warnings: www.cdc.gov/coronavirus/2019-ncov/travelers
- U.S. Department of State (DOS) travel advisories: travel.state.gov

Employers should communicate to workers that the DOS cannot provide Americans traveling or living abroad with medications or supplies, even in the event of a COVID-19 outbreak.

As COVID-19 outbreak conditions change, travel into or out of a country may not be possible, safe, or medically advisable. It is also likely that governments will respond to a COVID-19 outbreak by imposing public health measures that restrict domestic and international movement, further limiting the U.S. government's ability to assist Americans in these countries. It is important that employers and workers plan appropriately, as it is possible that these measures will be implemented very quickly in the event of worsening outbreak conditions in certain areas.

More information on COVID-19 planning for workers living and traveling abroad can be found at: www.cdc.gov/travel.

For More Information

Federal, state, and local government agencies are the best source of information in the event of an infectious disease outbreak, such as COVID-19. Staying informed about the latest developments and recommendations is critical, since specific guidance may change based upon evolving outbreak situations.

Below are several recommended websites to access the most current and accurate information:

- Occupational Safety and Health Administration website: www.osha.gov
- Centers for Disease Control and Prevention website: www.cdc.gov
- National Institute for Occupational Safety and Health website: www.cdc.gov/niosh

OSHA Assistance, Services, and Programs

OSHA has a great deal of information to assist employers in complying with their responsibilities under OSHA law. Several OSHA programs and services can help employers identify and correct job hazards, as well as improve their safety and health program.

Establishing a Safety and Health Program

Safety and health programs are systems that can substantially reduce the number and severity of workplace injuries and illnesses, while reducing costs to employers.

Visit www.osha.gov/safetymanagement for more information.

Compliance Assistance Specialists

OSHA compliance assistance specialists can provide information to employers and workers about OSHA standards, short educational programs on specific hazards or OSHA rights and responsibilities, and information on additional compliance assistance resources.

Visit www.osha.gov/complianceassistance/cas or call 1-800-321-OSHA (6742) to contact your local OSHA office.

No-Cost On-Site Safety and Health Consultation Services for Small Business

OSHA's On-Site Consultation Program offers no-cost and confidential advice to small and medium-sized businesses in all states, with priority given to high-hazard worksites. On-Site consultation services are separate from enforcement and do not result in penalties or citations.

For more information or to find the local On-Site Consultation office in your state, visit www.osha.gov/consultation, or call 1-800-321-OSHA (6742).

Under the consultation program, certain exemplary employers may request participation in OSHA's **Safety and Health Achievement Recognition Program (SHARP)**. Worksites that receive SHARP recognition are exempt from programmed inspections during the period that the SHARP certification is valid.

Cooperative Programs

OSHA offers cooperative programs under which businesses, labor groups and other organizations can work cooperatively with OSHA. To find out more about any of the following programs, visit www.osha.gov/cooperativeprograms.

Strategic Partnerships and Alliances

The OSHA Strategic Partnerships (OSP) provide the opportunity for OSHA to partner with employers, workers, professional or trade associations, labor organizations, and/or other interested stakeholders. Through the Alliance Program, OSHA works with groups to develop compliance assistance tools and resources to share with workers and employers, and educate workers and employers about their rights and responsibilities.

Voluntary Protection Programs (VPP)

The VPP recognize employers and workers in the private sector and federal agencies who have implemented effective safety and health programs and maintain injury and illness rates below the national average for their respective industries.

Occupational Safety and Health Training

OSHA partners with 26 OSHA Training Institute Education Centers at 37 locations throughout the United States to deliver courses on OSHA standards and occupational safety and health topics to thousands of students a year. For more information on training courses, visit www.osha.gov/otiec.

OSHA Educational Materials

OSHA has many types of educational materials to assist employers and workers in finding and preventing workplace hazards.

All OSHA publications are free at www.osha.gov/publications and www.osha.gov/ebooks. You can also call 1-800-321-OSHA (6742) to order publications.

Employers and safety and health professionals can sign-up for *QuickTakes*, OSHA's free, twice-monthly online newsletter with the latest news about OSHA initiatives and products to assist in finding and preventing workplace hazards. To sign up, visit www.osha.gov/quicktakes.

OSHA Regional Offices

Region 1
Boston Regional Office
(CT*, ME*, MA, NH, RI, VT*)
JFK Federal Building
25 New Sudbury Street, Room E340
Boston, MA 02203
(617) 565-9860 (617) 565-9827 Fax

Region 2
New York Regional Office
(NJ*, NY*, PR*, VI*)
Federal Building
201 Varick Street, Room 670
New York, NY 10014
(212) 337-2378 (212) 337-2371 Fax

Region 3
Philadelphia Regional Office
(DE, DC, MD*, PA, VA*, WV)
The Curtis Center
170 S. Independence Mall West, Suite 740 West
Philadelphia, PA 19106-3309
(215) 861-4900 (215) 861-4904 Fax

Region 4
Atlanta Regional Office
(AL, FL, GA, KY*, MS, NC*, SC*, TN*)
Sam Nunn Atlanta Federal Center
61 Forsyth Street, SW, Room 6T50
Atlanta, GA 30303
(678) 237-0400 (678) 237-0447 Fax

Region 5
Chicago Regional Office
(IL*, IN*, MI*, MN*, OH, WI)
John C. Kluczynski Federal Building
230 South Dearborn Street, Room 3244
Chicago, IL 60604
(312) 353-2220 (312) 353-7774 Fax

Region 6
Dallas Regional Office
(AR, LA, NM*, OK, TX)
A. Maceo Smith Federal Building
525 Griffin Street, Room 602
Dallas, TX 75202
(972) 850-4145 (972) 850-4149 Fax

Region 7
Kansas City Regional Office
(IA*, KS, MO, NE)
Two Pershing Square Building
2300 Main Street, Suite 1010
Kansas City, MO 64108-2416
(816) 283-8745 (816) 283-0547 Fax

Region 8
Denver Regional Office
(CO, MT, ND, SD, UT*, WY*)
Cesar Chavez Memorial Building
1244 Speer Boulevard, Suite 551
Denver, CO 80204
(720) 264-6550 (720) 264-6585 Fax

Region 9
San Francisco Regional Office
(AZ*, CA*, HI*, NV*, and American Samoa,
Guam and the Northern Mariana Islands)
San Francisco Federal Building
90 7th Street, Suite 2650
San Francisco, CA 94103
(415) 625-2547 (415) 625-2534 Fax

Region 10
Seattle Regional Office
(AK*, ID, OR*, WA*)
Fifth & Yesler Tower
300 Fifth Avenue, Suite 1280
Seattle, WA 98104
(206) 757-6700 (206) 757-6705 Fax

*These states and territories operate their own OSHA-approved job safety and health plans and cover state and local government employees as well as private sector employees. The Connecticut, Illinois, Maine, New Jersey, New York and Virgin Islands programs cover public employees only. (Private sector workers in these states are covered by Federal OSHA). States with approved programs must have standards that are identical to, or at least as effective as, the Federal OSHA standards.

Note: To get contact information for OSHA area offices, OSHA-approved state plans and OSHA consultation projects, please visit us online at www.osha.gov or call us at 1-800-321-OSHA (6742).

How to Contact OSHA

Under the Occupational Safety and Health Act of 1970, employers are responsible for providing safe and healthful workplaces for their employees. OSHA's role is to help ensure these conditions for America's working men and women by setting and enforcing standards, and providing training, education and assistance. For more information, visit www.osha.gov or call OSHA at 1-800-321-OSHA (6742), TTY 1-877-889-5627.

For assistance, contact us.
We are OSHA. We can help.

OSHA®
www.osha.gov

U.S. Department of Labor

For more information:

OSHA® Occupational Safety and Health Administration

www.osha.gov (800) 321-OSHA (6742)

GUIDANCE FOR CLEANING & DISINFECTING

PUBLIC SPACES, WORKPLACES, BUSINESSES, SCHOOLS, AND HOMES

SCAN HERE FOR MORE INFORMATION

1 DEVELOP YOUR PLAN

DETERMINE WHAT NEEDS TO BE CLEANED. Areas unoccupied for 7 or more days need only routine cleaning. Maintain existing cleaning practices for outdoor areas.

DETERMINE HOW AREAS WILL BE DISINFECTED. Consider the type of surface and how often the surface is touched. Prioritize disinfecting frequently touched surfaces.

CONSIDER THE RESOURCES AND EQUIPMENT NEEDED. Keep in mind the availability of cleaning products and personal protective equipment (PPE) appropriate for cleaners and disinfectants.

2 IMPLEMENT

CLEAN VISIBLY DIRTY SURFACES WITH SOAP AND WATER prior to disinfection.

USE THE APPROPRIATE CLEANING OR DISINFECTANT PRODUCT. Use an EPA-approved disinfectant against COVID-19, and read the label to make sure it meets your needs.

ALWAYS FOLLOW THE DIRECTIONS ON THE LABEL. The label will include safety information and application instructions. Keep disinfectants out of the reach of children.

3 MAINTAIN AND REVISE

CONTINUE ROUTINE CLEANING AND DISINFECTION. Continue or revise your plan based upon appropriate disinfectant and PPE availability. Dirty surfaces should be cleaned with soap and water prior to disinfection. Routinely disinfect frequently touched surfaces at least daily.

MAINTAIN SAFE PRACTICES such as frequent handwashing, using cloth face coverings, and staying home if you are sick.

CONTINUE PRACTICES THAT REDUCE THE POTENTIAL FOR EXPOSURE. Maintain social distancing, staying six feet away from others. Reduce sharing of common spaces and frequently touched objects.

Follow guidance from state, tribal, local, and territorial authorities.

For more information, please visit **CORONAVIRUS.GOV**

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MAKING YOUR PLAN TO CLEAN AND DISINFECT

Cleaning with soap and water removes germs, dirt, and impurities from surfaces. It lowers the risk of spreading infection.

Disinfecting kills germs on surfaces. By killing germs on a surface after cleaning, it can further lower the risk of spreading infection.

Is the area indoors?

YES

It is an indoor area.

NO

Maintain existing cleaning practices.

Coronaviruses naturally die in hours to days in typical indoor and outdoor environments. Viruses are killed more quickly by warmer temperatures and sunlight.

Has the area been occupied within the last 7 days?

YES

Yes, the area has been occupied within the last 7 days.

NO

The area has been unoccupied within the last 7 days.

The area will need only routine cleaning.

Is it a frequently touched surface or object?

YES

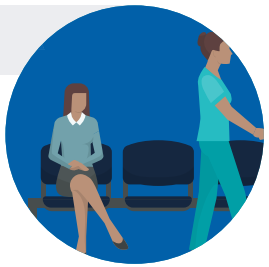
Yes, it is a frequently touched surface or object.

NO

Thoroughly clean these materials.

Consider setting a schedule for routine cleaning and disinfection, as appropriate.

What type of material is the surface or object?



Hard and non-porous materials like glass, metal, or plastic.

Visibly dirty surfaces should be cleaned prior to disinfection.

Consult EPA's list of disinfectants for use against COVID-19, specifically for use on hard, non-porous surfaces and for your specific application need. More frequent cleaning and disinfection is necessary to reduce exposure.

Soft and porous materials like carpet, rugs, or material in seating areas.

Thoroughly clean or launder materials.

Consider removing soft and porous materials in high traffic areas. Disinfect materials if appropriate products are available.

GUIDANCE FOR CLEANING AND DISINFECTING

PUBLIC SPACES, WORKPLACES, BUSINESSES, SCHOOLS, AND HOMES

SCAN HERE FOR MORE INFORMATION

This guidance is intended for all Americans, whether you own a business, run a school, or want to ensure the cleanliness and safety of your home. Reopening America requires all of us to move forward together by practicing social distancing and other daily habits to reduce our risk of exposure to the virus that causes COVID-19. Reopening the country also strongly relies on public health strategies, including increased testing of people for the virus, social distancing, isolation, and keeping track of how someone infected might have infected other people. This plan is part of the larger United States Government plan and focuses on cleaning and disinfecting public spaces, workplaces, businesses, schools, and can also be applied to your home.

Cleaning and disinfecting public spaces including your workplace, school, home, and business will require you to:

- Develop your plan
- Implement your plan
- Maintain and revise your plan

Reducing the risk of exposure to COVID-19 by cleaning and disinfection is an important part of reopening public spaces that will require careful planning. Every American has been called upon to slow the spread of the virus through social distancing and prevention hygiene, such as frequently washing your hands and wearing face coverings. Everyone also has a role in making sure our communities are as safe as possible to reopen and remain open.

