The Global Center for Health Security encompasses all biopreparedness, infectious disease, and special pathogens research, education, and clinical care at the University of Nebraska Medical Center (UNMC) and its clinical partner, Nebraska Medicine. This includes the Nebraska Biocontainment Unit and the Training, Simulation and Quarantine Center, which features the nation’s only federal quarantine unit and simulated biocontainment patient care units for advanced experiential training.

The Central States Center for Agricultural Safety and Health (CS-CASH) is housed in the College of Public Health at UNMC. The mission of CS-CASH is to work with the agricultural community in the Central States and beyond to conduct research and intervention, education, and outreach activities aimed at preventing injuries and illness to improve the health and safety of members of the agricultural community.

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This guide is intended to provide best practices and recommendations for cattle feeding facilities to minimize the risk that COVID-19 presents to employees and the community and to reduce disruptions to business operations. This is a guide only and should be adapted to the context of each organization and its employees. Users of this guide should work in coordination with local public health departments to tailor their use of the guide to their specific situations and needs. The information provided in this guide does not, and is not intended to, constitute medical or legal advice and is provided for informational and educational purposes only. The recommendations in this guide reflect the best available information at the time this guide was prepared. All recommendations are consistent with CDC environmental services recommendations. For more information, please visit: https://www.cdc.gov/coronavirus/2019-ncov/community/reopen-guidance.html?deliveryName=USCDC_2067-DM268911 [cdc.gov]

Adherence to the recommendations in this guide does not guarantee that there will be no outbreak or further spread of COVID-19, and we do not assume responsibility for any injury or damage to persons.
Coronavirus Disease 2019, or COVID-19, is affecting farms and ranches in multiple states across the United States. An essential industry, cattle feedlots are especially vulnerable to COVID-19 given challenges posed by the high numbers of employees necessary to maintain business operations, close proximity of personnel, and a diverse workforce with cultural, linguistic, and socioeconomic challenges to social distancing and limited access to other public health interventions.

COVID-19 is primarily spread person-to-person by close contact (within six feet) through respiratory droplets produced when an infected person sneezes, coughs, or talks and indirectly when a person touches a surface contaminated with SARS-CoV-2, the virus that causes COVID-19, and then touches their nose, mouth, or eyes. The virus can also be transmitted through the fecal-oral route.

In a pandemic setting, the health of each worker is critical to the health of the community and to sustaining the critical infrastructure of the cattle industry. Preventing the spread of the outbreak also means addressing the health needs of feedlot workers. To be sure, this should not be left for the facility to shoulder alone, but rather a combined effort between national and local public health alongside the industry. These efforts should be made an urgent public health priority because infection among worker populations could also lead to community infection, eventually affecting further spread in entire population’s health.

This guide is intended to provide best practices and recommendations for cattle feeding facilities to minimize the risk that COVID-19 poses to employees and the community and to reduce disruptions to business operations. As with any infection prevention and control measures, the foundation of successful implementation requires a culture of safety to exist where all stakeholders have equitable ownership of the safety of the community and a culture that allows all members to identify potential hazards without fear of reprisal. In healthcare environments, this is practiced when all stakeholders (patients, staff, technicians, nurses, and physicians) are equitably engaged in risk and intervention assessment and all have a responsibility and mechanisms to identify potential risks and process improvements without reprisal. Likewise, mitigation of risks posed by COVID-19 in cattle feeding facilities will rely on full adoption of this culture of safety by all levels of leadership, management, and workers.

Recommended safety measures to be implemented are based on the hierarchy of controls, a hazard mitigation framework that outlines controls in decreasing order of effectiveness (see Figure 1). In the context of mitigating COVID-19 risks, the most effective controls, Elimination and Substitution, are not feasible as the virus is unable to be physically removed (e.g., through vaccination) or substituted for something less hazardous. The latter three steps, involving the application of engineering and administrative controls and proper use of personal protective equipment, are applicable to the mitigation of contagious risk within cattle feeding facilities and are the basis for framing this document. This is a guide only and should be adapted to the context of each facility. Facilities should work in coordination with local public health departments to tailor specific situations and needs to each facility.

