

Michigan Economic Recovery Council (MERC)

COVID-19 health practices: Industrial facilities

May 5th, 2020

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Executive summary

Common set of practices for industrial facilities

- Will be applicable to different industrial facilities
- Will be easy to communicate and executable
- Will not be cost prohibitive

Supporting documentation to be aligned with CDC guidelines. In case of any conflict between any of the foregoing guidance or requirements, the strictest shall apply.

There are a couple important considerations for industrial facilities

- Majority of employees will need to return to the facility in order to resume work
- Many industrial spaces will be able to modify work environments in order to satisfy appropriate distancing, while others may not have the same flexibility, in these cases additional PPE may be required

Document is meant as a guide; not exhaustive

Across facility types, health practices fall into the following eight categories



1 Response owners and plan

Establish virus response team



2 Facility entry and health check protocols

Conduct health screenings, temperature checks, send sick employees home, restrict visitors/contractors



3 PPE requirements

What PPE is necessary in this environment? (Provide guidelines and PPE for different settings and roles)



4 Distancing

How do we ensure we are maintaining appropriate distance across the facility?



5 Cleaning

What are the cleaning protocols and how to we communicate these effectively to employees?



6 Case monitoring protocols

How do we ensure we can respond quickly to a potential case?



7 Facility/space temporary closure

What is our response plan? (e.g., Block off areas of exposure to allow appropriate deep cleaning)



8 Travel restrictions

How do we handle employee essential and personal travel?

Core practices (“must-haves”): Practices that can be implemented more broadly across different sized organizations

Next level implementation: Recommended additional practices that provide better risk mitigation (for better equipped facilities)

Industrial facilities can safeguard using health practices in the following focus areas

Categories	Health practice overview	Categories	Health practice overview
1 Response owners and plan	- Establish team or roles - Define scope of team (e.g., manage implementation of practices and protocols) - Communicate role and expectations to employees	5 Cleaning	- Conduct frequent daily cleaning of all high touch areas and post protocols publicly - Establish employee cleaning protocols and emphasize frequent hand washing - Elevate daily and deep cleaning - Conduct routine checks for cleaning procedures
2 Facility entry and health check protocols	- Reduce congestion at start times and entry point(s) - Screen employee health/exposure - Screen all essential visitors with similar protocol	6 Case monitoring protocols	- Define protocol for symptomatic employees - Provide symptom checking and guidance to exposed employees - Mark off and clean spaces identified in tracing (full areas)
3 PPE and safety requirements	- Establish PPE standards and distribution methods (e.g., facial coverings required) - Ensure PPE and safety supplies are stocked - Improve hand washing/sanitization availability - Provide guidance for PPE usage and reasoning	7 Facility pause/shutdown	- Enforce appropriate shut down/ pause and cleaning protocol - Communicate shut down protocol to employees
4 Distancing	- Increase general distancing between people - Limit common space use and operations - Stagger shifts and timing to reduce congestion - Provide reinforcements (e.g., barriers, X's) for distancing expectations	8 Travel restrictions	- Restrict business and personal travel and have employees work from home if possible after travel - Modify transportation practices

1: Response owners and plan (health practices)