The virus that causes COVID-19 can be killed if you use the right products. EPA has compiled a list of disinfectant products that can be used against COVID-19, including ready-to-use sprays, concentrates, and wipes. Each product has been shown to be effective against viruses that are harder to kill than viruses like the one that causes COVID-19.

For more information, please visit **CORONAVIRUS.GOV**

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This document provides a general framework for cleaning and disinfection practices. The framework is based on doing the following:

1. Normal routine cleaning with soap and water will decrease how much of the virus is on surfaces and objects, which reduces the risk of exposure.
2. Disinfection using EPA-approved disinfectants against COVID-19 can also help reduce the risk. Frequent disinfection of surfaces and objects touched by multiple people is important.
3. When EPA-approved disinfectants are not available, alternative disinfectants can be used (for example, 1/3 cup of bleach added to 1 gallon of water, or 70% alcohol solutions). Do not mix bleach or other cleaning and disinfection products together--this can cause fumes that may be very dangerous to breathe in. Keep all disinfectants out of the reach of children.

Links to specific recommendations for many public spaces that use this framework, can be found at the end of this document.
It's important to continue to follow federal, state, tribal, territorial, and local guidance for reopening America.

A Few Important Reminders about Coronaviruses and Reducing the Risk of Exposure:

- Coronaviruses on surfaces and objects naturally die within hours to days. Warmer temperatures and exposure to sunlight will reduce the time the virus survives on surfaces and objects.
- Normal routine cleaning with soap and water removes germs and dirt from surfaces. It lowers the risk of spreading COVID-19 infection.
- Disinfectants kill germs on surfaces. By killing germs on a surface after cleaning, you can further lower the risk of spreading infection. EPA-approved disinfectants are an important part of reducing the risk of exposure to COVID-19. If disinfectants on this list are in short supply, alternative disinfectants can be used (for example, 1/3 cup of bleach added to 1 gallon of water, or 70% alcohol solutions).
- Store and use disinfectants in a responsible and appropriate manner according to the label. Do not mix bleach or other cleaning and disinfection products together--this can cause fumes that may be very dangerous to breathe in. Keep all disinfectants out of the reach of children.
- Do not overuse or stockpile disinfectants or other supplies. This can result in shortages of appropriate products for others to use in critical situations.
- Always wear gloves appropriate for the chemicals being used when you are cleaning and disinfecting. Additional personal protective equipment (PPE) may be needed based on setting and product. For more information, see CDC's website on Cleaning and Disinfection for Community Facilities.
- Practice social distancing, wear facial coverings, and follow proper prevention hygiene, such as washing your hands frequently and using alcohol-based (at least 60% alcohol) hand sanitizer when soap and water are not available.

> If you oversee staff in a workplace, your plan should include considerations about the safety of custodial staff and other people who are carrying out the cleaning or disinfecting. These people are at increased risk of being exposed to the virus and to any toxic effects of the cleaning chemicals. These staff should wear appropriate PPE for cleaning and disinfecting. To protect your staff and to ensure that the products are used effectively, staff should be instructed on how to apply the disinfectants according to the label. For more information on concerns related to cleaning staff, visit the Occupational Safety and Health Administration's website on Control and Prevention.

DEVELOP YOUR PLAN

Evaluate your workplace, school, home, or business to determine what kinds of surfaces and materials make up that area. Most surfaces and objects will just need normal routine cleaning. Frequently touched surfaces and objects like light switches and doorknobs will need to be cleaned and then disinfected to further reduce the risk of germs on surfaces and objects.

- First, clean the surface or object with soap and water.
- Then, disinfect using an EPA-approved disinfectant.
- If an EPA-approved disinfectant is unavailable, you can use 1/3 cup of bleach added to 1 gallon of water, or 70% alcohol solutions to disinfect. Do not mix bleach or other cleaning and disinfection products together. Find additional information at CDC's website on Cleaning and Disinfecting Your Facility.

You should also consider what items can be moved or removed completely to reduce frequent handling or contact from multiple people. Soft and porous materials, such as area rugs and seating, may be removed or stored to reduce the challenges with cleaning and disinfecting them. Find additional reopening guidance for cleaning and disinfecting in the Reopening Decision Tool.

It is critical that your plan includes how to maintain a cleaning and disinfecting strategy after reopening. Develop a flexible plan with your staff or family, adjusting the plan as federal, state, tribal, territorial, or local guidance is updated and if your specific circumstances change.

Determine what needs to be cleaned

Some surfaces only need to be cleaned with soap and water. For example, surfaces and objects that are not frequently touched should be cleaned and do not require additional disinfection. Additionally, disinfectants should typically not be applied on items used by children, especially any items that children might put in their mouths. Many disinfectants are toxic when swallowed. In a household setting, cleaning toys and other items used by children with soap and water is usually sufficient. Find more information on cleaning and disinfection toys and other surfaces in the childcare program setting at CDC's Guidance for Childcare Programs that Remain Open.

These questions will help you decide which surfaces and objects will need normal routine cleaning.

Is the area outdoors?

Outdoor areas generally require normal routine cleaning and do not require disinfection. Spraying disinfectant on sidewalks and in parks is not an efficient use of disinfectant supplies and has not been proven to reduce the risk of COVID-19 to the public. You should maintain existing cleaning and hygiene practices for outdoor areas.

The targeted use of disinfectants can be done effectively, efficiently and safely on outdoor hard surfaces and objects frequently touched by multiple people. Certain outdoor areas and facilities, such as bars and restaurants, may have additional requirements. More information can be found on CDC's website on Food Safety and the Coronavirus Disease 2019 (COVID-19).

There is no evidence that the virus that causes COVID-19 can spread directly to humans from water in pools, hot tubs or spas, or water play areas. Proper operation, maintenance, and disinfection (for example, with chlorine or bromine) of pools, hot tubs or spas, and water playgrounds should kill the virus that causes COVID-19. However, there are additional concerns with outdoor areas that may be maintained less frequently, including playgrounds, or other facilities located within local, state, or national parks. For more information, visit CDC's website on Visiting Parks & Recreational Facilities.

Has the area been unoccupied for the last 7 days?

If your workplace, school, or business has been unoccupied for 7 days or more, it will only need your normal routine cleaning to reopen the area. This is because the virus that causes COVID-19 has not been shown to survive on surfaces longer than this time.

There are many public health considerations, not just COVID-19 related, when reopening public buildings and spaces that have been closed for extended periods. For example, take measures to ensure the safety of your building water system. It is not necessary to clean ventilation systems, other than routine maintenance, as part of reducing risk of coronaviruses. For healthcare facilities, additional guidance is provided on CDC's Guidelines for Environmental Infection Control in Health-Care Facilities.

Determine what needs to be disinfected

Following your normal routine cleaning, you can disinfect frequently touched surfaces and objects using a product from EPA's list of approved products that are effective against COVID-19.

These questions will help you choose appropriate disinfectants.

Are you cleaning or disinfecting a hard and non-porous material or item like glass, metal, or plastic?

Consult EPA's list of approved products for use against COVID-19. This list will help you determine the most appropriate disinfectant for the surface or object. You can use diluted household bleach solutions if appropriate for the surface. Pay special attention to the personal protective equipment (PPE) that may be needed to safely apply the disinfectant and the manufacturer's recommendations concerning any additional hazards. Keep all disinfectants out of the reach of children. Please visit CDC's website on How to Clean and Disinfect for additional details and warnings.

Examples of frequently touched surfaces and objects that will need routine disinfection following reopening are:

- tables,
- doorknobs,
- light switches,
- countertops,
- handles,
- desks,
- phones,
- keyboards,
- toilets,
- faucets and sinks,
- gas pump handles,
- touch screens, and
- ATM machines.

Each business or facility will have different surfaces and objects that are frequently touched by multiple people. Appropriately disinfect these surfaces and objects. For example, transit stations have specific guidance for application of cleaning and disinfection.

Are you cleaning or disinfecting a soft and porous material or items like carpet, rugs, or seating in areas?

Soft and porous materials are generally not as easy to disinfect as hard and non-porous surfaces. EPA has listed a limited number of products approved for disinfection for use on soft and porous materials. Soft and porous materials that are not frequently touched should only be cleaned or laundered, following the directions on the item's label, using the warmest appropriate water setting. Find more information on CDC's website on Cleaning and Disinfecting Your Facility for developing strategies for dealing with soft and porous materials.

Consider the resources and equipment needed

Keep in mind the availability of cleaning and disinfection products and appropriate PPE. Always wear gloves appropriate for the chemicals being used for routine cleaning and disinfecting. Follow the directions on the disinfectant label for additional PPE needs. In specific instances, personnel with specialized training and equipment may be required to apply certain disinfectants such as fumigants or fogs. For more information on appropriate PPE for cleaning and disinfection, see CDC's website on Cleaning and Disinfection for Community Facilities.

IMPLEMENT YOUR PLAN

Once you have a plan, it's time to take action. Read all manufacturer's instructions for the cleaning and disinfection products you will use. Put on your gloves and other required personal protective equipment (PPE) to begin the process of cleaning and disinfecting.

Clean visibly dirty surfaces with soap and water

Clean surfaces and objects using soap and water prior to disinfection. Always wear gloves appropriate for the chemicals being used for routine cleaning and disinfecting. Follow the directions on the disinfectant label for additional PPE needs. When you finish cleaning, remember to wash hands thoroughly with soap and water.

Clean or launder soft and porous materials like seating in an office or coffee shop, area rugs, and carpets. Launder items according to the manufacturer's instructions, using the warmest temperature setting possible and dry items completely.

Use the appropriate cleaning or disinfectant product

EPA approved disinfectants, when applied according to the manufacturer's label, are effective for use against COVID-19. Follow the instructions on the label for all cleaning and disinfection products for concentration, dilution, application method, contact time and any other special considerations when applying.

Always follow the directions on the label

Follow the instructions on the label to ensure safe and effective use of the product. Many product labels recommend keeping the surface wet for a specific amount of time. The label will also list precautions such as wearing gloves and making sure you have good ventilation during use of the product. Keep all disinfectants out of the reach of children.

MAINTAIN AND REVISE YOUR PLAN

Take steps to reduce your risk of exposure to the virus that causes COVID-19 during daily activities. CDC provides tips to reduce your exposure and risk of acquiring COVID-19. Reducing exposure to yourself and others is a shared responsibility. Continue to update your plan based on updated guidance and your current circumstances.

Continue routine cleaning and disinfecting

Routine cleaning and disinfecting are an important part of reducing the risk of exposure to COVID-19. Normal routine cleaning with soap and water alone can reduce risk of exposure and is a necessary step before you disinfect dirty surfaces.

Surfaces frequently touched by multiple people, such as door handles, desks, phones, light switches, and faucets, should be cleaned and disinfected at least daily. More frequent cleaning and disinfection may be required based on level of use. For example, certain surfaces and objects in public spaces, such as shopping carts and point of sale keypads, should be cleaned and disinfected before each use.

Consider choosing a different disinfectant if your first choice is in short supply. Make sure there is enough supply of gloves and appropriate personal protective equipment (PPE) based on the label, the amount of product you will need to apply, and the size of the surface you are treating.

Maintain safe behavioral practices

We have all had to make significant behavioral changes to reduce the spread of COVID-19. To reopen America, we will need to continue these practices:

- social distancing (specifically, staying 6 feet away from others when you must go into a shared space)
- frequently washing hands or use alcohol-based (at least 60% alcohol) hand sanitizer when soap and water are not available
- wearing cloth face coverings
- avoiding touching eyes, nose, and mouth
- staying home when sick
- cleaning and disinfecting frequently touched objects and surfaces

It's important to continue to follow federal, state, tribal, territorial, and local guidance for reopening America. Check this resource for updates on COVID-19. This will help you change your plan when situations are updated.

Consider practices that reduce the potential for exposure

It is also essential to change the ways we use public spaces to work, live, and play. We should continue thinking about our safety and the safety of others.

To reduce your exposure to or the risk of spreading COVID-19 after reopening your business or facility, consider whether you need to touch certain surfaces or materials. Consider wiping public surfaces before and after you touch them. These types of behavioral adjustments can help reduce the spread of COVID-19. There are other resources for more information on COVID-19 and how to Prevent Getting Sick.