Contact gchs@unmc.edu with questions or comments.
Engineering Controls place a barrier between the worker and the virus. They are not dependent on a person’s knowledge, practice, or compliance; therefore, they reduce the opportunity for human error.

**PHYSICAL BARRIERS AND MODIFICATIONS**

When possible, use physical barriers to separate workers from one another, and minimize the opportunities for person-to-person transmission of COVID-19. Some strategies for installing physical barriers include:

- Identify opportunities to place physical barriers (e.g., plexiglass partitions, plastic sheeting) between workers in work areas where workers may have close contact including cafeterias, locker rooms, and bathrooms. Examples include:
  - Physical barriers at lunch tables (e.g., plastic, plexiglass partitions)
  - Extending partitions several inches past the end of the table provides an additional measure to prevent workers from leaning back and extending over to space of person sitting next to them
  - Physical barrier (e.g., plastic sheeting) in hallways to guide employee traffic to/from production and limit crossover
- Identify opportunities to implement non-touch controls (e.g., foot-operated door opener, touchless time clocks, keep doors open to allow movement without touching knobs when possible and when it doesn’t impact food safety zoning)
- Remove and rearrange tables and chairs and add tents or additional break areas to maximize social distancing at lunch and during breaks
  - For tables with built-in seating, use tape to restrict seating and increase distancing between seating spaces

**VENTILATION**

These recommended ventilation controls represent best practices; the more of them that can be implemented, based on available resources, the lower the risk. However, it is recognized that facilities may not be able to institute each control.

- Wherever possible, exhaust room air, deliver clean air, and increase flow exchange rates; if re-circulation is required, this should be done in concert with appropriate filtering (HEPA) or sterilization measures (e.g., UV)
- Wherever possible, create unidirectional, laminar airflow
- If fans are used, ensure fans blow clean air toward workers’ breathing zone and are used to create unidirectional airflow
  - Turbulent airflow from fans may contribute to re-aerosolization of viral particles from surfaces
Administrative controls are considered less effective than engineering controls but are the most common control measures available for COVID-19. These include policies, procedures, training, and workplace practices. Ineffective policies or practices or inconsistent compliance may heighten exposure risks for all.

**WORKFORCE POLICIES**

Strategies to promote workers staying home when presenting any signs or symptoms of COVID-19 are fundamental to reducing transmission of COVID-19 in cattle feeding facilities and to the effectiveness of other control measures. In addition, facilities should have concrete procedures in place that detail actions to take if a worker tests positive for COVID-19 and requirements for workers to return to work following illness.

- Institute flexible workplace and sick leave policies appropriate for all employees
  - Ensure these policies are communicated to all workers and adhered to by all levels of supervision and leadership
  - Unemployment and disability compensation are not adequate paid sick leave policies for workers with COVID-19
- Institute a no-penalty approach for all employees taking sick leave
  - Ensure that front-line supervisors understand the need to be flexible and not penalize workers for using these benefits
- Recognize certain policies may incentivize employees to come to work sick (e.g., extra food at end of shift, bonus pay)
- Develop standard operating procedures (SOPs) that detail actions to be taken if an employee or visitor is tested for COVID-19 or is exposed to an individual positive for COVID-19. This should include:
  - Process to contact and inform employees who may have been exposed
  - Working with local authorities to take appropriate steps for contact tracing
  - Cleaning and disinfecting surfaces to limit employee exposure
- Develop a return to work policy in coordination with the local public health department and taking into consideration [CDC guidelines for discontinuation of isolation](https://www.cdc.gov/coronavirus/2019-ncov/community/worksites/return-to-work-guidance.html)
Identify workplace coordinator(s) to lead response to COVID-19 and reduce its workplace impact
  » Coordinators should be known and accessible to all
  » They should serve as the main source of information and primary person(s) to answer questions related to COVID-19 (e.g., feeding safety manager)