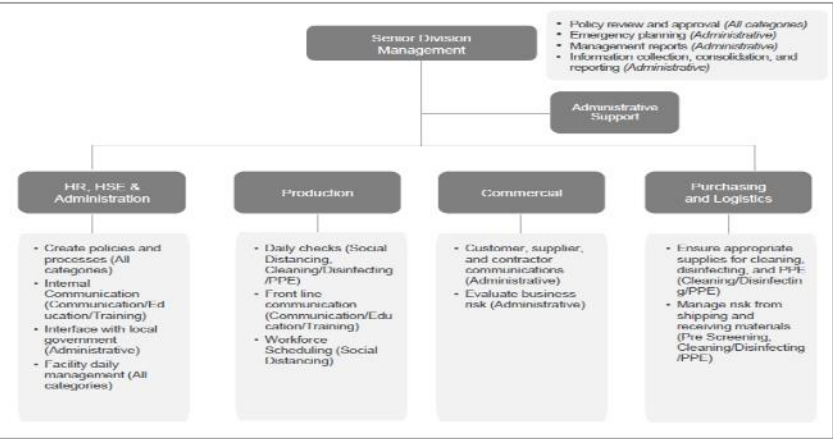
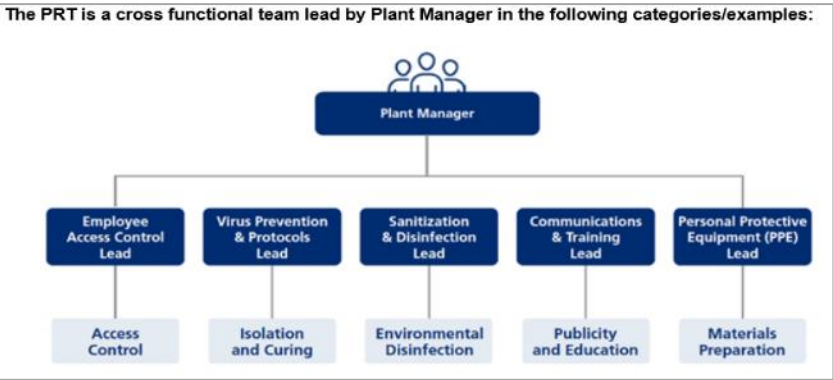
Health practice overview	Core practices	Next level implementation for better equipped facilities
Establish team or roles	Establish Central Point of Contact responsible for implementing the pandemic response plan and coordinating with necessary stakeholders (e.g., labor union if on site)	Dedicate staff to virus response team (sole or primary focus), depending on size of company and facility Adapt the corporate framework with site-specific protocols
Define scope of team (e.g., manage implementation of practices and protocols)	Design, implement, monitor, and report on key health practices Develop training protocols and implementation plan for employees Create and complete a health checklist Educate local union on pandemic response plan and return to work protocols and work with them to ensure cooperation Establish point person for external communications with labor union (where applicable), regional leaders, and health services Ensure adherence to safety protocols – <i>clarify protocols, informed by CDC</i> , deploy personnel to necessary checkpoints (e.g., temperature recording)	Build phased approach to return to work , plan to bring back a segment of employees to limit potential exposure and ease transitions Leverage a digital tool or dashboard to track success of protocols and opportunities for improvement
Communicate role and expectations to employees	Send notice (digital) to employees of team formation and who will be point of contact for questions Share pre-return to work materials: - Review of Safe Workplace guidelines - Training for team members Host 1st Day trainings/orientation - Localize guidance to be consistent with facility - Host first-day training orientation for all plant staff - Day One training organized (e.g., attendee groups, logistics, schedules, trainers, post-training feedback loop)	Conduct periodic (e.g., weekly, monthly) Q&A with representative of team to supply employees with updates in policy and operations Ensure performance is sustained over time , particularly with less visible activities like disinfection (e.g., use a hard copy or software-based checklist)

1: Response owners and plan (examples)

Illustrative

Establish team or roles

Example: Large/medium plan



Example: Small factory/job shop plan

	Access control	Isolation and curing	(Not exhaustive) Environmental disinfection	Publicity and education	Materials preparation
Factory manager			Develop		
Volunteer leaders to help out (with core development and relations)			Develop	Execute	
Shift leaders		Execute	Check	Execute	Check
Other employees			Execute		Execute
Cleaning staff			Execute		

All team members likely to dedicate some not all of their time developing and executing health practice precautions

2: Facility entry and health check protocols (e.g., pre-work, who is involved, check-in upon arrival) (health practices)

Health practice overview	Core practices	Next level implementation for better equipped facilities
Reduce congestion at start times and entry point(s) (from vehicle to station)	Assign dedicated entry point(s) for all employees or groups (to reduce congestion at main entrance, to help with screening needs, and to help with tracing) Label queue spots with X's outside building in case of congestion	Stagger start times for locations to ensure social distancing and effectiveness of screening protocols (50/50 rotational schedules)
Screen employee health/exposure (home, entrance)	Advise vulnerable workers and people with underlying health conditions of their right to continue to quarantine, and to draw down UI benefits instead of returning to work Ensure entry screening which should include temperature checks (if equipment is available) and health questionnaires, concurrent with observation for overt symptoms prior to plant entry Ensure physical barriers are in place to prevent anyone from bypassing this screening Provide guidance on stay home while sick, hygiene and separation	Check on outside office interactions (e.g., vulnerable family members, secondary jobs – firefighter, volunteer, EMT) and have employee stay home if possible Make temperature and screening procedure visible to ensure employees feel safe to enter the building If possible, on site partnerships with local health facilities to help facilitate quick testing (likely not currently possible given lack of testing capabilities) Alert your staff of potentially vulnerable populations and manage appropriately HR team prepared to receive inquiries or reports of symptomatic employees prior to shift
Screen all visitors with similar protocol	Implement screening practices for contractors and suppliers Develop visitor screening protocols (no visitors allowed or apply same standard as employees) Suspend all non-essential in-person visitors (e.g., tours) until further notice	Ensure visitors schedule their visits and attain approval before arrival (e.g., conduct visitor questionnaire virtually and deny visitors who do not meet requirements)

2: Facility entry and health check protocols (e.g., pre-work, who is involved, check-in upon arrival) (examples 1/2)

