



A Union of Professionals

Workplace Checklist for Prevention of Exposure to SARS-CoV-2 Virus in Public Employment

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Introduction

This checklist is a tool to help employers, unions, and workers in public agencies to assess workplace exposure, and identify prevention and control measures for SARS-CoV-2, the virus that causes COVID-19 disease. Key exposure risk factors include working within 6 feet of people who are known to be or are potentially infected with the virus and working with equipment, materials, and/or surfaces that are potentially contaminated with the virus.

This document may be completed collaboratively by employer and worker representatives or individually by each party. The checklist uses a yes/no format. If a question is not applicable, users should place N/A in the box. The “Note” box should be used to provide any details. The tool may be modified by users to make it more site- and industry-specific.

After completing the checklist, be sure to:

1. Review each item.
2. Develop an action plan that lists each item, who is responsible, what needs to be done, and by when.
3. Develop a communication plan to inform employees, customers, and the public of actions taken by the organization to protect workers and the public from exposure to the virus.

Employer/Agency Name	
Employer/Agency Location(s)	
Name of person(s) completing this checklist	
Date of completion	

Adapted from “[Workplace Checklist for Prevention of Exposure to SARS-CoV-2 Virus in Non-Healthcare Industries](#)” from the **NIH**: National Institute of Environmental Health Sciences Worker Training Program.

COVID-19 Exposure Control Plan

	YES	NO	N/A
1. Has the employer deployed a safety and health committee or other forum for frontline workers and other key stakeholders, including the union, local/county/state health departments, community partners, etc., to participate in the development of the COVID-19 exposure control plans?	<input type="radio"/>	<input type="radio"/>	<input type="radio"/>
2. Has the employer developed a written COVID-19 Exposure Control Plan that includes an Incident Command System to manage the execution of the plan?	<input type="radio"/>	<input type="radio"/>	<input type="radio"/>
3. Has the employer identified essential employees and other critical inputs (e.g. materials, contractor services/products and logistics, etc?) required to maintain agency operations?	<input type="radio"/>	<input type="radio"/>	<input type="radio"/>
4. Has the employer conducted a Job Hazard/Safety Analysis for each position?	<input type="radio"/>	<input type="radio"/>	<input type="radio"/>
5. Has the employer put the most effective method(s) for minimizing exposure to SARS CoV-2 in place?	<input type="radio"/>	<input type="radio"/>	<input type="radio"/>
6. Are employees encouraged to speak up, without fear of retaliation, if they have safety and health concerns or if they observe violations of employer policies and procedures?	<input type="radio"/>	<input type="radio"/>	<input type="radio"/>
7. Is there a formal process for employees to file complaints and offer suggestions?	<input type="radio"/>	<input type="radio"/>	<input type="radio"/>
8. Has the employer provided communications and training on the following:			
a. Self-reporting expectations?	<input type="radio"/>	<input type="radio"/>	<input type="radio"/>
b. Safety and health protocols and control measures?	<input type="radio"/>	<input type="radio"/>	<input type="radio"/>
c. Information on the virus and how it is transmitted in advance of work?	<input type="radio"/>	<input type="radio"/>	<input type="radio"/>
d. Is there an educational session planned for explaining the pandemic plan to staff and outlining the roles of those responsible for implementing the plan?	<input type="radio"/>	<input type="radio"/>	<input type="radio"/>
9. What is the communication plan for disseminating information to staff and the community, and does the plan ensure language, culture and reading-level appropriateness?	<input type="radio"/>	<input type="radio"/>	<input type="radio"/>
10. Have platforms been developed (e.g., hotlines, dedicated websites) for communicating pandemic status and actions to employees, vendors, suppliers, and clients inside and outside the work site in a consistent and timely way, including redundancies in the emergency contact system?	<input type="radio"/>	<input type="radio"/>	<input type="radio"/>
11. If so, is there a plan in place to test these platforms for communicating pandemic status and actions to staff and the community?	<input type="radio"/>	<input type="radio"/>	<input type="radio"/>
12. Does the plan incorporate scenarios that address agency functioning based upon having various levels of illness among employees and different types of community containment interventions?	<input type="radio"/>	<input type="radio"/>	<input type="radio"/>