Provide frontline supervisors additional training on COVID-19, sick leave policies, and PPE so they can provide effective and reliable guidance to workers and monitor for protective measures and PPE compliance

Develop strategic workforce plans to operate with a reduced workforce

Cross-train workers to perform essential functions to maintain operations

**UNIVERSAL MASK POLICY**

A policy should be implemented for all employees and essential visitors to wear a face mask/face covering at all times while on the facility premises. It is common for an individual to have COVID-19 and be able to transmit the disease to others in close contact while showing no signs or symptoms. As a result, the Centers for Disease Control and Prevention has issued guidelines recommending all persons wear face coverings at all times in indoor settings outside of their homes and outdoors when a physical distance of six-feet cannot be maintained.

There are different types of face coverings. It is highly recommended, as available, to provide employees at feedlots with procedure (surgical) masks due to the close contact they have with other employees and the liquid contact frequency in the work environment. Cloth face-coverings may not provide the needed protection for these workers. Hair and beard covers provide no protection; they should not be used as an alternative for a face mask.

Provide information to employees on proper face covering use (more information in the personal protective equipment section on page 12).
ENVIRONMENTAL CLEANING AND DISINFECTION

Current evidence suggests that the virus that causes COVID-19 can remain viable on surfaces for hours to days. As such, sound environmental cleaning and disinfection is a key factor in preventing COVID-19 transmission in cattle feeding facilities. Daily and routine cleaning and disinfection should be conducted to minimize surface contamination in common areas and on high-touch surfaces.

Develop Standard Operating Procedures (SOPs)

- Develop an SOP for enhanced cleaning and disinfection of common contact areas
- Identify common high-touch surfaces (e.g., tables, door handles, microwaves, railings, vending machines, restroom surfaces and fixtures, clock in/clock out stations) and develop a checklist to ensure frequent sanitization throughout the day
  - Dedicate additional staff, as available, with the only responsibility to disinfect high-touch surfaces
  - Create a checklist to validate consistent periodic cleaning of high-touch surfaces
- Develop a process for routine deep cleaning of common areas, either daily/nightly or, at minimum, weekly
- Develop a process to ensure lunch tables are cleaned between use

Maintain Adequate Supplies

- Place hand sanitizer dispensers throughout facility, particularly at entrance, exits, and transition areas
  - The more accessible hand sanitizer dispensers are, the more they will be used
  - Touchless hand sanitizer dispensers are preferred to manual dispensers (e.g., pumps)
- Assess supply of cleaning supplies, sanitizers, and disinfectants and encourage practical use
  - Note: Follow manufacturer recommendations; some disinfectants may be caustic and require gloves and ventilation
- Provide readily available sanitizing wipes, soap, and paper towels in cafeterias and breakrooms
- Use only EPA-registered disinfectants for use against SARS-CoV-2

Minimize Touching of Items by Multiple Workers

- Minimize the number of workers using the same tool
- Identify commonly-shared tools and develop procedures to sanitize between users
- Use no-touch receptacles and sanitizing stations when possible

Environmental Cleaning and Disinfection Resources

CDC guidance for cleaning and disinfecting facilities

EPA list of registered disinfectants effective against the virus that causes COVID-19
www.epa.gov/pesticide-registration/list-n-disinfectants-coronavirus-covid-19
ACTIVE SCREENING

To prevent the transmission of COVID-19 in facilities, all employees and essential visitors/contractors should be screened daily. This should include temperature screening as well as screening questions designed to identify individuals with other COVID-19 symptoms or exposure risks. Designated point(s) of entry should be used to facilitate screening of every employee or visitor prior to entry. Visual markers (e.g., tape, spray paint) should be added and spaced out every six feet to prevent workers from crowding during screening process. Provide masks at the earliest possible point during the screening process, ideally prior to screening and prior to or immediately upon entering the facility.