Illustrative

Stagger timing and/or designate point(s) of entry

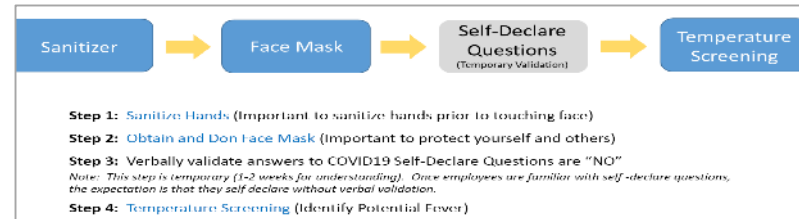
Screen employee health/exposure (home, entrance)



Site Entry:



Elevators:



Daily Self-Screening

Our company is concerned for your safety and the safety of your co-workers. We are monitoring the development of Coronavirus. In the interest of ensuring a safe and healthy work environment, we recommend that you voluntarily monitor your health status by carefully completing this self-assessment each day before coming to work.

Survey to be completed daily by active employees before coming to work:

1. Have you had physical exposure to a person suffering from Coronavirus symptoms as noted below.

If you answered Yes, please contact Human Resources prior to coming to work so that a determination can be made whether you should remain offsite from any company facility for 14 days following the last potential exposure to the COVID-19. You may be required to submit evidence of exposure to an infected person. Should you be required to remain offsite, you should keep in contact with an HR representative and receive clearance from HR before returning to the company premises. You may also be required to have written clearance from a Doctor.

2. If you have been asked to perform daily checks due to COVID-19 becoming more prevalent in your area, or believe you have been exposed to COVID-19: Do one or more of the following common COVID-19 symptoms below currently apply to you?

- Temperature $>38^{\circ}\text{C}$ (100.4°F) or higher
- Frequent unexplained cough
- Unexplained shortness of breath or difficulty breathing
- Unexplained tiredness

If the answer to question 2 is **YES**, you may have symptoms of COVID-19. We ask you to please contact your Human Resources representative, seek medical attention and remain off company property for 14 days following cessation of symptoms and written clearance by a Doctor. Please keep in continuous contact with your HR representative.

If the answer to all the above questions is **NO**:

Please adhere to local HR guidance regarding your work schedule and any special precautions to be taken.



2: Facility entry and health check protocols (e.g., pre-work, who is involved, check-in upon arrival) (examples 2/2)

Illustrative

Screen all visitors with similar protocol

Example signage

Visitors & Contractors COVID-19 Self-Screening Checklist

The safety of our employees, customers and visitors remains Lear's primary concern. As the corona virus (COVID-19) outbreak continues to evolve and spread globally, Lear is monitoring the situation closely and will periodically update company guidance on current recommendations from the Center for Disease Control and the World Health Organization.

To help prevent the spread of COVID-19 and reduce the potential risk of exposure to our employees and visitors we are conducting a simple screening questionnaire. Your participation is important to help us take precautionary measures to protect you and everyone in the building.

Thank you for your time and co-operation.

Visitor's Name:	Mobile phone number:
Visitor's Company / Organization:	Name of Lear Host:
Facility Name:	

If the answer is yes to one or more of the following questions, access to the facility will be denied.

Self - Declaration by Visitor	
1	Have you returned from any COVID-19 affected area within the past 14 days? (date and to provide current testing) ☐ Yes ☐ No
2	Have your immediate family or others to which you have frequent contact returned from any COVID-19 affected area within the last 14 days? ☐ Yes ☐ No
3	Have you had close contact with or cared for anyone diagnosed with COVID-19 within the last 14 days? ☐ Yes ☐ No
4	Are you showing any signs of one or more of the following symptoms? Temperature >38°C (100.4 °F) or higher, cough, shortness of breath, difficulty breathing, tiredness? ☐ Yes ☐ No

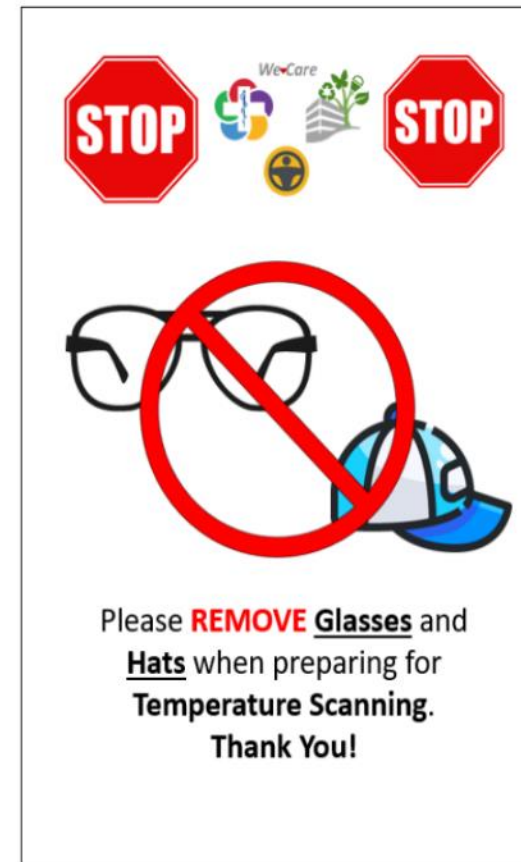
Signed (visitor): _____ Date: _____

Note: If you plan to be onsite for consecutive days, please immediately advise your Lear host if any of your responses change. The information collected on this form will only be used to determine your access rights to Lear facilities.