13. Does the plan identify services provided by the agency that will be crucial during a pandemic, services that can be suspended, and services that should continue but in a modified form during a pandemic?	<input checked="" type="radio"/>	<input type="radio"/>	<input type="radio"/>
14. Does the plan have a process to train and prepare ancillary workforce (e.g., contractors, employees in other job descriptions, retirees, etc.) to perform critical services?	<input checked="" type="radio"/>	<input type="radio"/>	<input type="radio"/>
15. Has the agency developed a continuity-of- operations plan for maintaining essential operations, including payroll, and for ongoing communication with employees and the community?	<input checked="" type="radio"/>	<input type="radio"/>	<input type="radio"/>
16. Other? _____	<input type="radio"/>	<input type="radio"/>	<input type="radio"/>

NOTES

Measures to Maintain Social Distancing

YES NO N/A

Does the plan include guidelines to modify the frequency and type of face-to-face contact (e.g., handshaking, seating in meetings, office layout, etc.) among employees and between employees and stakeholders?

1. Has the employer placed signage at each entrance of the facility to inform all employees, customers, and visitors of the that they:

a. Shall not enter the facility if they have a cough or fever?

b. Shall maintain a minimum six-foot distance from one another?

c. Shall practice respiratory etiquette when inside?

2. Is all signage readable, clear, and presented in language(s) consistent with those spoken in the workplace and community?

3. Is signage or barriers in place inside the building to help maintain 6 feet of separation?

4. Has the organization established a maximum occupancy and enforceable procedure to ensure a minimum of 6 feet distance between employees, customers, and visitors?

5. Has the employer modified the workplace and work practices to ensure at least 6 feet of physical distancing?

6. Are markings or barriers in place to establish one-way directional traffic inside facilities to prevent choke points (bottlenecks)?

7. Are there controls in place to prevent congestion in elevators, stairways, restrooms, meeting and training rooms, locker rooms, break rooms, cafeterias, and transport services?

8. Has the employer notified personnel to avoid carpooling?

9. Has the employer provided direction to workers on how to protect themselves when 6 feet of physical distancing is not maintained?

10. Other? _____

NOTES

Engineering Controls

	YES	NO	N/A
1. Has the employer adjusted the heating ventilation and air conditioning (HVAC) system so that it maximizes ventilation (dilution of air – disable demand-controlled ventilation and open outdoor air dampers to 100% as indoor and outdoor conditions permit and keeping systems running longer hours ... 24/7 if possible)?	<input type="radio"/>	<input type="radio"/>	<input type="radio"/>
2. Has the employer investigated improving central air and other HVAC filtration to MERV-13 (ASHRAE 2017b) or the highest level achievable?	<input type="radio"/>	<input type="radio"/>	<input type="radio"/>
3. Had the employer considered adding portable room air cleaners with HEPA or high-MERV filters with due consideration to the clean air delivery rate (AHAM 2015)?	<input type="radio"/>	<input type="radio"/>	<input type="radio"/>
4. Has the employer considered air duct or air-handling unit-mounted, upper room, and/or portable UVGI devices in connection to in-room fans in high-density spaces such as waiting rooms, prisons, and shelters?	<input type="radio"/>	<input type="radio"/>	<input type="radio"/>
5. Does the HVAC system maintain temperature and humidity as applicable to the infectious aerosol of concern?	<input type="radio"/>	<input type="radio"/>	<input type="radio"/>
6. Can the system bypass the energy recovery ventilation systems that leak potentially contaminated exhaust air back into the outdoor air supply?	<input type="radio"/>	<input type="radio"/>	<input type="radio"/>
7. Has the employer maximized the use of technology to minimize face to face interactions?	<input type="radio"/>	<input type="radio"/>	<input type="radio"/>
8. Have select doors been bypassed to decrease touching of push bars and handles, consistent with security and fire safety requirements (e.g., automatic doors or separate entrance and exit)?	<input type="radio"/>	<input type="radio"/>	<input type="radio"/>
9. Has the employer considered eliminating use of time clocks and other devices that cause a gathering of where it is difficult to maintain social distancing of employees?	<input type="radio"/>	<input type="radio"/>	<input type="radio"/>
10. Have employers with residents such as corrections, nursing, and long-term care, and other institutions, developed procedures for early identification and isolation of people who are suspected or known to have COVID-19 in negative air pressure isolation rooms?	<input type="radio"/>	<input type="radio"/>	<input type="radio"/>
a. If negative air pressure isolation rooms are not available, have procedures been established to quickly and safely transport people to healthcare facilities that do have them?	<input type="radio"/>	<input type="radio"/>	<input type="radio"/>
11. Have workers who transport people with suspected or known COVID-19 been trained to do the following:			
a. Open windows for maximum air circulation?	<input type="radio"/>	<input type="radio"/>	<input type="radio"/>