Screening Questions

- Develop and implement screening questions to be conducted daily. Examples could include:
  - Have you been in contact with someone confirmed with or suspected to have COVID-19 in the last 14 days?
  - Are you currently experiencing any of the following symptoms (e.g., fever, cough, shortness of breath, new loss of taste or smell, chills, muscle pain, sore throat)?
- These questions can be asked verbally or by referring to posters of symptoms in the languages spoken by workers during this process to validate yes or no.

Temperature Screening

- Implement a daily temperature screening prior to entering the facility
- Train screener on how to administer temperature checks
- Validate screener has adequate PPE and, as applicable, maintains social distancing during testing
  - Where able, separate screeners with a physical barrier or divider

Secondary Screening

- Secondary screening is warranted if an individual provides a positive response to any of the screening questions or has a temperature over 100°F (38°C)
- Secondary screening includes another temperature check and further evaluation of symptoms
SOCIAL DISTANCING

Social distancing is a strategy to reduce the spread of COVID-19 by limiting interactions with others. Workers that are able to telework should be encouraged to do so. For essential on-site workers, workers should maintain a distance of at least six feet from others whenever possible.

- Develop a policy to limit visitors except for required essential services
  - Where able, keep drivers in their trucks and provide them alternative washroom and hand hygiene stations outside of the facility
- Implement strategies for social distancing during breaks
  - Stagger break times to avoid large groups of employees
  - Provide additional rooms for break areas or erect tents outside of the facility
  - If workers want to eat in their personal vehicles, encourage hand hygiene and, as able, provide sanitizing wipes to workers for disinfection
  - Reset break and meeting rooms to promote physical distancing
    - Use visual markers (e.g., “X” tape on seat) to identify seats that are appropriately distanced
- Use tape on floors, wherever lines form, to designate spots six feet apart (e.g., locker rooms, screening areas, human resources office, where PPE is distributed)
- If office staff are required on-site, maintain six-foot distancing practice in all work areas
  - Conduct meetings from office using video or conference call technology as much as possible
**COHORTING AND PERSONNEL WORKFLOW/MOVEMENT**

Wherever possible, implement cohorting of small, consistent teams to minimize the number of potential exposures for each person. Cohorting will also simplify the identification process of possible exposed workers if a case of COVID-19 is confirmed. To limit congregating and crossover of workers in hallways, adjust personnel workflow and promote unidirectional flow.

- Wherever possible, implement cohorting of work teams
  - Work teams should be small and consistent, so that staff in close proximity to each other always work together, with lockers, breaks, and meals taken together
  - This serves to both decrease number of potential exposures for each person and to simplify identifying possible exposures if a case presents
- Limit crossover in entrances, hallways, and common spaces by adjusting personnel workflow
  - Limit the number of persons in a hallway or entryway at one time
  - As able, limit contact with high-touch surfaces (e.g., keep doors open to allow movement without touching knobs when possible and when it doesn’t impact food safety zoning)
- As able, promote unidirectional flow through locker areas and when entering/exiting production floor
  - Employees should enter the changing area with clean hands (hand sanitizer dispenser available at entry)
  - Keep soiled clothing separate from clean clothing through a designated drop zone

**COMMUNICATION/EDUCATION**

Communicating to and educating employees is a critical measure to manage risk and ensure accurate information on COVID-19 is provided to workers. Educational materials should be available in all languages spoken by workers.

- Post multilingual signage throughout facility on risk-minimizing behaviors for employees. Examples include:
  - Hand-washing reminders and procedures
  - COVID-19 symptoms and how to stop the spread
  - Facility screening process/requirements
  - Cough/sneeze etiquette
- Provide easy-to-understand information such as videos, posters, and infographics in the languages spoken by workers.
  - Video and image-based infographics avoid translation error and enhance communication with workers regardless of literacy or language proficiency
  - Facilities should engage language and culture experts to ensure appropriate and effective communication
- Provide information to employees on self-monitoring of COVID-19 symptoms and guidance for quarantine/self-isolation, including sick leave policies and procedures
- Refresh staff on proper hand hygiene and glove practices and refraining from touching their face
- Group communication and information distribution via text-message blast or email distribution lists can enhance penetration of messaging.
- In smaller facilities, when possible, host small group meetings with workers to relay information related to policies (including paid sick leave), education, and address workers’ concerns.