Access to the facility approved? (tick one) ☐ Yes ☐ No

Signed (Lear Host): _____ Date: _____

Name: _____



  
• International Air Travel or cruise in Last 14 Days? • Close Contact with Diagnosed COVID19 Patient in Last 14 Days? • Currently have Fever, Chills, Cough, Difficulty Breathing, Headache, Sore Throat, Muscle/ Joint Aches, Diarrhea, Abdominal Cramps or Nausea?
Protect Yourself and Others! Please do NOT come to work. Notify your Supervisor of Absence. If you experience any symptoms while at work, please report them immediately to the site Health Center or call GSIC at 800-814-3390 speak with the GM Physician on call.

3: PPE and safety requirements (e.g., what do you need before walking in facility) (health practices 1/2)

Health practice overview	Core practices	Next level implementation for better equipped facilities
Establish standard PPE requirements and distribution methods	Facial coverings are required for all employees on the site and should be deployed before employees approach the facility entrance check point. Mask guidance includes surgical masks, cloth masks, and cloth face coverings (must follow public health requirements) Face shields should be considered by all employees who cannot consistently maintain 6 ft of separation from other employees Distribute necessary PPE at morning check-in (by select member of team or during Monday building entrance screening)	Establish mask pick-up location in the building for people not present during Monday distribution or who need replacement (provide reason) Record and track who has received their weekly masks
Ensure PPE and safety supplies (e.g., facial coverings, hand sanitizer) are stocked	Confirm operation has an adequate supply of soap, disinfectant, hand sanitizer, paper towels and tissues Confirm stock of facial coverings (surgical masks, appropriate cloth masks), face shields, gloves, and glasses on site and on order with lead time Ensure that team members have access to facial coverings Ensure the site has ability to collect temperature readings (e.g., employees collect at-home and record in central location, or "No-Touch" thermometers upon entry to facility)	It is best practice that companies ensure 30-days of critical supplies (e.g., sanitizer, masks) on site or on order with sufficient lead time

3: PPE and safety requirements (e.g., what do you need before walking in facility) (health practices 2/2)

Health practice overview	Core practices	Next level implementation for better equipped facilities
Improve hand washing availability and safety	Ensure there are enough hand sanitization/hand washing stations per total workers in the plant	Place gloves in common areas or for high risk roles or roles that share materials (e.g., external paper handling) Coordinate procedures with suppliers so protocols line up (pause delivery if health safety practices do not line up, if possible)
Provide guidance for PPE usage and reasoning	Communicate guidance for what PPE is required for jobs within 6 feet of another individual and what PPE is always required Remind employees to bring PPE home and back each day (e.g., security and signage) Ensure employees understand the use of PPE (including training of doffing and re-donning facial covering and respiratory protection when going on breaks/lunch), as an addition to the protective triad of personal hygiene, social distancing and frequent disinfection.	Create and distribute post-assessment measures to ensure mastery of PPE concepts

3: PPE requirements (e.g., what do you need before walking in facility) (examples)

Illustrative

Establish standard PPE requirements and distribution methods

Ensure PPE and safety supplies (masks, hand sanitizer) are stocked

Provide guidance for PPE usage and reasoning

Personal Protective Equipment Matrix						
Personal Protective Equipment (PPE) Required						
	Safety Glasses	Surgical OR Procedure Mask	Gloves (nitrile)	Protective Goggles OR Safety Glasses AND Face Shield	Respirator (N95)	Protective Gown OR Cloth Coverall
Member of Emergency Response Team in continuous close contact with an employee who has become ill at work	Req	Req	Req	Req	Opt	Req
Employee who becomes ill at work	Req	Req				
Employee who has recovered from COVID and has residual cough	Req	Req				
General Cleaning	Req	Req	Req			
Individual conducting on-site thermal scanning for employees who do not know their temperature	Req	Req	Req	Opt		Opt
Employees who must work in close quarters (< 6ft or 2m)	Req	Req				
When travelling in Magna arranged transportation on buses / vehicles		Req				
Shipping & Receiving (interaction with drivers)	Req	Opt	Req			
Decontamination of affected areas (Follow chemical specific requirements for PPE)	Req	Req	Req	Req		Req
Security Personnel		Opt	Opt			
Essential Visitors						
Reception/Entry Area	Follow Social Distancing and Usual PPE Required By Facility					
Public Areas / General Plant Area/Offices						
Food Preparation Staff in Kitchen	Req	Req	Req			
Close Kitchen Temporarily where possible. If not, clean after every use						
Off-site Visits (Customers Sites)					Follow Site Requirements	
Company Travel (Planes, Trains, Automobiles)					Follow Regional Travel Advice	