Another way to reduce the risk of exposure is to make long-term changes to practices and procedures. These could include reducing the use of porous materials used for seating, leaving some doors open to reduce touching by multiple people, opening windows to improve ventilation, or removing objects in your common areas, like coffee creamer containers. There are many other steps that businesses and institutions can put into place to help reduce the spread of COVID-19 and protect their staff and the public. More information can be found at CDC's Implementation of Mitigation Strategies for Communities with Local COVID-19 Transmission.

CONCLUSION

Reopening America requires all of us to move forward together using recommended best practices and maintaining safe daily habits in order to reduce our risk of exposure to COVID-19. Remember: We're all in this together!

Additional resources with more specific recommendations.

HEALTHCARE SETTINGS	**Long-term Care Facilities, Nursing Homes**	Infection Control in Healthcare Settings
		Using Personal Protective Equipment
		Hand Hygiene
		Interim Guidance for Infection Prevention
		Preparedness Checklist
		Things Facilities Should Do Now to Prepare for COVID-19
		When there are Cases in the Facility
	Dialysis Facilities	Infection Control in Healthcare Settings
		Using Personal Protective Equipment
		Hand Hygiene
		Interim guidance for Outpatient Hemodialysis Facilities
		Patient Screening
	Blood and Plasma Facilities	Infection control in Healthcare Settings
		Infection Control and Environmental Management
		Using Personal Protective Equipment
		Hand Hygiene
		Interim Guidance for Blood and Plasma Collection Facilities
	Alternate Care Sites	Infection Prevention and Control
	Dental Settings	Infection Control in Healthcare Settings
		Using Personal Protective Equipment
		Hand Hygiene
		Interim Guidance for Dental Settings
	Pharmacies	Infection Control in Healthcare Settings
		Using Personal Protective Equipment
		Hand Hygiene
		Interim Guidance for Pharmacies
		Risk-Reduction During Close-Contact Services
	Outpatient and ambulatory care facilities	Infection Control in Healthcare Settings
		Using Personal Protective Equipment
		Hand Hygiene
		Interim Guidance for Outpatient & Ambulatory Care Settings
	Postmortem Care	Using Personal Protective Equipment
		Hand Hygiene
		Collection and Submission of Postmortem Samples
		Cleaning and Waste Disposal
		Transportation of Human Remains

COMMUNITY LOCATIONS	**Critical Infrastructure Employees**	Interim Guidance for Critical Infrastructure Employees
		Cleaning and Disinfecting your Facility
	Schools and childcare programs	K-12 and Childcare Interim Guidance
		Cleaning and Disinfecting your Facility
		FAQ for Administrators
		Parent and Teacher Checklist
	Colleges and universities	Interim Guidance for Colleges & Universities
		Cleaning and Disinfecting your Facility
		Guidance for Student Foreign Travel
		FAQ for Administrators
	Gatherings and community events	Interim Guidance for Mass Gatherings and Events
		Election Polling Location Guidance
		Events FAQ
	Community- and faith-based organizations	Interim Guidance for Organizations
		Cleaning and Disinfecting your Facility
	Businesses	Interim Guidance for Businesses
	Parks & Rec Facilities	Guidance for Administrators of Parks
	Law Enforcement	What Law Enforcement Personnel Need to Know about COVID-19
	Homeless Service Providers	Interim Guidance for Homeless Service Providers
	Retirement Homes	Interim Guidance for Retirement Communities
		FAQ for Administrators
	Correction & Detention Facilities	Interim Guidance for Correction & Detention Facilities
		FAQ for Administrators
HOME SETTING	**Preventing Getting Sick**	How to Protect Yourself and Others
		How to Safely Sterilize/Clean a Cloth Face Covering
		Cleaning and Disinfecting your Home
		Tribal - How to Prevent the Spread of Coronavirus (COVID-19) in Your Home
		Tribal - How to Care for Yourself at Home During Covid-19
	Running Errands	Shopping for Food and Other Essential Items
		Accepting Deliveries and Takeout
		Banking
		Getting Gasoline
		Going to the Doctor and Pharmacy
	If you are sick	Steps to Help Prevent the Spread of COVID19 if You are Sick

TRANSPORTATION	**Ships**	Interim Guidance for Ships on Managing Suspected COVID-19
	Airlines	Cleaning Aircraft Carriers
		Airline Agents Interim Guidance
	Buses	Bus Transit Operator
	Rail	Rail Transit Operators
		Transit Station Workers
	EMS Transport Vehicles	Interim Guidance for EMS
	Taxis and Rideshares	Keeping Commercial Establishments Safe
RESTAURANTS & BARS		Best Practices from FDA

Centers for Disease Control and Prevention
CDC 24/7: Saving Lives, Protecting People™

Coronavirus Disease 2019 (COVID-19)

Environmental Cleaning and Disinfection Recommendations

Interim Recommendations for US Community Facilities with Suspected/Confirmed Coronavirus Disease 2019

Background

There is much to learn about the novel coronavirus that causes coronavirus disease 2019 (COVID-19). 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. Transmission of novel coronavirus to persons from surfaces contaminated with the virus has not been documented. Transmission of coronavirus in general occurs much more commonly through respiratory droplets than through fomites. Current evidence suggests that novel coronavirus may remain viable for hours to days on surfaces made from a variety of materials. Cleaning of visibly dirty surfaces followed by disinfection is a best practice measure for prevention of COVID-19 and other viral respiratory illnesses in community settings.

Purpose

This guidance provides recommendations on the cleaning and disinfection of rooms or areas of those with suspected or with confirmed COVID-19 have visited. It is aimed at limiting the survival of novel coronavirus in key environments. These recommendations will be updated if additional information becomes available.

These guidelines are focused on community, non-healthcare facilities (e.g., schools, institutions of higher education, offices, daycare centers, businesses, community centers) that do and do not house persons overnight. These guidelines are not meant for cleaning staff in healthcare facilities or repatriation sites, households, or for others for whom specific guidance already exists.

Definitions

- *Community facilities* (e.g., schools, daycares centers, businesses) comprise most non-healthcare settings that are visited by the general public outside of a household.
- *Cleaning* refers to the removal of dirt and impurities, including germs, from surfaces. Cleaning alone does not kill germs. But by removing the germs, it decreases their number and therefore any risk of spreading infection.
- *Disinfecting* works by using chemicals to kill germs on surfaces. This process does not necessarily clean dirty surfaces or remove germs. But killing germs remaining on a surface after cleaning further reduces any risk of spreading infection.

Cleaning and Disinfection After Persons Suspected/Confirmed to Have COVID-19 Have Been in the Facility

Timing and location of cleaning and disinfection of surfaces

- At a school, daycare center, office, or other facility that does not house people overnight:
  - It is recommended to **close off areas used by the ill persons and wait as long as practical before beginning cleaning and disinfection** to minimize potential for exposure to respiratory droplets. **Open outside doors and windows to increase air circulation in the area.** If possible, wait up to 24 hours before beginning cleaning and disinfection.
  - **Cleaning staff should clean and disinfect all areas (e.g., offices, bathrooms, and common areas) used by the ill persons**, focusing especially on frequently touched surfaces.
- At a facility that does house people overnight:
  - Follow Interim Guidance for US Institutions of Higher Education on working with state and local health officials to isolate ill persons and provide temporary housing as needed.
  - It is recommended to **close off areas used by the ill persons and wait as long as practical before beginning cleaning and disinfection** to minimize potential for exposure to respiratory droplets. **Open outside doors and windows to increase air circulation in the area.** If possible, wait up to 24 hours before beginning cleaning and disinfection.
  - In areas where ill persons are being housed in isolation, follow Interim Guidance for Environmental Cleaning and Disinfection for U.S. Households with Suspected or Confirmed Coronavirus Disease 2019. This includes **focusing on cleaning and disinfecting common areas where staff/others providing services may come into contact with ill persons, but reducing cleaning and disinfection of bedrooms/bathrooms used by ill persons to as needed.**
  - In areas where ill persons have visited or used, continue routine cleaning and disinfection as in this guidance.

How to Clean and Disinfect

Surfaces

- If surfaces are dirty, they should be cleaned using a detergent or soap and water prior to disinfection.
- For disinfection, diluted household bleach solutions, alcohol solutions with at least 70% alcohol, and most common EPA-registered household disinfectants should be effective.
  - Diluted household bleach solutions can be used if appropriate for the surface. Follow manufacturer's instructions for application and proper ventilation. 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 (1/3rd cup) bleach per gallon of water or
  - 4 teaspoons bleach per quart of water
  - 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 all cleaning and disinfection products (e.g., concentration, application method and contact time, etc.).
  - 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. After cleaning:
  - 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 with the EPA-approved emerging viral pathogens claims (examples at this link) that are suitable for porous surfaces

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

- Do not shake dirty laundry; this minimize the possibility of dispersing virus through the air.
- 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 guidance above for hard or soft surfaces.

Personal Protective Equipment (PPE) and Hand Hygiene:

- **Cleaning staff should wear disposable gloves and gowns for all tasks in the cleaning process, including handling trash**.
  - Gloves and gowns should be compatible with the disinfectant products being used.
  - Additional PPE might be required based on the cleaning/disinfectant products being used and whether there is a risk of splash.
  - Gloves and gowns should be removed carefully to avoid contamination of the wearer and the surrounding area. Be sure to **clean hands** after removing gloves.
- Gloves should be removed after cleaning a room or area occupied by ill persons. Clean hands immediately after gloves are removed.
- Cleaning staff should immediately report breaches in PPE (e.g., tear in gloves) or any potential exposures to their supervisor.
- **Cleaning staff and others should clean hands often**, including immediately after removing gloves and after contact with an ill person, by washing hands with soap and water for 20 seconds. If soap and water are not available and hands are not visibly dirty, an alcohol-based hand sanitizer that contains 60%-95% alcohol may be used. However, if hands are visibly dirty, always wash hands with soap and water.
- Follow normal preventive actions while at work and home, including cleaning hands and avoiding touching eyes, nose, or mouth with unwashed hands.
  - Additional key times to clean hands include:
    - After blowing one's nose, coughing, or sneezing
    - After using the restroom
    - Before eating or preparing food
    - After contact with animals or pets
    - Before and after providing routine care for another person who needs assistance (e.g., a child)

Additional Considerations for Employers:

- Employers should work with their local and state health departments to ensure appropriate local protocols and guidelines, such as updated/additional guidance for cleaning and disinfection, are followed, including for identification of new potential cases of COVID-19.
- Employers should educate staff and workers performing cleaning, laundry, and trash pick-up activities to recognize the symptoms of COVID-19 and provide instructions on what to do if they develop symptoms within 14 days after their last possible exposure to the virus. At a minimum, any staff should immediately notify their supervisor and the local health department if they develop symptoms of COVID-19. The health department will provide guidance on what actions need to be taken. When working with your local health department check their available hours.

- Employers should develop policies for worker protection and provide training to all cleaning staff on site prior to providing cleaning tasks. Training should include when to use PPE, what PPE is necessary, how to properly don (put on), use, and doff (take off) PPE, and how to properly dispose of PPE.
- Employers must ensure workers are trained on the hazards of the cleaning chemicals used in the workplace in accordance with OSHA's Hazard Communication standard (29 CFR 1910.1200).
- Employers must comply with OSHA's standards on Bloodborne Pathogens (29 CFR 1910.1030), including proper disposal of regulated waste, and PPE (29 CFR 1910.132).