b. Set the vehicle to outside air circulation?	<input type="radio"/>	<input type="radio"/>	<input type="radio"/>
c. Use PPE and respiratory protection	<input type="radio"/>	<input type="radio"/>	<input type="radio"/>
12. Other? _____			

NOTES

Work Practices

YES NO N/A

1. Has the employer ceased all non-essential travel?	<input type="radio"/>	<input type="radio"/>	<input type="radio"/>
2. Has the employer put a process in place to vet the necessity of travel if it is required?	<input type="radio"/>	<input type="radio"/>	<input type="radio"/>
3. Has the employer established a policy enabling employees perform their jobs remotely (i.e., telework) or by flexible work hours (e.g. staggered shifts)?	<input type="radio"/>	<input type="radio"/>	<input type="radio"/>
4. Has the employer implemented zero or minimal customer contact procedures, such as online or telephone ordering and curbside pickup?	<input type="radio"/>	<input type="radio"/>	<input type="radio"/>
5. Have work shifts and break times been staggered to reduce choke points (bottleneck) and congestion?	<input type="radio"/>	<input type="radio"/>	<input type="radio"/>
6. Have conference rooms and break area furnishings (tables, chairs, desks) been adjusted to maintain physical distancing?	<input type="radio"/>	<input type="radio"/>	<input type="radio"/>
7. Have self-service tasks previously performed by customers been discontinued, such as allowing customers to handle lids for cups, food-bars (buffet), and self-checkout?	<input type="radio"/>	<input type="radio"/>	<input type="radio"/>
8. Have contactless payment systems been established, or, if not feasible, procedures established for sanitizing payment equipment between each use?	<input type="radio"/>	<input type="radio"/>	<input type="radio"/>
9. Has the employer suspended allowing customers to bring their own bags, mugs, or other reusable items?	<input type="radio"/>	<input type="radio"/>	<input type="radio"/>
10. Has the employer erected physical barriers such as plexiglass or windows, or employed other means to separate customers and employees?	<input type="radio"/>	<input type="radio"/>	<input type="radio"/>
11. Has the employer banned the sharing of headsets and other objects that are used near the eyes, nose, and mouth?	<input type="radio"/>	<input type="radio"/>	<input type="radio"/>
12. Are customers and employees required to wear face covering to reduce spread of the SARS-CoV-2 virus?	<input type="radio"/>	<input type="radio"/>	<input type="radio"/>
13. Has the agency implemented an exercise/drill to test the pandemic plan and to discover gaps in its implementation so the plan can be regularly improved?	<input type="radio"/>	<input type="radio"/>	<input type="radio"/>
14. Has the agency developed a recovery plan to deal with consequences of the pandemic (e.g., loss of staff, financial and operational disruption, etc.)?	<input type="radio"/>	<input type="radio"/>	<input type="radio"/>
15. Other? _____	<input type="radio"/>	<input type="radio"/>	<input type="radio"/>