Hand Washing Instructions

Wet hands with water and enough soap to cover all surfaces

Rub hands palm to palm, also with fingers interlaced for 20 seconds

Rinse hands with running water

Dry your hands thoroughly with a single use towel

COVID-19 | FAST FACTS

Know how to keep yourself, your family and your coworkers safe.

DAILY SELF-SCREENING

Are you experiencing any of the following COVID-19 symptoms?

Temperature 100.4°F+

Frequent Unexplained Cough and/or difficulty breathing

Unexplained tiredness

If the answer is YES you may have symptoms of COVID-19. We ask that you please seek medical attention, contact your HR representative and remain off company property for 14 days to self-quarantine.

PERSONAL HYGIENE

Wash your hands frequently with soap and water for at least 20 seconds

OR Use antibacterial gel with 70% alcohol if you're unable to wash your hands

When sneezing or coughing cover your nose and mouth with the inner equaled your face or with Disposable hankerchief

Don't touch your face including your mouth, ears, eyes and nose

SOCIAL DISTANCING

1 Keep a distance of 6 feet between people

2 Avoid physical contacts such as hand greetings, kissing and hugging

3 Avoid going to crowded places, and if it's inevitable, don't take minors or older people with you

4 Avoid contact with anyone who is sick

<https://www.cdc.gov/coronavirus/2019-ncov/prevent-getting-sick/diy-cloth-face-coverings.html>

<https://www.cdc.gov/handwashing/when-how-handwashing.html>

4: Distancing (health practices)

Health practice overview	Core practices	Next level implementation for better equipped facilities
Increase general distancing between people	Establish sitewide requirement for social distancing in accord with CDC guidelines (6 ft) Ensure staff stay 6ft apart using appropriate visual cues when possible– tape, floor markings, tool to reserve seats, one directional stairwells, walking traffic patterns marked, elevator guidelines When 6ft distancing is not available see PPE section for additional guidance	Send policy updates through company communication channels (e.g., CEO and building guidance) Deploy training and support for any mandated requirements from the State Leverage technology to help employees to reserve work space to limit overall movement
Limit common space use and operations	Limit access to common spaces – close salad bars and buffets within cafeterias and kitchens; move to boxed food via delivery or pick-up points to limit traffic, also reduce cash payments	Limit capacity in restrooms (close off alternative stalls, leverage door markers, or other methods) Install touchless waste bins, paper towel dispensers, sinks, and soap dispensers where possible Turn off potentially hazardous equipment for transmission risk (e.g., water fountains, ice makers, restroom hand dryers)
Stagger shifts and timing to reduce congestion	Implement rotational shift schedules (e.g., increase # shifts, alternate days/weeks etc.) to reduce headcount where possible Stagger start times and meal times (e.g., by 15min) to limit clogged doorways (companies can also designate different access points for individuals to enter) Make stairwells and entry points one way with markings on the ground and proper training/signage provided	
Provide reinforcements (e.g., barriers, X's) for distancing expectations	Install temporary (e.g., board, plastic) barriers between stations & cafeteria tables Implement a checklist to ensure sustained compliance Manage incoming supplies appropriately, including basic personal, PPE and surface disinfection. If possible, place packages in storage/transport for an extended period, if not possible confirm supplier safety protocols	Make meetings virtual (if possible for more than 2 people) and limit capacity for each conference room to ensure appropriate distance

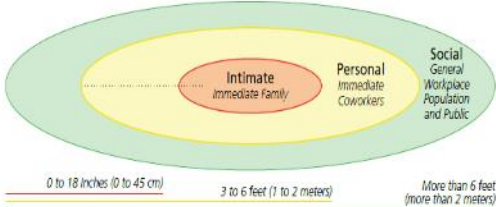
4: Distancing (examples)

Illustrative

Increase general distancing between people

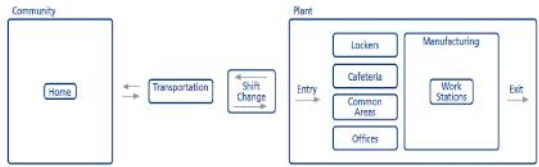
In practice this means:

- Staying 1 to 2 meters (3 to 6 feet) away from others as a normal practice
- Eliminating contact with others, such as handshakes or embracing coworkers, visitors, or friends
- Avoiding touching surfaces touched by others, to the extent feasible.
- Avoiding anyone who appears to be sick, or who is coughing or sneezing.