Additional Resources

- OSHA COVID-19 Website
- CDC Home Care Guidance

Page last reviewed: March 6, 2020
Content source: National Center for Immunization and Respiratory Diseases (NCIRD), Division of Viral Diseases

List N: Products with Emerging Viral Pathogens AND Human Coronavirus claims for use against SARS-CoV-2
Date Accessed: 03/26/2020

EPA Registration Number	Active Ingredient/s	Product Name	Company	Follow the disinfection directions and preparation for the following virus	Contact Time (in minutes)	Formulation Type	Emerging Viral Pathogen Claim?	Date Added to List N
84198-1	Hydrogen peroxide	Peroxy HDOX	Earth Laboratories Inc	Norovirus	5	Dilutable	Yes	03/26/2020
45745-11	Hydrogen peroxide	HP2O2	Midlab	Rotavirus; Norovirus; Rhinovirus	5	Dilutable	Yes	03/26/2020
65402-9	Peroxyacetic acid; Hydrogen Peroxide	VigorOx 15/10 Antimicrobial Agent	PeroxyChem LLC	Feline calicivirus	5	Dilutable	Yes	03/26/2020
1043-87	Phenolic	Vesphene II se	Steris Corporation	Adenovirus	10	Dilutable	Yes	03/26/2020
1043-91	Phenolic	LpH®	Steris Corporation	Adenovirus	10	Dilutable	Yes	03/26/2020
1839-100	Quaternary ammonium	Veterinarian Type Disinfectant	Stepan Company	Feline calicivirus; norovirus	10	Dilutable	Yes	03/26/2020
89833-3	Quaternary ammonium	D7 Part 1	Decon7 Systems LLC	Norovirus	10	Dilutable	Yes	03/26/2020
70271-13	Sodium hypochlorite	Pure Bright Germicidal Ultra Bleach	KIK International LLC	Adenovirus; Rotavirus; Canine parvovirus; Feline panleukopenia virus; Hepatitis A virus; Norovirus; Poliovirus; Rhinovirus	5	Dilutable	Yes	03/26/2020
70271-31	Sodium hypochlorite	Nova	KIK International LLC	Rhinovirus	10	Dilutable	Yes	03/26/2020
92108-1	Hypochlorous acid	Excelyte Vet	PCT LTD	Norovirus	10	RTU	Yes	03/26/2020
777-131	Hypochlorous acid	Cousteau	Reckitt Benckiser	Rhinovirus	10	RTU	Yes	03/26/2020
44446-67	Phenolic; Ethanol	Concept Hospital Disinfectant Deodorant	Quest Specialty Corp	Rhinovirus; Canine hepatitis virus	10	RTU	Yes	03/26/2020
89900-2	Quaternary ammonium	Valalla 2	S.C. Johnson Professional	Rotavirus	5	RTU	Yes	03/26/2020

EPA Registration Number	Active Ingredient/s	Product Name	Company	Follow the disinfection directions and preparation for the following virus	Contact Time (in minutes)	Formulation Type	Emerging Viral Pathogen Claim?	Date Added to List N
89900-3	Quaternary ammonium	Gertrude 2	S.C. Johnson Professional	Rotavirus	5	RTU	Yes	03/26/2020
4091-20	Quaternary ammonium	Phoenix 2	W.M. Barr & Comapny Inc	Rotavirus; Feline calicivirus; Rhinovirus	10	RTU	Yes	03/26/2020
93040-1	Sodium chloride	Force of Nature Activator Capsule	HCl Cleaning Products LLC	Feline calicivirus	10	RTU	Yes	03/26/2020
92987-1	Sodium chlorite; citric acid	Tristel Duo for Surfaces	Tristel Solutions LTD	Adenovirus; Feline calicivirus; Poliovirus	0.5	RTU	Yes	03/26/2020
67619-40	Sodium hypochlorite	TNT	Clorox Professional Products Company	Murine norovirus	1	RTU	Yes	03/26/2020
70060-19	Sodium chlorite; Sodium dischloroisocyanurate dihydrate	Aseptrol S10-Tab	BASF Corporation	Feline calicivirus	10	Solid	Yes	03/26/2020
56392-8	Sodium hypochlorite	Dispatch	Clorox Professional Products Company	Adenovirus	1	Towelette	Yes	03/26/2020
70144-4	Quaternary ammonium; Ethanol	Opti-cide Max Wipes	Micro-Scientific LLC	Rotavirus	1	Wipe	Yes	03/26/2020
84683-4	Thymol	Benefect Botanical Daily Cleaner Disinfectant Towelette	Cleanwell LLC	Rhinovirus	10	Wipe	Yes	03/26/2020
1677-233	Quaternary ammonium	Multi-Purpose Disinfectant Cleaner	Ecolab Inc	Feline calicivirus	10	Dilutable	Yes	03/19/2020
5813-120	Sodium hypochlorite	CRB	The Clorox Company	Canine parvovirus	10	Dilutable	Yes	03/19/2020
90150-2	Hydrogen aeroxide	Binary Ionization Technology (BIT) Solution	Tomi Environmental Solutions Inc	Feline calicivirus	15	Fog; Mist	Yes	03/19/2020
675-55	Citric acid	Lysol Bathroom	Reckitt	Poliovirus	5	RTU	Yes	03/19/2020

EPA Registration Number	Active Ingredient/s	Product Name	Company	Follow the disinfection directions and preparation for the following virus	Contact Time (in minutes)	Formulation Type	Emerging Viral Pathogen Claim?	Date Added to List N
		Cleaner	Benckiser LLC					
84526-6	Hydrogen peroxide; Silver	Halomist	Halosil International Inc	Feline calicivirus; Minute virus of men	10	RTU	Yes	03/19/2020
91582-1	Hypochlorous acid	Danolyte	Danolyte Global Inc	Adenovirus; Rhinovirus	10	RTU	Yes	03/19/2020
85134-1	Hypochlorous acid	Envirocleanse A	Envirocleanse LLC	Norovirus	10	RTU	Yes	03/19/2020
706-111	Quaternary ammonium	Claire Disinfectant Spray Q	Claire Manufacturing Company	Poliovirus	5	RTU	Yes	03/19/2020
1130-15	Quaternary ammonium; Isopropanol	Weiman Germicidal Solution	Weiman Products LLC	Rotavirus	3	RTU	Yes	03/19/2020
70144-1	Quaternary ammonium; Isopropanol	Opti-Cide 3	Micro-Scientific LLC	Rotavirus; Rhinovirus Type 14	2	RTU	Yes	03/19/2020
87518-6	Sodium hypochlorite	Sporex	HSP USA LLC	Norovirus; Canine parvovirus	1	RTU	Yes	03/19/2020
9480-9	Quaternary ammonium	AF3 Germicidal Disposable Wipe	Professional Disposables International Inc	Rotavirus; Adenovirus	3	Wipe	Yes	03/19/2020
9480-4	Quaternary ammonium; Isopropanol	Super Sani-Cloth Germicidal Disposable Wipe	Professional Disposables International Inc	Rhinovirus 39; Adenovirus	2	Wipe	Yes	03/19/2020
9480-8	Sodium hypochlorite	Sani-Cloth Bleach Germicidal Disposable Wipe	Professional Disposables International Inc	Adenovirus; Rotavirus; Canine parvovirus; Hepatitis A virus; Poliovirus Type 1; Rhinovirus Type 37; Feline calicivirus	1	Wipe	Yes	03/19/2020
74559-4	Hydrogen peroxide	Accel (Concentrate) Disinfectant Cleaner	Virox Technologies Inc	Poliovirus	5	Dilutable	Yes	03/13/2020
1677-250	Hydrogen peroxide; Peroxyoctanoic acid; Peroxyacetic acid	Synergex	Ecolab Inc	Reovirus	5	Dilutable	Yes	03/13/2020

EPA Registration Number	Active Ingredient/s	Product Name	Company	Follow the disinfection directions and preparation for the following virus	Contact Time (in minutes)	Formulation Type	Emerging Viral Pathogen Claim?	Date Added to List N
67619-41	Quaternary ammonium	PPD Dash	Clorox Professional Products Company	Rotavirus	10	Dilutable	Yes	03/13/2020
6836-136	Quaternary ammonium	Lonza Formulation S-18F	Lonza LLC	Feline calicivirus	10	Dilutable	Yes	03/13/2020
6836-139	Quaternary ammonium	Lonza Formulation R-82F	Lonza LLC	Feline calicivirus	10	Dilutable	Yes	03/13/2020
6836-277	Quaternary ammonium	BARDAC 205M-1.30	Lonza LLC	Norovirus	10	Dilutable	Yes	03/13/2020
6836-303	Quaternary ammonium	BARDAC 205M-5.2	Lonza LLC	Norovirus	10	Dilutable	Yes	03/13/2020
6836-346	Quaternary ammonium	Lonzagard RCS-256	Lonza LLC	Norovirus	5	Dilutable	Yes	03/13/2020
6836-347	Quaternary ammonium	Lonzagard RCS-128	Lonza LLC	Feline calicivirus; Enterovirus	5	Dilutable	Yes	03/13/2020
6836-348	Quaternary ammonium	Lonzagard RCS-128 PLUS	Lonza LLC	Feline calicivirus; Enterovirus	5	Dilutable	Yes	03/13/2020
6836-362	Quaternary ammonium	Nugen MB5A-128	Lonza LLC	Norovirus	5	Dilutable	Yes	03/13/2020
6836-363	Quaternary ammonium	Nugen MB5A-64	Lonza LLC	Norovirus	5	Dilutable	Yes	03/13/2020
6836-366	Quaternary ammonium	Nugen MB5N-64	Lonza LLC	Norovirus	5	Dilutable	Yes	03/13/2020
5813-100	Sodium hypochlorite	Puma	The Clorox Company	Canine parvovirus	10	Dilutable	Yes	03/13/2020
5813-102	Sodium hypochlorite	CGB1	The Clorox Company	Canine parvovirus	10	Dilutable	Yes	03/13/2020
67619-26	Sodium hypochlorite	Boris	Clorox Professional Products Company	Canine parvovirus	10	Dilutable	Yes	03/13/2020
74559-1	Hydrogen peroxide	Accel TB	Virox Technologies Inc	Poliovirus; Feline Calicivirus	1	RTU	Yes	03/13/2020
74559-9	Hydrogen peroxide	Oxy-1 RTU	Virox Technologies Inc	Poliovirus	0.5	RTU	Yes	03/13/2020
67619-35	Peracetic acid; Hydrogen peroxide	Blacksmith	Clorox Professional Products	Rhinovirus	1	RTU	Yes	03/13/2020

EPA Registration Number	Active Ingredient/s	Product Name	Company	Follow the disinfection directions and preparation for the following virus	Contact Time (in minutes)	Formulation Type	Emerging Viral Pathogen Claim?	Date Added to List N
			Company					
67619-20	Quaternary ammonium	Rex	Clorox Professional Products Company	Hepatitis A virus	10	RTU	Yes	03/13/2020
83614-1	Quaternary ammonium	DETSAN24	Byotrol Inc	Feline calivirus	5	RTU	Yes	03/13/2020
5813-109	Quaternary ammonium	Say Q	The Clorox Company	Rotavirus	10	RTU	Yes	03/13/2020
5813-118	Quaternary ammonium	Dash	The Clorox Company	Rotavirus	10	RTU	Yes	03/13/2020
44446-23	Quaternary ammonium	Germ Away	Quest Specialty Corp	Canine parvovirus	10	RTU	Yes	03/13/2020
6659-3	Quaternary ammonium	Spray Nine	ITW Permatex Inc	Norovirus; Rhinovirus; Poliovirus	0.5	RTU	Yes	03/13/2020
46781-12	Quaternary ammonium; Ethanol; Isopropanol	Cavicide 1	Metrex Research	Adenovirus; Rotavirus; Feline Calicivirus	3	RTU	Yes	03/13/2020
37549-2	Sodium hypochlorite	Micro-kill Bleach Solution	Medline Industries Inc	Norovirus	0.5	RTU	Yes	03/13/2020
46781-15	Sodium hypochlorite	Cavicide Bleach	Metrex Research	Poliovirus; Rhinovirus	3	RTU	Yes	03/13/2020
87742-1	Thymol	Thymox Disinfectant Spray	Laboratorie M2	Norovirus	4	RTU	Yes	03/13/2020
84150-2	Ethanol	Mitersaw	GOJO Industries Inc	Feline calivirus	5	Wipe	Yes	03/13/2020
74559-3	Hydrogen peroxide	Accel TB Wipes	Virox Technologies Inc	Poliovirus	1	Wipe	Yes	03/13/2020
74559-10	Hydrogen peroxide	Oxy-1 Wipes	Virox Technologies Inc	Poliovirus	0.5	Wipe	Yes	03/13/2020
67619-9	Quaternary ammonium	PJW-622	Clorox Professional Products Company	Rotavirus	3	Wipe	Yes	03/13/2020
5813-58	Quaternary ammonium	Spruce-ups	The Clorox Company	Rotavirus	0.25	Wipe	Yes	03/13/2020