NOTES

Enhanced Cleaning and Disinfection

	YES	NO	N/A
1. Are handwashing facilities available to all employees with soap and running water?	<input type="radio"/>	<input type="radio"/>	<input type="radio"/>
2. Are alcohol-based hand sanitizers available to all employees, at entrances and exits, and field locations and regularly maintained?	<input type="radio"/>	<input type="radio"/>	<input type="radio"/>
3. Has the organization developed a cleaning and disinfection schedule that includes the following:			
a. A routine enhanced cleaning/disinfection schedule.	<input type="radio"/>	<input type="radio"/>	<input type="radio"/>
b. Employees trained and assigned to perform cleaning/disinfection tasks, including information on product contact time.	<input type="radio"/>	<input type="radio"/>	<input type="radio"/>
c. Use of PPE and safe work practices to prevent chemical exposures.	<input type="radio"/>	<input type="radio"/>	<input type="radio"/>
d. Availability of cleaning supplies and EPA-registered disinfectants effective against the SARS CoV-2 virus.	<input type="radio"/>	<input type="radio"/>	<input type="radio"/>
e. Consideration of less toxic disinfectants that minimize health risks (e.g., green cleaning alternatives).	<input type="radio"/>	<input type="radio"/>	<input type="radio"/>
f. Identified “high touch” surfaces such as tables, chairs, doorknobs, light switches, handles, desks, toilets for frequent surface cleaning and disinfection.	<input type="radio"/>	<input type="radio"/>	<input type="radio"/>
g. Identified shared equipment such as phones, pens, keyboards, touch screens, and remote controls and processes for cleaning and disinfection.	<input type="radio"/>	<input type="radio"/>	<input type="radio"/>
h. Enhanced cleaning and disinfection procedures when there is a suspected or known exposure to a person with COVID-19.	<input type="radio"/>	<input type="radio"/>	<input type="radio"/>
i. Disinfectants available for customers/visitors near items they touch, such as pre-moistened wipes.	<input type="radio"/>	<input type="radio"/>	<input type="radio"/>
j. Employee(s) assigned to regularly disinfect items touched by customers.	<input type="radio"/>	<input type="radio"/>	<input type="radio"/>
4. Has the agency secured sufficient and accessible infection-prevention supplies, such as soap, alcohol-based/waterless hand hygiene products containing at least 60 percent alcohol, tissues and receptacles for their disposal?	<input type="radio"/>	<input type="radio"/>	<input type="radio"/>
5. Other? _____			

NOTES

Personal Protective Equipment (PPE) and Respiratory Protection

	YES	NO	N/A
1. Has the employer conducted a hazard assessment to determine the type of PPE that should be used, and for which job tasks?	<input type="radio"/>	<input type="radio"/>	<input type="radio"/>
2. Does the employer have a sufficient inventory of PPE, provided at no cost to employees, such as gloves, eye protection, protective clothing, and respirators?	<input type="radio"/>	<input type="radio"/>	<input type="radio"/>
3. Has the employer conducted a respiratory hazard assessment to determine the nature of and magnitude of respiratory hazards in the workplace?	<input type="radio"/>	<input type="radio"/>	<input type="radio"/>
4. Has the employer developed a written respiratory protection program that complies with OSHA requirements, including medical clearance, respirator selection, and fit testing?	<input type="radio"/>	<input type="radio"/>	<input type="radio"/>
5. Has the employer trained workers on the proper use, donning, doffing, disposal and/or decontamination of PPE and respirators?	<input type="radio"/>	<input type="radio"/>	<input type="radio"/>
6. Does the employer have a process for changing/laundrying work uniforms?	<input type="radio"/>	<input type="radio"/>	<input type="radio"/>
7. Has the employer secured a 3 month supply of PPE in reserve, in the event of resurgence or another medical emergency?	<input type="radio"/>	<input type="radio"/>	<input type="radio"/>
8. Other? _____			