Note: The company should not allow any meeting of greater than 10 persons to occur until further notice, even when the meeting area is large enough to accommodate appropriate social distancing.

This practice of social distancing includes but is not limited to production lines, cafeterias, common areas, entrance/exit areas of work locations, and offices. These are examples, but the principle of social distancing is universally applicable.



Limit common space use and operations

Social Distancing During Lunch Break

Manage lunch breaks to provide social spacing and proper hygiene. Stagger start and end times to limit the amount of people within the lunch area at a given time.

Recommended
For plants with less than 200 on a shift example:

Separate the plant into two groups

- Alternating days or weeks - Group A will be asked to go to their car/truck for lunch, allow 5-10 extra minutes for travel time to incent employees to go to their vehicle (if reasonable and practical).
- Group B will be able to use the lunch room limit entry to a certain number and all others will go to the vehicle. In effect employees can chose which option they prefer.

1st Break Example

- Row 1 Teams 1
- Row 2 Teams 5
- Row 3 Teams 9

**For plants with over 2*

Plants with full service

- Do not allow a
- Place a perman



Provide reinforcements (e.g., barriers, X's) for distancing expectations



5: Cleaning (e.g., daily cleaning routine) (health practices)

Health practice overview	Core practices	Next level implementation
Conduct more frequent daily cleaning of all high touch areas and post protocols publicly	Disinfect work stations and common surfaces prior to site reopen Shut down high touch point areas (e.g., ice machines) if adequate cleaning cannot be provided	Replace or clean/disinfect HVAC air filters and ensure optimal turnover of fresh/clean air within the site (e.g. HVAC return air fully open; bay and other doors and windows opened where feasible)
Establish employee cleaning protocols and emphasize frequent hand washing	Provide disinfecting materials with EPA-approved emerging viral pathogens Require employees to wipe down work station 2-3 times daily - employees responsible for wiping down work area and provided guidance on how, encourage employees to clean tools and workspace as necessary Shared tools should be cleaned at the beginning and end of individual usage Post physical signage specific to personal hygiene (wash hands frequently, cover cough/sneeze, don't touch face, limit use of hand dryers) and disinfection	Provide time for employees to clean at the start of shifts and at the end of shifts (e.g., 15min)
Elevate daily cleaning and deep cleaning by 3rd parties	Designate cleaning protocol for all areas and ensure visibility, etc. 2-6x/day (frequency depends on threat level and touch-point frequency – e.g., water stations, restrooms cleaned more, cleaners update visible forms) Communicate increased cleaning schedule to cleaning staff and where appropriate verify that 3rd party janitorial companies exercise proper protocols	Conduct deep clean if a presumed case is identified
Conduct routine checks for cleaning procedures	Monitor cleanliness weekly with checklist from virus response team	Monitor facility for compliance daily (building owners to check in with manager or virtual checks)

5: Cleaning (e.g., daily cleaning routine) (examples)

Illustrative

Conduct frequent cleaning of all high touch areas and post protocols publicly

Establish employee cleaning protocols

Elevate daily cleaning and deep cleaning by 3rd parties

Conduct routine checks for cleaning procedures

Common Space Cleaning by Housekeeping

During Shift

- All Entry/Exit Points
 - Before all breaks
- Restrooms
 - 3-4x/shift
- Doors, handrails, drinking fountains, etc.
 - 3-4x/shift
- Cafeteria, food service, vending
 - Before high use breaks/lunch
 - Available during breaks

Between Shifts

- Employee Entry/Exit Points
- All Locker Rooms
- All Restrooms
- All Doors, handrails, drinking fountains, etc.
- Cafeteria, food service, vending

Task Instruction Sheet			
Task #	Task Description	Frequency	Responsible Party
1	Disinfect High Touch Surfaces	Every 4 hours	Housekeeping
2	Disinfect Restrooms	Every 4 hours	Housekeeping
3	Disinfect Cafeteria	Before and after meals	Housekeeping
4	Disinfect Vending Machines	Every 4 hours	Housekeeping
5	Disinfect Entry/Exit Points	Every 4 hours	Housekeeping
6	Disinfect Handrails	Every 4 hours	Housekeeping
7	Disinfect Drinking Fountains	Every 4 hours	Housekeeping
8	Disinfect Locker Rooms	Every 4 hours	Housekeeping
9	Disinfect Doors	Every 4 hours	Housekeeping
10	Disinfect Floors	Every 4 hours	Housekeeping
11	Disinfect Walls	Every 4 hours	Housekeeping
12	Disinfect Ceilings	Every 4 hours	Housekeeping
13	Disinfect Light Fixtures	Every 4 hours	Housekeeping
14	Disinfect Electrical Outlets	Every 4 hours	Housekeeping
15	Disinfect Air Vents	Every 4 hours	Housekeeping
16	Disinfect Stairs	Every 4 hours	Housekeeping
17	Disinfect Elevators	Every 4 hours	Housekeeping
18	Disinfect Parking Garage	Every 4 hours	Housekeeping
19	Disinfect Loading Dock	Every 4 hours	Housekeeping
20	Disinfect Warehouse	Every 4 hours	Housekeeping