EPA Registration Number	Active Ingredient/s	Product Name	Company	Follow the disinfection directions and preparation for the following virus	Contact Time (in minutes)	Formulation Type	Emerging Viral Pathogen Claim?	Date Added to List N
5813-113	Quaternary ammonium	CDW	The Clorox Company	Rotavirus	4	Wipe	Yes	03/13/2020
777-114	Quaternary ammonium	Lysol® Disinfecting Wipes (All Scents)	Reckitt Benckiser	Rotavirus	10	Wipe	Yes	03/13/2020
46781-13	Quaternary ammonium; Ethanol; Isopropanol	Caviwipes 1	Metrex Research	Adenovirus	3	Wipe	Yes	03/13/2020
37549-1	Sodium hypochlorite	Micro-kill Bleach Germicidal Bleach Wipes	Medline Industries Inc	Norovirus	0.5	Wipe	Yes	03/13/2020
46781-14	Sodium hypochlorite	Caviwipes Bleach	Metrex Research	Feline calicivirus	3	Wipe	Yes	03/13/2020
1677-238	Hydrogen peroxide	Peroxide Multi Surface Cleaner and Disinfectant	Ecolab Inc	Norovirus	2	Dilutable	Yes	03/03/2020
70627-58	Hydrogen peroxide	Oxy-Team™ Disinfectant Cleaner	Diversey Inc	Canine Parvovirus; Feline Picornavirus	5	Dilutable	Yes	03/03/2020
1677-129	Hydrogen peroxide; Peroxyacetic acid	Cosa Oxonia Active	Ecolab Inc	Poliovirus	10	Dilutable	Yes	03/03/2020
1677-237	Hydrogen peroxide; Peroxyacetic acid	Oxycide Daily Disinfectant Cleaner	Ecolab Inc	Feline Calicivirus; Rhinovirus	3	Dilutable	Yes	03/03/2020
1839-248	Quaternary ammonium	Stepan Spray Disinfectant Concentrate	Stepan Company	Rhinovirus	5	Dilutable	Yes	03/03/2020
47371-129	Quaternary ammonium	Formulation HWS-256	H&S Chemicals Division of Lonza LLC	Adenovirus	10	Dilutable	Yes	03/03/2020
47371-130	Quaternary ammonium	Formulation HWS-128	H&S Chemicals Division of Lonza, LLC	Adenovirus	10	Dilutable	Yes	03/03/2020
47371-131	Quaternary ammonium	HWS-64	H&S Chemicals Division of Lonza LLC	Adenovirus	10	Dilutable	Yes	03/03/2020
47371-192	Quaternary ammonium	Formulation	H&S Chemicals	Adenovirus	10	Dilutable	Yes	03/03/2020

EPA Registration Number	Active Ingredient/s	Product Name	Company	Follow the disinfection directions and preparation for the following virus	Contact Time (in minutes)	Formulation Type	Emerging Viral Pathogen Claim?	Date Added to List N
		HWS-32	Division of Lonza LLC					
675-54	Quaternary ammonium	Lysol Brand Heavy Duty Cleaner Disinfectant Concentrate	Reckitt Benckiser LLC	Rotavirus	5	Dilutable	Yes	03/03/2020
6836-140	Quaternary ammonium	Lonza Formulation S- 21F	Lonza LLC	Norovirus	10	Dilutable	Yes	03/03/2020
6836-266	Quaternary ammonium	BARDAC 205M-10	Lonza LLC	Norovirus	10	Dilutable	Yes	03/03/2020
6836-278	Quaternary ammonium	BARDAC 205M-14.08	Lonza LLC	Norovirus	10	Dilutable	Yes	03/03/2020
6836-302	Quaternary ammonium	BARDAC 205M-2.6	Lonza LLC	Norovirus	10	Dilutable	Yes	03/03/2020
6836-305	Quaternary ammonium	BARDAC 205M-23	Lonza LLC	Norovirus	10	Dilutable	Yes	03/03/2020
6836-349	Quaternary ammonium	Lonzagard RCS-256 Plus	Lonza LLC	Enterovirus D68; Norovirus	5	Dilutable	Yes	03/03/2020
6836-361	Quaternary ammonium	Nugen MB5A-256	Lonza LLC	Norovirus	5	Dilutable	Yes	03/03/2020
6836-364	Quaternary ammonium	Nugen MB5N-256	Lonza LLC	Norovirus	5	Dilutable	Yes	03/03/2020
6836-365	Quaternary ammonium	Nugen MB5N-128	Lonza LLC	Norovirus	5	Dilutable	Yes	03/03/2020
6836-70	Quaternary ammonium	BARDAC 205M-7.5	Lonza LLC	Norovirus	10	Dilutable	Yes	03/03/2020
6836-75	Quaternary ammonium	Lonza Formulation S-21	Lonza LLC	Norovirus	10	Dilutable	Yes	03/03/2020
6836-77	Quaternary ammonium	Lonza Formulation S- 18	Lonza LLC	Norovirus	10	Dilutable	Yes	03/03/2020
6836-78	Quaternary ammonium	Lonza Formulation R- 82	Lonza LLC	Norovirus	10	Dilutable	Yes	03/03/2020
70627-24	Quaternary ammonium	Virex™ II / 256	Diversey Inc	Adenovirus Type 2	10	Dilutable	Yes	03/03/2020
777-89	Quaternary ammonium	Lysol Brand Clean & Fresh Multi-surface Cleaner	Reckitt Benckiser LLC	Rotavirus WA	3	Dilutable	Yes	03/03/2020
63761-8	Quaternary ammounium; Hydrogen peroxide	Sterlex Ultra Disinfectant Cleaner Solution 1	Sterilex	Feline Calicivirus	10	Dilutable	Yes	03/03/2020

EPA Registration Number	Active Ingredient/s	Product Name	Company	Follow the disinfection directions and preparation for the following virus	Contact Time (in minutes)	Formulation Type	Emerging Viral Pathogen Claim?	Date Added to List N
63761-10	Quaternary ammounium; Sodium carbonate Peroxyhdrate	Sterilex Ultra Step	Sterilex	Feline Calicivirus; Rotavirus	10	Dilutable	Yes	03/03/2020
71847-6	Sodium dichloro-S-triazinetrione	Klorsept	Medentech LTD	Hepatitis A virus; Coxsackievirus B3	1	Dilutable	Yes	03/03/2020
71847-7	Sodium dichloro-S-triazinetrione	Klorkleen	Medentech LTD	Hepatitis A virus; Coxsackievirus B3	1	Dilutable	Yes	03/03/2020
5813-111	Sodium hypochlorite	Clorox Disinfecting Bleach2	The Clorox Company	Canine Parvovirus; Feline Parvovirus	10	Dilutable	Yes	03/03/2020
5813-114	Sodium hypochlorite	Clorox Performance Bleach1	The Clorox Company	Canine Parvovirus; Feline Parvovirus	10	Dilutable	Yes	03/03/2020
67619-32	Sodium hypochlorite	CloroxPro™ Clorox® Germicidal Bleach	Clorox Professional Products Company	Canine Parvovirus; Coxsackievirus B3 Virus; Enterovirus D68; Norovirus; Feline Parvovirus; Hepatitis A Virus; Murine Norovirus; Poliovirus; Rhinovirus	5	Dilutable	Yes	03/03/2020
70627-72	Sodium hypochlorite	Avert Sporicidal Disinfectant Cleaner	Diversey Inc	Canine Parvovirus; Norovirus; Hepatitis A; Poliovirus Type 1	1	Dilutable	Yes	03/03/2020
67619-29	Ethanol	Saginaw	Clorox Professional Products Company	Coxsackievirus; Hepatitis A Virus; Rhinovirus; Rotavirus	5	RTU	Yes	03/03/2020
84368-1	Ethanol	Urthpro	Urthtech LLC	Hepatitis A virus	1	RTU	Yes	03/03/2020
777-132	Hydrochloric acid	Lysol Brand Power Plus Toilet Bowl Cleaner	Reckitt Benckiser LLC	Poliovirus Type 1	10	RTU	Yes	03/03/2020
777-81	Hydrochloric acid	Lysol Brand Lime & Rust Toilet Bowl Cleaner	Reckitt Benckiser LLC	Poliovirus Type 1; Hepatitis A virus	10	RTU	Yes	03/03/2020
1677-251	Hydrogen peroxide	Peroxide Disinfectant And Glass Cleaner Rtu	Ecolab Inc	Norovirus	0.75	RTU	Yes	03/03/2020

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5813-110	Hydrogen peroxide	Clorox Pet Solutions Advanced Formula Disinfecting Stain & Odor Remover	The Clorox Company	Enterovirus D68; Norovirus; Rhinovirus	5	RTU	Yes	03/03/2020
67619-24	Hydrogen Peroxide	Clorox Commercial Solutions® Hydrogen Peroxide Cleaner Disinfectant	Clorox Professional Products Company	Norovirus; Rhinovirus; Rotavirus	1	RTU	Yes	03/03/2020
67619-33	Hydrogen peroxide	Clorox Commercial Solutions® Clorox® Disinfecting Biostain & Odor Remover	Clorox Professional Products Company	Enterovirus, Norovirus; Rhinovirus Type 37	5	RTU	Yes	03/03/2020
70627-56	Hydrogen peroxide	Oxivir Tb	Diversey Inc	Norovirus; Rhinovirus; Poliovirus Type 1	1	RTU	Yes	03/03/2020
70627-74	Hydrogen peroxide	Oxivir 1	Diversey Inc	Canine Parvovirus; Enterovirus Type D68	1	RTU	Yes	03/03/2020
9480-14	Hydrogen Peroxide	Sani-HyPerCide Germicidal Spray	Professional Disposables International Inc	Norovirus	1	RTU	Yes	03/03/2020
1677-226	Hydrogen peroxide; Octanoic acid; Peroxyacetic acid	Virasept	Ecolab Inc	Norovirus; Rhinovirus	4	RTU	Yes	03/03/2020
1677-249	Isopropanol	Klercide 70/30 IPA	Ecolab Inc	Rhinovirus	5	RTU	Yes	03/03/2020
1839-220	Quaternary ammonium	SC-RTU Disinfectant Cleaner	Stepan Company	Poliovirus	5	RTU	Yes	03/03/2020
1839-83	Quaternary ammonium	Detergent Disinfectant Pump Spray	Stepan Company	Canine Parvovirus	10	RTU	Yes	03/03/2020
4091-21	Quaternary ammonium	Condor 2	W.M. Barr & Comapny Inc	Rotavirus	5	RTU	Yes	03/03/2020
5813-115	Quaternary ammonium	Clorox Scentiva Bathroom	The Clorox Company	Rotavirus	5	RTU	Yes	03/03/2020

EPA Registration Number	Active Ingredient/s	Product Name	Company	Follow the disinfection directions and preparation for the following virus	Contact Time (in minutes)	Formulation Type	Emerging Viral Pathogen Claim?	Date Added to List N
		Disinfecting Foam Cleaner						
5813-40	Quaternary ammonium	Clorox Disinfecting Bathroom Cleaner	The Clorox Company	Rhinovirus	10	RTU	Yes	03/03/2020
67619-38	Quaternary ammonium	CloroxPro™ Clorox Total 360® Disinfecting Cleaner1	Clorox Professional Products Company	Coxsackievirus Type B3	5	RTU	Yes	03/03/2020
6836-152	Quaternary ammonium	Lonza Formulation DC-103	Lonza LLC	Norovirus	10	RTU	Yes	03/03/2020
6836-289	Quaternary ammonium	BARDAC 205M RTU	Lonza LLC	Norovirus	10	RTU	Yes	03/03/2020
777-70	Quaternary ammonium	Lysol Brand Cling & Fresh Toilet Bowl Cleaner	Reckitt Benckiser LLC	Rotavirus	0.5	RTU	Yes	03/03/2020
4091-22	Quaternary ammonium; Citric acid	Raptor 5	W.M. Barr & Comapny Inc	Rhinovirus	5	RTU	Yes	03/03/2020
42182-9	Quaternary ammonium; Ethanol	Firebird F130	Microban Products Company	Poliovirus; Norovirus	5	RTU	Yes	03/03/2020
777-127	Quaternary ammonium; Ethanol	Lysol® Disinefctant Max Cover Mist	Reckitt Benckiser LLC	Norovirus	10	RTU	Yes	03/03/2020
777-99	Quaternary ammonium; Ethanol	Lysol® Disinfectant Spray	Reckitt Benckiser LLC	Norovirus	10	RTU	Yes	03/03/2020
88494-3	Quaternary ammonium; Ethanol	Peak Disinfectant	North American Infection Control Ltd	Poliovirus Type 1; Rhinovirus	1	RTU	Yes	03/03/2020
9480-10	Quaternary ammonium; Ethanol; Isopropanol	Sani-Prime Germicidal Spray	Professional Disposables International Inc	Feline Calicivirus	3	RTU	Yes	03/03/2020
67619-21	Quaternary ammounium; Ethanol	Clorox Commercial Solutions® Clorox® Disinfecting Spray	Clorox Professional Products Company	Coxsackie Virus; Echovirus; Feline Calicivirus; Hepatitis A Virus; Poliovirus	10	RTU	Yes	03/03/2020
1677-235	Sodium hypochlorite	Bleach Disinfectant	Ecolab Inc	Murine Norovirus;	1	RTU	Yes	03/03/2020