**Communication and Education Resources**

CDC printable posters for COVID-19 awareness and stopping transmission:
- www.cdc.gov/coronavirus/2019-ncov/communication/print-resources.html
- www.cdc.gov/coronavirus/2019-ncov/communication/print-resources.html

CDC resources/posters in languages other than English:
- www.cdc.gov/Pubs/other-languages

CDC consumer-based COVID-19 videos, including a YouTube channel with educational videos in Spanish:
- www.youtube.com/playlist?list=PLvrp9IOILTQZdKZTcAaYdyu4wKmhGCJNc

UNMC flyers in five languages on “Protecting Yourself from COVID-19 in the Workplace”:
- www.unmc.edu/healthsecurity/education/programs/covid-19-training.html

Nebraska Impact in partnership with the Office of Nebraska Governor Pete Ricketts have educational videos in six languages on staying healthy and guidance if one is sick, as well as infographics for each video:
- www.youtube.com/channel/UCO7HhZBL6Cal5WVcUNpyy3w/videos
- https://neimpact.org/covid-resources

WHO printable posters for hand washing procedures:
- www.who.int/gpsc/5may/resources/posters/en/

Short educational videos for the Hispanic/Latino communities are available on COVID-19 prevention, staying home, and staying safe when a family member is diagnosed with COVID-19:
- www.youtube.com/watch?v=t4lLXhyTMJQ&feature=youtu.be
- www.youtube.com/watch?v=fGVKhqiTgdU&feature=youtu.be
- www.youtube.com/watch?v=YHbQuwb46UQ&feature=youtu.be

UNMC Center for Reducing Health Disparities videos on mental health in the time of social distancing and, nutrition and healthy eating during the pandemic:
- www.latinocenter.org/wp-content/uploads/2020/03/zoom_0.mp4
- www.youtube.com/watch?v=YHbQuwb46UQ&feature=youtu.be

U.S. Citizenship and Immigration Services has released a statement ensuring that COVID-19 testing and treatment will not be used against individuals in a public charge determination:
GENERAL GUIDANCE FOR WORKER PROTECTION AT HOME AND IN THE COMMUNITY

Although cattle feeding facilities cannot control worker activities outside of the workplace, resources and education can be provided to employees on safe social distancing measures and protective measures against COVID-19 during transport to/from work and at home. Partnering with respected local community leaders and community organizations to educate and disseminate information to surrounding communities can enhance practice of safety precautions taken at home and in the community. A strategy for disseminating educational materials should be developed in coordination with local public health departments.

- Provide employees with information on safe social distancing practices
- Communicate flexible leave policies to employees and regularly reinforce how to use the leave if a worker needs to stay home if sick
- Make available educational handouts/materials on the above practices in all languages spoken by workers to take home at the end of their shifts
- Engage local community leaders (e.g., religious and spiritual leaders, elders) to help educate and develop messaging to community members
- Provide information to employees on self-monitoring of COVID-19 symptoms
  » Encourage them to stay home if they have ANY symptoms of COVID-19
- Promote basic protective measures against COVID-19
  » Frequently wash hands with soap and water for at least 20 seconds frequently
  » Avoid touching eyes, nose, and mouth
  » Avoid contact with people who are sick
  » Clean and disinfect frequently-touched surfaces in the home (e.g., doorknobs, tables, phones)
  » Follow guidance of local and state public health on staying home, avoiding non-essential errands, and avoiding social gatherings that exceed the number of individuals determined by the local/state public health department
  » Avoid going to the grocery store except when necessary
- Communicate flexible leave policies to employees and regularly reinforce how to use the leave if a worker needs to stay home if sick
- If using cloth face-coverings, provide workers information on cleaning and use of cloth face-coverings
  » Workers should be careful not to touch their eyes, nose, or mouth during removal
  » Perform hand hygiene immediately after removal
- If facility previously purchased cloth masks for workers and have since transitioned to surgical/procedure masks, consider providing cloth masks to workers for home use and/or for workers’ families
Carpooling
» Encourage workers to minimize carpooling to work, when possible
» As much as possible, limit the number of people per vehicle and space out seating
» Encourage workers to do hand hygiene prior to entering the vehicle and as soon as they enter work or home
» Remind carpoolers of risk-minimizing personal behaviors such as cough etiquette and avoiding touching their faces
» Encourage workers to wear face-coverings during carpooling