NOTES

Sick Leave, Symptom Screening, and Employee Health

	YES	NO	N/A
1. Are there systems, policies, or procedures in place for early identification and isolation of suspected or confirmed COVID-19 cases? This might include the identification of areas in the facility that can be used as an isolation area and infirmary.	<input type="radio"/>	<input type="radio"/>	<input type="radio"/>
2. Has the organization clearly communicated that employees are not to come to work if sick?	<input type="radio"/>	<input type="radio"/>	<input type="radio"/>
3. Have all employees been notified to report if they have symptoms of COVID-19 including fever, coughing, shortness of breath, loss of smell, taste or gastrointestinal symptoms (diarrhea and nausea)?	<input type="radio"/>	<input type="radio"/>	<input type="radio"/>
4. Has the employer directed that infected/sick employees should home isolate for 14 days and not return to work until they are symptom free and have had a normal temperature for 3 consecutive days without the use of fever-reducing medication?	<input type="radio"/>	<input type="radio"/>	<input type="radio"/>
5. Does the employer have a process in place to assess employees that have an ill person in their household?	<input type="radio"/>	<input type="radio"/>	<input type="radio"/>
6. Are all employees screened for symptoms before entering the workplace?	<input type="radio"/>	<input type="radio"/>	<input type="radio"/>
7. Has the organization established a paid sick leave policy for all employees as recommended by CDC?	<input type="radio"/>	<input type="radio"/>	<input type="radio"/>
8. Does the sick leave policy allow employees to stay away from work to provide care to family members?	<input type="radio"/>	<input type="radio"/>	<input type="radio"/>
9. Has the employer established a policy to protect high-risk employees, including those over 65 years old and with pre-existing/underlying chronic medical conditions?	<input type="radio"/>	<input type="radio"/>	<input type="radio"/>
10. Has the agency worked with the local or state health department to discuss an operational plan for surge capacity for healthcare and other mental health and social services to meet the needs of staff during and after a pandemic?	<input type="radio"/>	<input type="radio"/>	<input type="radio"/>
11. Other? _____			

NOTES

Exposures and Case Reporting

	YES	NO	N/A
1. Has the employer established a procedure for employees to report exposures occurring at work or in the community?	<input type="radio"/>	<input type="radio"/>	<input type="radio"/>
2. Does the exposure procedure include home isolation for 14 days?	<input type="radio"/>	<input type="radio"/>	<input type="radio"/>
3. Does the exposure procedure include cleaning and disinfection of potentially contaminated areas?	<input type="radio"/>	<input type="radio"/>	<input type="radio"/>
4. Has the organization developed a return-to-work policy for employees that have tested positive and/or recovered from COVID-19 like illness?	<input type="radio"/>	<input type="radio"/>	<input type="radio"/>
5. Has the employer suspended the requirement for employees who are in home isolation to provide medical documentation to return to work, as recommended by CDC? Note: This is so that people in home isolation that do not have symptoms or who have low level symptoms DO NOT go to the emergency room or their primary provider.	<input type="radio"/>	<input type="radio"/>	<input type="radio"/>
6. Has the employer developed a process for contact tracing when an employee tests positive or becomes symptomatic with COVID-19?	<input type="radio"/>	<input type="radio"/>	<input type="radio"/>
7. Has the employer established a relationship with the local, county, and state health department to coordinate case reporting and contact tracing?	<input type="radio"/>	<input type="radio"/>	<input type="radio"/>
8. Has the employer developed a process for informing employees when they have been exposed to a person suspected or confirmed to have COVID-19?	<input type="radio"/>	<input type="radio"/>	<input type="radio"/>
9. Other? _____			

NOTES

Measures to Protect Employee Mental Health and Physical Well-Being

	YES	NO	N/A
1. Has the employer developed a program to address the psychological well-being of employees?	<input type="radio"/>	<input type="radio"/>	<input type="radio"/>
2. Does the employer provide access to an employee assistance program?	<input type="radio"/>	<input type="radio"/>	<input type="radio"/>
3. Does the employer provide adequate mental health benefits?	<input type="radio"/>	<input type="radio"/>	<input type="radio"/>
4. Does the employer have a process where employees can confidentiality report when they are experiencing job and life stress without fear of retaliation?	<input type="radio"/>	<input type="radio"/>	<input type="radio"/>
5. Are there work factors that contribute to employee stress and fatigue that should be addressed?	<input type="radio"/>	<input type="radio"/>	<input type="radio"/>
6. Does the organization help employees to maintain their psychological and physical health?	<input type="radio"/>	<input type="radio"/>	<input type="radio"/>
7. Other? _____			

NOTES