EPA Registration Number	Active Ingredient/s	Product Name	Company	Follow the disinfection directions and preparation for the following virus	Contact Time (in minutes)	Formulation Type	Emerging Viral Pathogen Claim?	Date Added to List N
		Cleaner		Poliovirus; Rhinovirus				
56392-7	Sodium hypochlorite	Clorox Healthcare® Bleach Germicidal Cleaner Spray	Clorox Professional Products Company	Canine Parvovirus; Feline Panleukopenia Virus; Hepatitis A Virus; Norovirus; Poliovirus; Rhinovirus	1	RTU	Yes	03/03/2020
5813-105	Sodium hypochlorite	Clorox Multi Surface Cleaner + Bleach	The Clorox Company	Rhinovirus; Canine Parvovirus; Feline Panleukopenia Virus; Norovirus; Poliovirus	1	RTU	Yes	03/03/2020
5813-21	Sodium hypochlorite	Clorox Clean Up Cleaner + Bleach	The Clorox Company	Norovirus; Poliovirus	5	RTU	Yes	03/03/2020
5813-89	Sodium hypochlorite	Clorox Toilet Bowl Cleaner with Bleach	The Clorox Company	Rhinovirus; Rotavirus	10	RTU	Yes	03/03/2020
67619-16	Sodium hypochlorite	Clorox Commercial Solutions® Toilet Bowl Cleaner with Bleach1	Clorox Professional Products Company	Rotavirus; Rhinovirus 39	10	RTU	Yes	03/03/2020
67619-17	Sodium hypochlorite	Clorox Commercial Solutions® Clorox® Clean-Up Disinfectant Cleaner with Bleach1	Clorox Professional Products Company	Norovirus	5	RTU	Yes	03/03/2020
67619-30	Sodium hypochlorite	GNR	Clorox Professional Products Company	Coxsackievirus; Feline Calicivirus; Feline Panleukopenia Virus; Minute virus of mice; Poliovirus; Rhinovirus Type 37	1	RTU	Yes	03/03/2020
777-83	Sodium hypochlorite	Lysol Brand Bleach Mold And Mildew Remover	Reckitt Benckiser LLC	Rhinovirus; Norovirus	0.5	RTU	Yes	03/03/2020
84150-1	Ethanol	PURELL Professional	GOJO Industries Inc	Norovirus	5	Wipe	Yes	03/03/2020

EPA Registration Number	Active Ingredient/s	Product Name	Company	Follow the disinfection directions and preparation for the following virus	Contact Time (in minutes)	Formulation Type	Emerging Viral Pathogen Claim?	Date Added to List N
		Surface Disinfectant Wipes						
67619-25	Hydrogen peroxide	Clorox Commercial Solutions® Hydrogen Peroxide Cleaner Disinfectant Wipes	Clorox Professional Products Company	Norovirus	2	Wipe	Yes	03/03/2020
70627-60	Hydrogen peroxide	Oxivir™ Wipes	Diversey Inc	Norovirus; Poliovirus Type 1; Rhinovirus Type 14	1	Wipe	Yes	03/03/2020
70627-77	Hydrogen peroxide	Oxivir 1 Wipes	Diversey Inc	Enterovirus Type D68	1	Wipe	Yes	03/03/2020
5813-79	Quaternary ammonium	Clorox Disinfecting Wipes	The Clorox Company	Rotavirus	4	Wipe	Yes	03/03/2020
67619-31	Quaternary ammonium	Clorox Commercial Solutions® Clorox® Disinfecting Wipes	Clorox Professional Products Company	Rotavirus	4	Wipe	Yes	03/03/2020
67619-37	Quaternary ammonium	Clorox Healthcare® VersaSure® Wipes	Clorox Professional Products Company	Norovirus	5	Wipe	Yes	03/03/2020
6836-313	Quaternary ammonium	Lonza Disinfectant Wipes	Lonza LLC	Rotavirus	10	Wipe	Yes	03/03/2020
6836-340	Quaternary ammonium	Lonza Disinfectant Wipes Plus 2	Lonza LLC	Norovirus	10	Wipe	Yes	03/03/2020
88494-4	Quaternary ammonium; Ethanol	Peak Disinfectant Wipes	North American Infection Control Ltd	Poliovirus Type 1; Rhinovirus	1	Wipe	Yes	03/03/2020
9480-12	Quaternary ammonium; Ethanol; Isopropanol	Sani-Cloth Prime Germicidal Disposable Wipe	Professional Disposables International Inc	Feline Calicivirus	3	Wipe	Yes	03/03/2020
67619-12	Sodium hypochlorite	Clorox Healthcare® Bleach Germicidal Wipes	Clorox Professional Products Company	Canine Parvovirus; Feline Parvovirus	3	Wipe	Yes	03/03/2020

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3573-54	Citric acid	Comet Disinfecting Bathroom Cleaner	The Proctor & Gamble Company	Feline calicivirus; norovirus	10	Dilutable	No	03/26/2020
88089-2	Hydrogen peroxide; Peroxyacetic acid	Peridox	BioMed Protect LLC	Feline calicivirus; norovirus	2	Dilutable	No	03/26/2020
4959-16	Iodine	ZZZ Disinfectant	West Agro Inc	Poliovirus	10	Dilutable	No	03/26/2020
65402-3	Peroxyacetic acid; Hydrogen peroxide	VigorOx SP-15 Antimicrobial Agent	PeroxyChem LLC	Feline calicivirus; norovirus	5	Dilutable	No	03/26/2020
3862-179	Phenolic	Opti-Phene	ABC Compounding Co Inc	Human adenovirus	10	Dilutable	No	03/26/2020
39967-138	Potassium peroxymonosulfate; Sodium choride	Rely+On Multipurpose Disinfectant Cleaner	Lanxess Corporation	Feline calicivirus; norovirus	10	Dilutable	No	03/26/2020
1677-21	Quaternary ammonium	Mikro-Quat	Ecolab Inc	Feline calicivirus; norovirus	10	Dilutable	No	03/26/2020
1839-97	Quaternary ammonium	NP 12.5 (D&F) Detegent/ Disinfectant	Stepan Company	Adenovirus	10	Dilutable	No	03/26/2020
3573-96	Quaternary ammonium	Malibu Concentrate	The Proctor & Gamble Company	Feline calicivirus; norovirus	10	Dilutable	No	03/26/2020
675-30	Quaternary ammonium	Roccal II 10%	Reckitt Benckiser	Adenovirus	10	Dilutable	No	03/26/2020
1839-95	Quaternary ammonium	NP 4.5 (D & F) Detergent/ disinfectant	Stepan Company	Norovirus	10	Dilutable	No	03/26/2020
1839-80	Quaternary ammonium	NP 12.5 Detegent/ Disinfectant	Stepan Company	Adenovirus	10	Dilutable	No	03/26/2020
63761-5	Quaternary ammonium; Sodium carbonate peroxyhydrate	Sterilex Ultra Powder	Sterilex	Feline calicivirus; norovirus	10	Dilutable	No	03/26/2020
90643-1	Sodium chloride	MultiMicro Salt	Tennant Company	Feline calicivirus; norovirus	10	Dilutable	No	03/26/2020

EPA Registration Number	Active Ingredient/s	Product Name	Company	Follow the disinfection directions and preparation for the following virus	Contact Time (in minutes)	Formulation Type	Emerging Viral Pathogen Claim?	Date Added to List N
1677-216	Sodium chlorite	Exspor Base Concentration	Ecolab Inc	Feline calicivirus; norovirus	5	Dilutable	No	03/26/2020
91399-2	Sodium chlorite	Biotab7	Advanced Biocide Technologies Inc	Feline calicivirus; norovirus	1	Dilutable	No	03/26/2020
71847-2	Sodium dichloroisocyanurate	Klor-Kleen	Medentech LTD	Feline calicivirus; norovirus	10	Dilutable	No	03/26/2020
3573-77	Sodium hypochlorite	CSP-3002-3	The Proctor & Gamble Company	Feline calicivirus; norovirus	1	Dilutable	No	03/26/2020
70271-24	Sodium hypochlorite	Tecumseh B	KIK International LLC	Feline calicivirus; norovirus	5	Dilutable	No	03/26/2020
82972-1	Chlorine dioxide; Quaternary ammonium	Vital Oxide	Vital Solutions LLC	Feline calicivirus; norovirus	5	RTU	No	03/26/2020
88494-2	Ethyl alcohol; Quaternary Ammonium	Wedge Disinfectant Wipes	North American Infection Control Ltd	Poliovirus	1	RTU	No	03/26/2020
88089-4	Hydrogen peroxide; Peroxyacetic acid	PeridoxRTU	BioMed Protect LLC	Canine parvovirus	3	RTU	No	03/26/2020
84526-1	Hydrogen peroxide; Silver	HaloSpray	Halosil International Inc	Feline calicivirus; norovirus	10	RTU	No	03/26/2020
777-104	Hypochloric acid	Vanity GP	Reckitt Benckiser LLC	Poliovirus	10	RTU	No	03/26/2020
87518-1	Hypochlorous acid	Hsp2O	HSP USA LLC	Feline calicivirus; norovirus	1	RTU	No	03/26/2020
73232-1	Isopropyl alcohol; Quaternary ammonium	Alpet D2	Best Sanitizers Inc	Feline calicivirus; norovirus	5	RTU	No	03/26/2020
64240-65	Lactic acid	WC Complete	Combat Insect Control Systems	Rhinovirus	0.5	RTU	No	03/26/2020
34810-21	Phenolic	Ready To Use Wex-Cide	Wexford Labs Inc	Rhinovirus	10	RTU	No	03/26/2020
6836-245	Quaternary ammonium	CSP-46	Lonza LLC	Feline calicivirus; norovirus	10	RTU	No	03/26/2020
6836-333	Quaternary ammonium	MMR-4U	Lonza LLC	Feline calicivirus; norovirus	10	RTU	No	03/26/2020
9480-11	Quaternary ammonium	BackSpray RTU	Professional	Feline calicivirus; norovirus	5	RTU	No	03/26/2020

EPA Registration Number	Active Ingredient/s	Product Name	Company	Follow the disinfection directions and preparation for the following virus	Contact Time (in minutes)	Formulation Type	Emerging Viral Pathogen Claim?	Date Added to List N
			Disposables International Inc					
3862-181	Quaternary ammonium	Foaming Disinfectant Cleaner	ABC Compounding Co Inc	Poliovirus	10	RTU	No	03/26/2020
61178-2	Quaternary ammonium	Public Places	Microgen Inc	Feline calicivirus	30	RTU	No	03/26/2020
70627-33	Quaternary ammonium	Envy Liquid Disinfectant Cleaner	Diversey, Inc.	Canine parvovirus	5	RTU	No	03/26/2020
706-65	Quaternary ammonium	Claire Disinfectant Bathroom Cleaner	Claire Manufacturing Company	Adenovirus	10	RTU	No	03/26/2020
777-71	Quaternary ammonium	Lysol Brand Foaming Disinfectant Basin Tub & Tile Cleaner II	Reckitt Benckiser LLC	Feline calicivirus; norovirus	10	RTU	No	03/26/2020
498-179	Quaternary ammonium; Ethanol	Champion Sprayon Spray Disinfectant Formula 3	Chase Products Co	Rhinovirus	10	RTU	No	03/26/2020
5741-28	Sodium hypochlorite	Tulmult	Spartan Chemical Company Inc	Feline calicivirus; norovirus	0.5	RTU	No	03/26/2020
11346-6	Sodium hypochlorite	Clorox HS	The Clorox Company	Feline calicivirus; norovirus	1	RTU	No	03/26/2020
64240-44	Sodium hypochlorite	Soft Scrub with Bleach	Combat Insect Control Systems	Rhinovirus	3	RTU	No	03/26/2020
70271-15	Sodium hypochlorite	2% Sodium Hypochlorite Spray	KIK International, Inc.	Rhinovirus	1	RTU	No	03/26/2020
777-102	Sodium hypochlorite	Lysol Brand Toilet Bowl Cleaner with Bleach	Reckitt Benckiser LLC	Rhinovirus	5	RTU	No	03/26/2020
84683-3	Thymol	Benefect Botanical Daily Cleaner Disinfectant Spray	Cleanwell LLC	Feline calicivirus; norovirus	10	RTU	No	03/26/2020