TESTING
☑ Develop a testing strategy in coordination with local public health officials
☑ If an employee is suspected or confirmed to have COVID-19, quarantining and testing should be prioritized among close contacts of the confirmed case
» If cohorting of small and consistent teams was implemented, this would include other individuals on the positive case’s team
☑ Work with local and state public health officials to conduct testing of priority cases and a general overall testing strategy for area
PPE is considered the least effective method to protect workers due to its reliance on the user; if the user wears improperly, or the PPE fails, the worker is exposed. However, PPE is still important. Workers should be provided appropriate PPE and trained on its correct use.

Appropriate PPE should be provided to all employees. Per the universal mask policy recommendation (page 4), all employees and essential visitors/contractors should be provided a procedure mask, upon entrance to the facility due to close contact with other employees. Cloth masks may not provide the needed protection for these workers but are an alternative if procedure masks are unavailable. Beard covers provide no protection and should not be used as an alternative for a face covering. Reusable PPE (e.g., face shields) should be properly disinfected after use and stored in a clean, dry location.

Employers should validate all employees wear PPE properly and consistently
- The mask should cover both the mouth AND nose
- Avoid touching the front of the mask and do not allow the mask to hang around the neck
- If necessary, identify auditors/observers to help ensure compliance
- Careful compliance to proper mask use is essential
- Emphasize proper hand hygiene after face coverings are removed
- When taking off the mask during lunch to eat, remove by the ear loops and place on a paper towel with the exterior side of mask down
- Do not touch the front of the mask, as the front is contaminated
- The mask should not be pushed under the chin to rest on the neck

Post a checklist or instructions informing proper donning and doffing of PPE in the languages spoken by the workers and include visual images
- Doffing of PPE to reduce disease transmission is especially critical: checklists should ensure hands are clean/sanitized when taking off safety goggles, masks, or any other item that may cause a worker to touch their face

Provide masks at the earliest possible point during the screening process
- Provide a hand sanitizer dispenser at the point of mask distribution so workers don masks with clean hands
- Allow workers to select their own mask to avoid unnecessary touching by others

Personal Protective Equipment Resources
OSHA Guidance for Prevention and Control
www.osha.gov/SLTC/covid-19/controlprevention

The Association for Professionals in Infection Control (APIC) Procedure Mask Poster “Do's & Don’ts”

The National Emerging Special Pathogens Training and Education Center Webinar on Varying Masks
www.youtube.com/watch?v=gcc8kVb7n_Y&feature=youtu.be&fbclid=IwAR3HhZxTimaMqzSFTHVTa-B2NsHX4as2EPQ1XmoqHtVRqPJB Dudley MzEoDE
ADDITIONAL COVID-19 RESOURCES

CDC Interim Guidance for Meat and Poultry Processing Workers and Employers

CDC Meat and Poultry Processing Facility Assessment Toolkit

CDC Interim Guidance for Businesses and Employers

CDC Basic Information on COVID-19

CDC Guidance for Critical Infrastructure Workers with COVID-19 Exposure

OSHA Guidance for Preparing Workplaces for COVID-19
www.osha.gov/Publications/OSHA3990.pdf