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12	Disinfect Ceilings	Every 4 hours	Housekeeping
13	Disinfect Light Fixtures	Every 4 hours	Housekeeping
14	Disinfect Electrical Outlets	Every 4 hours	Housekeeping
15	Disinfect Air Vents	Every 4 hours	Housekeeping
16	Disinfect Stairs	Every 4 hours	Housekeeping
17	Disinfect Elevators	Every 4 hours	Housekeeping
18	Disinfect Parking Garage	Every 4 hours	Housekeeping
19	Disinfect Loading Dock	Every 4 hours	Housekeeping
20	Disinfect Warehouse	Every 4 hours	Housekeeping

Layered Audit Checklist

Tasks

- Implement Audit

Conforming Audit Card

Shift:

Card #

General Disinfection Measures

- 1. Did the cleaning crew / employees receive training about the disinfection method and frequency?
- 2. Was hospital grade disinfectant or fresh 10% chlorine bleach solution (sodium hypochlorite solution) used as appropriate?
- 3. Did the team conduct a comprehensive cleaning in all work cell common surfaces (control buttons, tools conveyors, trays, containers, forklifts, machines)?
- 4. Did the team conduct a comprehensive cleaning in all offices, desk and conference rooms (cabinets, desk, table and chair surface)?
- 5. Did the team conduct a comprehensive cleaning in all general objects often used or touched (floors, windows, handles, faucets, sinks, bathrooms)?
- 6. Did the team conduct a comprehensive cleaning in cafeteria/canteen (tables, chair surfaces, dispensers, vending machines, etc.)?
- 7. Did the team conduct a comprehensive cleaning in all common surfaces of personnel buses (seat surfaces, rails, belts, door, windows, floor)?
- 8. Did the team conduct a comprehensive cleaning in floors, walls and multiuse areas (tables, chair surfaces, dispensers, vending machines, etc.)?

2nd Layer Audit

Audit of the above performed by a higher level manager

9. Were non conformities raised? Y/N

10. If yes, were they actioned?

11. If no, please provide reasons:

3rd Layer Audit

Audit of Layer 2 by EHS or a higher level manager

13. Were all non conformities closed? Y/N

14. If no, please provide reasons:

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6: Case monitoring protocols (health practices)

Health practice overview	Core practices	Next level implementation for better equipped facilities
Define protocol for symptomatic employees	Ensure employees with symptoms are sent home Ensure isolation protocol and areas established to isolate symptomatic employees prior to sending to medical care or to home self-quarantine Ensure protocols are visible in the facility Create policies to encourage workers to stay home or leave facility (e.g., temp paid sick leave) when feeling sick or when in close contact with a confirmed positive case	Provide work from home guidance where appropriate and support for employees (e.g. virtual trainings, etc.) Check in periodically with employee on symptoms and work ability Connect with local authorities and health services for case monitoring Identify and train Isolation Coordinator(s) for on-site assistance
Provide symptom checking and guidance to exposed employees	Initiate cleaning and communication protocols when employees are sent home with symptoms (e.g., inform team members/manager of potential exposure)	Conduct tracing procedures for 7 days prior to onset of employee symptoms (based on where employee was and whether PPE was worn). See details on how to qualify “contact” on following page Communicate procedures with employees
Mark off and clean spaces identified in tracing (full work areas)	Temporarily close and clean appropriate work areas based on tracing procedures and CDC recommendations whenever a person has been sent home for symptoms Perform a site or department deep cleaning/disinfection (e.g., misting) as well as physical disinfection of work areas and common tools and surfaces whenever a COVID-19 person has been confirmed at the site.	If required, leverage third-party cleaning services

6: Case monitoring protocols (examples)

Illustrative

Define protocol for contact tracing

RISK LEVEL:

If employee has laboratory-confirmed COVID-19 infection:

	High Risk	Medium Risk	Low Risk	No Risk
Employee's family living in same household/caring for Employee	X			
Health Clinic employee that might have treated employee (did not use appropriate precautions)	X			
Other employees that were in close contact (within 6 feet/2 meters)		X		
Health Clinic employee that might have treated the employee (used appropriate precautions)		X		
Employees in the same indoor environment for a prolonged period of time (ex: lunchroom, general work area) but not meeting the definition of close contact			X	
Employees that may have walked by or been briefly in the same room; had no interaction				X