EPA Registration Number	Active Ingredient/s	Product Name	Company	Follow the disinfection directions and preparation for the following virus	Contact Time (in minutes)	Formulation Type	Emerging Viral Pathogen Claim?	Date Added to List N
34810-25	Thymol	Ready to Use Thymol	Wexford Labs Inc	Feline calicivirus; norovirus	10	RTU	No	03/26/2020
34810-36	Citric acid	CleanCide Wipes	Wexford Labs Inc	Feline calicivirus; norovirus	5	Towelette	No	03/26/2020
1839-174	Quaternary ammonium	Stepan Towelette	Stepan Company	Feline calicivirus; norovirus	10	Towelette	No	03/26/2020
6836-379	Quaternary ammonium	Nugen NR Disinfecant Wipes	Lonza LLC	Feline calicivirus; norovirus	5	Towelette	No	03/26/2020
11346-3	Sodium hypochlorite	Clorox HW	The Clorox Company	Feline calicivirus; norovirus	1	Towelette	No	03/26/2020
70590-1	Sodium hypochlorite	Hype-Wipe	Current Technologies Inc	Feline calicivirus; norovirus	1	Towelette	No	03/26/2020
10324-59	Quaternary ammonium	Maquat 64	Mason Chemical Company	Human coronavirus	10	Dilutable	No	03/19/2020
777-128	Quaternary ammonium	Lysol® Laundry Sanitizer	Reckitt Benckiser	Human coronavirus	5	Dilutable (laundry pre-soak only)	No	03/19/2020
10324-230	Hydrogen aeroxide; Peroxyacetic acid	Maguard 1522	Mason Chemical Company	Human coronavirus	1	Dilutable	No	03/13/2020
70627-62	Hydrogen peroxide	Phato 1:64 Disinfectant Cleaner	Diversey Inc	Human coronavirus	5	Dilutable	No	03/13/2020
74559-6	Hydrogen peroxide	Oxy-res (Concentrate)	Virox Technologies Inc	Human coronavirus	5	Dilutable	No	03/13/2020
10324-214	Hydrogen peroxide; Peroxyacetic acid	Maguard 5626	Mason Chemical Company	Human coronavirus	10	Dilutable	No	03/13/2020
8383-12	Hydrogen peroxide; Peroxyacetic acid	Peridox	Contec Inc	Human coronavirus	2	Dilutable	No	03/13/2020
1677-204	Octanoic acid	65 Disinfecting Heavy Duty Acid Bathroom Cleaner	Ecolab Inc	Human coronavirus	2	Dilutable	No	03/13/2020
54289-4	Peroxyacetic acid	Peraclean 15 (Peroxyacetic Acid Solution)	Evonik Corporation	Human coronavirus	1	Dilutable	No	03/13/2020

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34810-31	Phenolic	Wex-cide 128	Wexford Labs Inc	Human coronavirus	10	Dilutable	No	03/13/2020
70627-6	Phenolic	Phenolic Disinfectant HG	Diversey Inc	Human coronavirus	10	Dilutable	No	03/13/2020
10324-63	Quaternary ammonium	Maquat 10	Mason Chemical Company	Human coronavirus	10	Dilutable	No	03/13/2020
10324-71	Quaternary ammonium	Maquat 280	Mason Chemical Company	Human coronavirus	10	Dilutable	No	03/13/2020
10324-72	Quaternary ammonium	Maquat 615-HD	Mason Chemical Company	Human coronavirus	10	Dilutable	No	03/13/2020
10324-80	Quaternary ammonium	Maquat 5.5-M	Mason Chemical Company	Human coronavirus	10	Dilutable	No	03/13/2020
10324-81	Quaternary ammonium	Maquat 7.5-M	Mason Chemical Company	Human coronavirus	10	Dilutable	No	03/13/2020
10324-85	Quaternary ammonium	Maquat 86-M	Mason Chemical Company	Human coronavirus	10	Dilutable	No	03/13/2020
10324-93	Quaternary ammonium	Maquat 64-PD	Mason Chemical Company	Human coronavirus	10	Dilutable	No	03/13/2020
10324-94	Quaternary ammonium	Maquat 20-M	Mason Chemical Company	Human coronavirus	10	Dilutable	No	03/13/2020
10324-96	Quaternary ammonium	Maquat 50-DS	Mason Chemical Company	Human coronavirus	10	Dilutable	No	03/13/2020
10324-99	Quaternary ammonium	Maquat 10-PD	Mason Chemical Company	Human coronavirus	10	Dilutable	No	03/13/2020
10324-105	Quaternary ammonium	Maquat 128 PD	Mason Chemical Company	Human coronavirus	10	Dilutable	No	03/13/2020
10324-108	Quaternary ammonium	Maquat 256-MN	Mason Chemical Company	Human coronavirus	10	Dilutable	No	03/13/2020
10324-112	Quaternary ammonium	Maquat 128-MN	Mason Chemical Company	Human coronavirus	10	Dilutable	No	03/13/2020
10324-113	Quaternary ammonium	Maquat 64-MN	Mason Chemical Company	Human coronavirus	10	Dilutable	No	03/13/2020
10324-114	Quaternary ammonium	Maquat 32-MN	Mason Chemical	Human coronavirus	10	Dilutable	No	03/13/2020

EPA Registration Number	Active Ingredient/s	Product Name	Company	Follow the disinfection directions and preparation for the following virus	Contact Time (in minutes)	Formulation Type	Emerging Viral Pathogen Claim?	Date Added to List N
			Company					
10324-115	Quaternary ammonium	Maquat 750-M	Mason Chemical Company	Human coronavirus	10	Dilutable	No	03/13/2020
10324-117	Quaternary ammonium	Maquat 710-M	Mason Chemical Company	Human coronavirus	10	Dilutable	No	03/13/2020
10324-140	Quaternary ammonium	Maquat MQ2525M-CPV	Mason Chemical Company	Human coronavirus	10	Dilutable	No	03/13/2020
10324-141	Quaternary ammonium	Maquat 256-NHQ	Mason Chemical Company	Human coronavirus	10	Dilutable	No	03/13/2020
10324-142	Quaternary ammonium	Maquat MQ2525M-14	Mason Chemical Company	Human coronavirus	10	Dilutable	No	03/13/2020
10324-154	Quaternary ammonium	Maquat 64-NHQ	Mason Chemical Company	Human coronavirus	10	Dilutable	No	03/13/2020
10324-155	Quaternary ammonium	Maquat 128-NHQ	Mason Chemical Company	Human coronavirus	10	Dilutable	No	03/13/2020
10324-156	Quaternary ammonium	Maquat 512-NHQ	Mason Chemical Company	Human coronavirus	10	Dilutable	No	03/13/2020
10324-157	Quaternary ammonium	Maquat 32-NHQ	Mason Chemical Company	Human coronavirus	10	Dilutable	No	03/13/2020
10324-164	Quaternary ammonium	Maquat 256 PD	Mason Chemical Company	Human coronavirus	10	Dilutable	No	03/13/2020
10324-166	Quaternary ammonium	Maquat 32	Mason Chemical Company	Human coronavirus	10	Dilutable	No	03/13/2020
10324-167	Quaternary ammonium	Maquat 32 PD	Mason Chemical Company	Human coronavirus	10	Dilutable	No	03/13/2020
10324-177	Quaternary ammonium	Maquat 705-M	Mason Chemical Company	Human coronavirus	10	Dilutable	No	03/13/2020
10324-194	Quaternary ammonium	Maquat 2420-10	Mason Chemical Company	Human coronavirus	10	Dilutable	No	03/13/2020
10324-198	Quaternary ammonium	Maquat 702.5-M	Mason Chemical Company	Human coronavirus	10	Dilutable	No	03/13/2020
61178-1	Quaternary ammonium	D-125	Microgen Inc	Human coronavirus	10	Dilutable	No	03/13/2020
61178-5	Quaternary ammonium	CCX-151	Microgen Inc	Human coronavirus	10	Dilutable	No	03/13/2020

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62472-2	Quaternary ammonium	Kennelsol HC	Alpha Tech Pet Inc.	Human coronavirus	10	Dilutable	No	03/13/2020
67619-10	Quaternary ammonium	CPPC Everest	Clorox Professional Products Company	Human coronavirus	10	Dilutable	No	03/13/2020
70385-6	Quaternary ammonium	QGC	Prorestore Products	Human coronavirus	10	Dilutable	No	03/13/2020
70627-15	Quaternary ammonium	Warrior	Diversey Inc	Human coronavirus	10	Dilutable	No	03/13/2020
70627-23	Quaternary ammonium	Virex II/ 64	Diversey Inc	Human coronavirus	10	Dilutable	No	03/13/2020
70627-35	Quaternary ammonium	Envy Foaming Disinfectant Cleaner	Diversey Inc	Human coronavirus	3	Dilutable	No	03/13/2020
70627-63	Quaternary ammonium	512 Sanitizer	Diversey Inc	Human coronavirus	10	Dilutable	No	03/13/2020
85343-1	Quaternary ammonium	Teccare Control	Talley Environmental Care Limited	Human coronavirus	10	Dilutable	No	03/13/2020
90287-1	Quaternary ammonium	Maquat 25.6-PDX	VI-JON INC	Human coronavirus	10	Dilutable	No	03/13/2020
1839-169	Quaternary ammonium	BTC 885 Neutral Disinfectant Cleaner-64	Stepan Company	Human coronavirus	10	Dilutable	No	03/13/2020
777-82	Quaternary ammonium	Lysol Brand Deodorizing Disinfectant Cleaner	Reckitt Benckiser	Human coronavirus	10	Dilutable	No	03/13/2020
1677-256	Quaternary ammonium	FSC 35K	Ecolab Inc	Human coronavirus	5	Dilutable	No	03/13/2020
1839-78	Quaternary ammonium	NP 3.2 Detergent/ disinfectant	Stepan Company	Human coronavirus	10	Dilutable	No	03/13/2020
1839-79	Quaternary ammonium	NP 4.5 Detergent/ disinfectant	Stepan Company	Human coronavirus	10	Dilutable	No	03/13/2020
1839-81	Quaternary ammonium	NP 9.0 Detergent/ disinfectant	Stepan Company	Human coronavirus	10	Dilutable	No	03/13/2020
1839-86	Quaternary ammonium	BTC 2125 M 10%	Stepan	Human coronavirus	10	Dilutable	No	03/13/2020