OSHA Guidance for Prevention and Control
www.osha.gov/SLTC/covid-19/controlprevention

FDA Frequently Asked Questions for COVID-19

North American Meat Institute (NAMI) Coronavirus Updates

CDC Understanding the Difference between N95s and Procedure Masks

CDC Information on Cleaning and Use of Cloth Masks
APPENDIX: CATTLE FEEDING FACILITY COVID-19 CHECKLIST

This document outlines a draft checklist for COVID-19 risk mitigation strategies for cattle feedlots. Recommended measures to be implemented are based on the hierarchy of controls, a hazard mitigation framework that outlines controls in decreasing order of effectiveness. This is a guide only and should be adapted to the context of each facility.

ENGINEERING CONTROLS

Engineering Controls are controls that place a barrier between the worker and the virus. They are not dependent on a person’s knowledge, practice, or compliance; thus, they reduce opportunity for human error.

☐ Wherever possible, exhaust room air and deliver clean air; if re-circulation is required, this should be done in concert with appropriate filtering (HEPA) or sterilization measures (e.g., UV)

☐ If fans are used in the facility, ensure clean air is blown toward workers’ breathing zone

☐ Identify opportunities to place physical barrier (e.g., plastic sheeting) in hallways to guide employee traffic to/from production and limit crossover

☐ Identify opportunities to place physical barrier at cafeteria lunch tables for tables with built-in seating (e.g., cardboard, plexiglass)

ADMINISTRATIVE CONTROLS

Administrative controls are considered less effective than engineering controls but are the primary control measures available for COVID-19. These include policies, procedures, training, and workplace practices. Ineffective policies or practices or inconsistent compliance may heighten exposure risks.

Workforce Policies

☐ Institute flexible workplace and sick leave policies and communicate these policies to all workers

☐ Unemployment and disability compensation are not adequate sick leave policies for COVID-19

☐ Institute a no-penalty approach for those taking sick leave

☐ Ensure supervisors understand that they are not to penalize workers for using these benefits

☐ Recognize certain policies may incentivize employees to come to work sick (e.g., extra food at end of shift, bonus pay)
☐ Develop SOPs that detail actions to be taken if an employee or visitor is tested for COVID-19 and/or tests positive for COVID-19 or is exposed to an individual positive for COVID-19. This should include:
  ☐ Implementing a process to contact relevant third parties who may have been exposed
  ☐ Cleaning and disinfecting surfaces to limit employee exposure
  ☐ Working with local authorities to take appropriate steps

☐ Develop a return-to-work policy in coordination with local public health department

☐ Identify workplace coordinators for COVID-19 issues and their workplace impact
  ☐ Coordinators should be known and accessible to all
  ☐ They should serve as the main source of information and primary person(s) to answer questions related to COVID-19 (e.g., Safety Manager)

☐ Provide frontline supervisors additional training on COVID-19 and PPE so they can provide effective and reliable communications to workers and monitor for protective measures and PPE compliance

☐ Develop plans to operate with a reduced workforce

☐ Cross-train workers to perform essential functions to maintain operations

Universal Mask Policy

☐ Institute policy for all employees and essential visitors to wear face masks at all times while in the facility

☐ Provide employees with information on proper face mask use

Communication/Education

☐ Provide easy-to-understand information (e.g., posters, infographics) that can be translated into the multiple languages spoken by workers

☐ Post multilingual signage throughout facility directing risk-minimizing behavior for employees
  Examples:
  ☐ Hand-washing procedures
  ☐ COVID-19 symptoms and how to stop the spread
  ☐ Screening process/requirements

☐ Provide resources to employees on social distancing outside of workplace (e.g., in homes, carpooling)

☐ Refresh staff on proper hand hygiene and glove practices and refraining from touching their face