If friend/family member has laboratory-confirmed COVID-19 infection:

	High Risk	Medium Risk	Low Risk	No Risk
Employee if living in the same household, is an intimate partner of, or providing care in a non-healthcare setting (such as a home)	X			
Employee has had close contact		X		
Employee's immediate team member that was in close contact (within 6 feet/ 2 meters)				X
Employees in the same indoor environment (ex: lunchroom, general work area)				X
Employees that may have walked by or been briefly in the same room				X

Managing Risk Level Based on Presence of Symptoms

Risk Level	Non- Symptomatic	Symptomatic
High Risk	Quarantine (voluntary or under public health orders) in a location to be determined by public health authorities	Immediate isolation with consideration of public health orders
Medium Risk	Recommendation to remain at home or in comparable setting. Practice social distancing	Self-isolation Health association will determine if there is a need for medical evaluation/testing.
Low Risk	No restriction on movement Self-observation	Self-isolation, social distancing Person should seek health advice to determine if medical evaluation is needed
No Risk	None	Self-isolation, social distancing Person should seek health advice to determine if medical evaluation is needed

7: Facility/space temporary closure (e.g., clear area if someone comes to work sick) (health practices)

Health practice overview	Core practices	Next level implementation for better equipped facilities
Enforce appropriate shut down/ pause and cleaning protocol	Send potentially exposed people home if there was a positive case in the building Shut appropriate locations in the building down for deep cleaning (enforce appropriate amount of shutdown time) if there was a confirmed positive case (before reopening: conduct deep cleaning	Establish situation room representatives (HR, security, communications) to prepare for evacuating or closing facility
Communicate exposure to employees	Establish clear reporting process for any symptomatic or positive test employees (e.g., notify company leaders, maintain central log). Provide documentation of positive cases for necessary parties (labor union, health services, health insurance). Record confirmed cases in accordance with OSHA guidance¹ Communicate potential exposure or positive cases, while maintaining employee privacy	

1. <https://www.osha.gov/memos/2020-04-10/enforcement-guidance-recording-cases-coronavirus-disease-2019-covid-19>

8: Travel restrictions (health practices)

Health practice overview

Core practices

Next level implementation for better equipped facilities

Restrict business and personal travel and have employees work from home if possible after travel

Reduce risk from employees, customers, vendors by **restricting air travel** to only essential travel (implement administrative controls - prevent purchase of air travel until approval)

Permit business critical air travel (and public transport in some cases) only after receiving **appropriate approval**

Require **14 day quarantine** after returning from personal travel (confirm with manager upon return)

Modify transportation practices

Where employees utilize public transportation prior to work, **implement face coverings (surgical mask or cloth face covering) requirement and provide hand sanitization supplies**

If transportation is work owned/managed, utilize assigned seating to simplify contact tracing should an employee be diagnosed as COVID-19 positive.

Work with the transportation provider(s) to review health screening (reducing shift changeover time) and disinfection protocols for seats and other common surfaces

Subsidize personal transportation to avoid mass transit use

Phasing: Health practices will apply in urgent, stabilizing, recovery, and/or normal phases (health practices)

Urgent (now)	Stabilizing (near-term)	Recovery (when appropriate)	Normal (when appropriate)
Assess and prepare the physical facility (e.g., close common areas, deep clean)	Welcome first wave of employees (e.g., essential, 20-50% of full capacity) and conduct training of health safety (e.g., screening, PPE usage, reporting)	Welcome second wave of employees (e.g., 50-75% of full capacity) (modify working settings for vulnerable populations – time of day, remote etc.)	When and if the COVID-19 threat is considered minimal due to a vaccine, effective treatment protocol, or other mitigating factor, certain protocols may be relaxed
Prepare protocols and ensure employees will have proper PPE and safety supplies	Implement core practices - Wear PPE according to company and CDC guidance, alternate shifts on-site (every other week/day etc.), close common areas, deep clean often, and reduce cross team interaction to maximize social distancing when possible	Continue leveraging core practices - Wear PPE according to company and CDC guidance, stagger start times, stagger lunch times, deep clean occasionally, and reduce cross team interaction to maximize social distancing when possible	Most people allowed back to work
Develop training for employees when they return			Optional PPE usage (depending on company and CDC policy), lower capacity in common areas, maintain personal sanitization practices and training, deep clean when needed
Develop a phase in or alternating shift schedule to accommodate essential onsite employees (e.g., stagger start times)			
Use pre-return communications, onsite visual cues and signage to reinforce the health expectations.	Conduct only essential manufacturing and leverage unused areas to increase distancing		
	Implement daily safety reviews and correction of problem areas (identify and solve friction points associated with phase 1 in preparation for phase 2)		