EPA Registration Number	Active Ingredient/s	Product Name	Company	Follow the disinfection directions and preparation for the following virus	Contact Time (in minutes)	Formulation Type	Emerging Viral Pathogen Claim?	Date Added to List N
		Solution	Company					
1839-94	Quaternary ammonium	NP 3.2 (D & F) Detergent/ disinfectant	Stepan Company	Human coronavirus	10	Dilutable	No	03/13/2020
1839-96	Quaternary ammonium	NP 9.0 (D & F) Detergent/ disinfectant	Stepan Company	Human coronavirus	10	Dilutable	No	03/13/2020
1839-155	Quaternary ammonium	BTC 2125M 20% Solution	Stepan Company	Human coronavirus	10	Dilutable	No	03/13/2020
1839-166	Quaternary ammonium	BTC 885 NDC-128	Stepan Company	Human coronavirus	10	Dilutable	No	03/13/2020
1839-167	Quaternary ammonium	BTC 885 Neutral Disinfectant Cleaner-256	Stepan Company	Human coronavirus	10	Dilutable	No	03/13/2020
1839-168	Quaternary ammonium	BTC 885 NDC-32	Stepan Company	Human coronavirus	10	Dilutable	No	03/13/2020
1839-176	Quaternary ammonium	Liquid-pak Neutral Disinfectant Cleaner	Stepan Company	Human coronavirus	10	Dilutable	No	03/13/2020
1839-211	Quaternary ammonium	SC-AHD-64	Stepan Company	Human coronavirus	5	Dilutable	No	03/13/2020
1839-212	Quaternary ammonium	SC-AHD-256	Stepan Company	Human coronavirus	5	Dilutable	No	03/13/2020
1839-213	Quaternary ammonium	SC-AHD-128	Stepan Company	Human coronavirus	5	Dilutable	No	03/13/2020
1839-214	Quaternary ammonium	SC-NDC-256	Stepan Company	Human coronavirus	5	Dilutable	No	03/13/2020
1839-215	Quaternary ammonium	SC-NDC-128	Stepan Company	Human coronavirus	5	Dilutable	No	03/13/2020
1839-233	Quaternary ammonium	SC-5:64N	Stepan Company	Human coronavirus	5	Dilutable	No	03/13/2020
1839-235	Quaternary ammonium	SC-5:256N	Stepan Company	Human coronavirus	5	Dilutable	No	03/13/2020

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1839-236	Quaternary ammonium	SC-5:128N	Stepan Company	Human coronavirus	5	Dilutable	No	03/13/2020
1839-244	Quaternary ammonium	SC -5:64HN	Stepan Company	Human coronavirus	5	Dilutable	No	03/13/2020
1839-245	Quaternary ammonium	SC-5:256HN	Stepan Company	Human coronavirus	5	Dilutable	No	03/13/2020
1839-246	Quaternary ammonium	SC-5:128HN	Stepan Company	Human coronavirus	5	Dilutable	No	03/13/2020
3862-191	Quaternary ammonium	Assure	ABC Compounding Co Inc	Human coronavirus	10	Dilutable	No	03/13/2020
6198-4	Quaternary ammonium	Q. A. Concentrated Solution	National Chemicals Inc	Human coronavirus	10	Dilutable	No	03/13/2020
6836-233	Quaternary ammonium	BARDAC 205M-50	Lonza LLC	Human coronavirus	1	Dilutable	No	03/13/2020
6836-381	Quaternary ammonium	Lonzagard R-82G	Lonza LLC	Human coronavirus	1	Dilutable	No	03/13/2020
10324-57	Quaternary ammonium	Maquat 42	Mason Chemical Company	Human coronavirus	10	Dilutable	No	03/13/2020
10324-58	Quaternary ammonium	Maquat 128	Mason Chemical Company	Human coronavirus	10	Dilutable	No	03/13/2020
88494-1	Quaternary ammonium; Ethanol	Wedge Disinfectant	North American Infection Control LTD	Human coronavirus	1	Dilutable	No	03/13/2020
74986-4	Sodium chlorite	Selectrocide 2L500	Selective Micro Technologies LLC	Human coronavirus	10	Dilutable	No	03/13/2020
87508-3	Sodium chlorite	Performacide	Odorstart LLC	Human coronavirus	10	Dilutable	No	03/13/2020
67619-8	Sodium hypochlorite	CPPC Ultra Bleach 2	Clorox Professional Products Company	Human coronavirus	5	Dilutable	No	03/13/2020
67619-28	Sodium hypochlorite	Milo	Clorox Professional Products Company	Human coronavirus	5	Dilutable	No	03/13/2020

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1672-65	Sodium hypochlorite	Austin A-1 Ultra Disinfecting Bleach	James Austin Company	Human coronavirus	10	Dilutable	No	03/13/2020
1672-67	Sodium hypochlorite	Austin's A-1 Concentrated Bleach 8.25%	James Austin Company	Human coronavirus	5	Dilutable	No	03/13/2020
5813-50	Sodium hypochlorite	Ultra Clorox Brand Regular Bleach	The Clorox Company	Human coronavirus	5	Dilutable	No	03/13/2020
5813-103	Sodium hypochlorite	Cgb3	The Clorox Company	Human coronavirus	5	Dilutable	No	03/13/2020
5813-104	Sodium hypochlorite	Cgb4	The Clorox Company	Human coronavirus	5	Dilutable	No	03/13/2020
5813-86	Glycolic acid	CBW	The Clorox Company	Human coronavirus	10	Impregnated materials	No	03/13/2020
5813-93	Glycolic acid	Show	The Clorox Company	Human coronavirus	10	Impregnated materials	No	03/13/2020
9402-15	Hydrogen peroxide; Ammonium carbonate; Ammonium bicarbonate	Victor Spray	Kimberly-Clark Global Sales LLC	Human coronavirus	5	Pressurized liquid	No	03/13/2020
4822-548	Triethylene glycol; Quaternary ammonium	Combo	S.C. Johnson & Son Inc	Human coronavirus	5	Pressurized liquid	No	03/13/2020
777-136	Ethanol	Lysol Neutra Air® 2 in 1	Reckitt Benckiser	Human coronavirus	0.5	RTU	No	03/13/2020
70627-78	Hydrogen peroxide	Suretouch	Diversey Inc	Human coronavirus	5	RTU	No	03/13/2020
74559-8	Hydrogen peroxide	Accel 5 RTU	Virox Technologies Inc	Human coronavirus	5	RTU	No	03/13/2020
89900-1	Hydrogen peroxide	Nathan 2	S.C. Johnson Professional	Human coronavirus	5	RTU	No	03/13/2020
9402-14	Hydrogen peroxide; Ammonium carbonate; Ammonium bicarbonate	Hitman Spray	Kimberly-Clark Global Sales LLC	Human coronavirus	5	RTU	No	03/13/2020
8383-13	Hydrogen peroxide; Peroxyacetic Acid	Peridox RTU ™	Contec Inc	Human coronavirus	2	RTU	No	03/13/2020
89896-2	Hypochlorous acid	Cleansmart	Simple Science	Human coronavirus	10	RTU	No	03/13/2020

EPA Registration Number	Active Ingredient/s	Product Name	Company	Follow the disinfection directions and preparation for the following virus	Contact Time (in minutes)	Formulation Type	Emerging Viral Pathogen Claim?	Date Added to List N
			Limited					
4822-606	L-Lactic Acid	Fangio	S.C. Johnson & Son Inc	Human coronavirus	10	RTU	No	03/13/2020
4822-608	L-Lactic acid	Gurney	S.C. Johnson & Son Inc	Human coronavirus	5	RTU	No	03/13/2020
8383-3	Phenolic	Sporicidin (Brand) Disinfectant Solution (Spray)	Contec Inc	Human coronavirus	5	RTU	No	03/13/2020
11346-4	Quaternary ammonium	Clorox QS	The Clorox Company	Human coronavirus	2	RTU	No	03/13/2020
70627-2	Quaternary ammonium	Disinfectant D.C. 100	Diversey Inc	Human coronavirus	2	RTU	No	03/13/2020
777-66	Quaternary ammonium	Lysol® Brand All Purpose Cleaner	Reckitt Benckiser	Human coronavirus	2	RTU	No	03/13/2020
777-91	Quaternary ammonium	Lysol® Kitchen Pro Antibacterial Cleaner	Reckitt Benckiser	Human coronavirus	2	RTU	No	03/13/2020
1839-225	Quaternary ammonium	SC-RTU-TB	Stepan Company	Human coronavirus	5	RTU	No	03/13/2020
4822-607	Quaternary ammonium	Lauda	S.C. Johnson & Son Inc	Human coronavirus	5	RTU	No	03/13/2020
4822-609	Quaternary ammonium	Stewart	S.C. Johnson & Son Inc	Human coronavirus	3	RTU	No	03/13/2020
4822-613	Quaternary ammonium	Gertrude	S.C. Johnson & Son Inc	Human coronavirus	5	RTU	No	03/13/2020
5813-73	Quaternary ammonium	Clorox Everest	The Clorox Company	Human coronavirus	0.5	RTU	No	03/13/2020
42964-17	Quaternary ammonium; Ethanol	Asepticare	Airkem professional products	Human coronavirus	2	RTU	No	03/13/2020
70144-5	Quaternary ammonium; Ethanol	Opti-cide Max	Micro-Scientific LLC	Human coronavirus	2	RTU	No	03/13/2020
10492-5	Quaternary ammonium;	Discide Ultra	Palermo	Human coronavirus	0.5	RTU	No	03/13/2020

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	Isopropanol	Disinfecting Spray	Healthcare LLC					
46781-6	Quaternary ammonium; Isopropanol	Cavicide	Metrex Research	Human coronavirus	2	RTU	No	03/13/2020
72977-3	Silver ion; Citric acid	Axen(R) 30	ETI H2O Inc	Human coronavirus	3	RTU	No	03/13/2020
72977-5	Silver ion; Citric acid	Sdc3a	ETI H2O Inc	Human coronavirus	1	RTU	No	03/13/2020
56392-10	Sodium hypochlorite	Caltech Swat 200 9B	Clorox Professional Products Company	Human coronavirus	2	RTU	No	03/13/2020
67619-11	Sodium hypochlorite	CPPC Shower	Clorox Professional Products Company	Human coronavirus	1	RTU	No	03/13/2020
67619-13	Sodium hypochlorite	CPPC Storm	Clorox Professional Products Company	Human coronavirus	1	RTU	No	03/13/2020
67619-27	Sodium hypochlorite	Buster	Clorox Professional Products Company	Human coronavirus	5	RTU	No	03/13/2020
70590-2	Sodium hypochlorite	Bleach-rite Disinfecting Spray With Bleach	Current Technologies Inc	Human coronavirus	1	RTU	No	03/13/2020
1677-241	Sodium hypochlorite	Hydris	Ecolab Inc	Human coronavirus	5	RTU	No	03/13/2020
5813-98	Sodium hypochlorite	Lite	The Clorox Company	Human coronavirus	1	RTU	No	03/13/2020
5813-106	Sodium hypochlorite	Axl	The Clorox Company	Human coronavirus	1	RTU	No	03/13/2020
4091-23	Sodium hypochlorite; Sodium carbonate	Mold Armor Formula 400	W.M. Barr & Comapny Inc	Human coronavirus	0.5	RTU	No	03/13/2020
74986-5	Sodium chlorite	Selectrocide 5g	Selective Micro Technologies LLC	Human coronavirus	10	Solid	No	03/13/2020

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9402-17	Hydrogen peroxide; Ammonium carbonate; Ammonium bicarbonate	Hitman Wipe	Kimberly-Clark Global Sales LLC	Human coronavirus	6	Wipe	No	03/13/2020
8383-14	Hydrogen peroxide; Peroxyacetic acid	Peridoxrtu (Brand) One-step Germicidal Wipes	Contec Inc	Human coronavirus	0.5	Wipe	No	03/13/2020
8383-7	Phenolic	Sporicidin (Brand) Disinfectant Towelettes	Contec Inc	Human coronavirus	5	Wipe	No	03/13/2020
777-130	Quaternary ammonium	Caterpillar	Reckitt Benckiser	Human coronavirus	2.5	Wipe	No	03/13/2020
1839-190	Quaternary ammonium	Stepan Disinfectant Wipe	Stepan Company	Human coronavirus	10	Wipe	No	03/13/2020
6836-336	Quaternary ammonium	Lonza Disinfectant Wipes Plus	Lonza LLC	Human coronavirus	4	Wipe	No	03/13/2020
6836-372	Quaternary ammonium	Nugen 2m Disinfectant Wipes	Lonza LLC	Human coronavirus	2	Wipe	No	03/13/2020
6836-382	Quaternary ammonium	Nugen Low Streak Disinfectant Wipes	Lonza LLC	Human coronavirus	4	Wipe	No	03/13/2020
9480-5	Quaternary ammonium	Sani-cloth Germicidal Disposable Cloth	Professional Disposables International Inc	Human coronavirus	3	Wipe	No	03/13/2020
10492-4	Quaternary ammonium; Isopropanol	Discide Ultra Disinfecting Towelettes	Palermo Healthcare LLC	Human coronavirus	0.5	Wipe	No	03/13/2020
5813-99	Sodium hypochlorite	Wave	The Clorox Company	Human coronavirus	1	Wipe	No	03/13/2020
70627-75	Soduum hypochlorite	Avert Sporicidal Disinfectant Cleaner Wipes	Diversey Inc	Human coronavirus	1	Wipe	No	03/13/2020