☐ As available, share information and training via on-site televisions

General Guidance for Worker Protection at Home and in the Community

☐ Provide information to employees on self-monitoring of COVID-19 symptoms

☐ Provide information to employees on safe social distancing practices

☐ Provide information to employees on basic protective measures against COVID-19
  Examples:
  ☐ Handwashing procedures
  ☐ Staying home when sick
  ☐ Avoiding contact with people who are sick
  ☐ Following guidance of local and state public health officials on staying home and avoiding unnecessary trips outside of the home
Engage local community leaders to help educate and message community members
Encourage workers to wear cloth masks outside of the workplace (e.g., transport, at home, close contact situations)
Encourage workers to wear cloth masks during transport to work (if carpooling) and to protect others when waiting to be screened prior to them receiving a new mask for their shift
Carpooling
  - Encourage workers to minimize carpooling to work, when possible
  - As able, limit the number of people per vehicle and distance
  - Remind carpoolers of basic protective measures

Environmental Cleaning
- Implement an SOP for enhanced cleaning and disinfection of common contact areas
- Identify common high-touch surfaces (e.g., tables, door handles) and develop a checklist to ensure frequent sanitization throughout the day
- Make hand sanitizer dispensers available throughout facility, particularly at entrance, exits, and transition areas
- Assess supply of cleaning supplies, sanitizers, and disinfectants and encourage their practical use
- Ensure sanitizing wipes and soap readily available in lunch and breakrooms
- Identify commonly-shared tools and develop procedures to sanitize between users
- Implement a process for routine deep cleaning of common areas, either daily/nightly or, at minimum, weekly
- Use no-touch receptacles when possible

Active Screening
- Designate a single point of entry
- Develop and implement screening questions conducted daily for all individuals entering facility
- Employees are subject to daily temperature screening prior to entering the facility
  - Screener is trained to administer the temperature checks
  - Screener has adequate PPE and, as applicable, maintains social distancing as testing is performed

Social Distancing
- Limit visitors except for required essential services
- Maintain at least a six-foot distance whenever possible
- Strategies in place to ensure social distancing during breaks
  - Staggered break times to avoid large groups of employees
  - Additional rooms designated for break areas or tents outside
  - Break and meeting room seating are arranged to promote physical distancing
    - Limit chairs per table
    - Use tape on floors, if necessary, to designate spots six feet apart
    - Ensure cleaning of tables between use (by self-cleaning)
- If office staff required on-site, maintain six-foot distancing practice
Cohorting and Personnel Workflow/Movement

☐ Wherever possible, implement cohorting of work teams
  ☐ Work teams should be small and consistent, so staff in close proximity to each other always work together, with lockers, breaks, and meals taken together
  ☐ This serves to both decrease number of potential exposures for each person and to simplify identifying possible exposures if a case presents

☐ Limit crossover in entrances, hallways, and common spaces by adjusting personnel workflow
  ☐ Limit the number of persons in a hallway or entryway at one time
  ☐ As able, limit contact with high-touch surfaces (e.g., keep doors open to allow movement without touching knobs when possible and when it doesn’t impact food safety zoning)

☐ As able, promote unidirectional flow through locker areas and when entering/exiting production floor
  ☐ Employees enter the uniform area with clean hands
  ☐ Touching non-selected uniform clothing and hangars kept to minimum

Testing

☐ A testing strategy should be developed in coordination with local public health officials
☐ Work with local and state public health officials to conduct testing of priority cases

PERSONAL PROTECTIVE EQUIPMENT (PPE)

PPE is considered the least effective method to protect workers due to its reliance on the user; if the user wears improperly, or the PPE fails, the worker is exposed.

☐ Measures to distribute daily cycled PPE to avoid unnecessary touching by multiple workers
☐ Adequate PPE provided to all employees
☐ PPE worn correctly by all employees
☐ Emphasize proper hand hygiene after gloves or facial coverings are removed
☐ Checklist/instructions posted for donning/doffing PPE in multiple languages