

If someone feels sick, or uncomfortable, or unsafe they should be encouraged to **stay home**. These Response Protocols are to be viewed as recommended best practices and are provided solely as suggested guidelines and resources for contractors' reference concerning COVID-19. These Protocols are intended to help prevent the spread or transmission of COVID-19. All contractors must continue to comply with all relevant rules and regulations concerning workplace safety and health. This is not legal advice.

Contractors should regularly evaluate their health and safety procedures, as well as the specific hazards at their job sites, consistent with the [Centers for Disease Control and Prevention \(CDC\) recommendations](#) and state laws or executive orders, to determine the appropriate job hazard analysis and safety procedures for the project/task as it relates to the spread and/or transmission of COVID-19. All contractors should incorporate COVID-19 prevention into all job hazard analyses (JHAs) and pre-task safety planning for all aspects of the work. In addition, all projects should require **social distancing, hand washing on a regular basis, no large group meetings where social distancing cannot be maintained, and should include the wearing of cloth face coverings or respirators depending on owner/employer/local jurisdictions.**

These Protocols will be updated as we learn more about how to prevent and treat COVID-19.

SECTION 1: Steps to Take When Responding to COVID-19

If you have a suspected or confirmed case of COVID-19, the additional steps that you may want to consider include these:

1. **Remove the infected, or potentially infected, employee from the workplace, jobsite, floor or area:** Before the employee departs, ensure you have a full list of potentially affected employees who may need to be notified of exposure (i.e., individuals who worked in close contact defined as less than 6 feet for more than 10 minutes without facial coverings). For suspected cases, take the same precautions and treat the situation as if the suspected case is a confirmed case for purposes of sending home potentially infected employees. [\(See Attachment 1: COVID-19 Close Contact List\).](#)
2. **Ensure a medical evaluation is completed:** Advise the employee to contact a medical care provider to discuss the symptoms that they are experiencing and follow any orders given. Telemedicine is recommended as an alternative to in-person medical visits.
3. **Investigate:** Just as you would investigate a workplace injury (i.e., slip and fall), investigate suspected or confirmed cases of COVID-19, and document your investigation. (Investigating may assist with the determination of work-relatedness of the confirmed case or exposure.)
 - a. COVID-19 should be a recordable illness if a worker is infected as a result of an event or exposure in the work environment. However, employers are only responsible for recording cases of COVID-19 if all of the following are met:
 - i. The case is a confirmed case of COVID-19 (see [CDC information](#) on persons under investigation and presumptive positive and laboratory-confirmed cases of COVID-19);
 - ii. The case is work-related, as defined by [29 CFR 1904.5](#); and
 - iii. The case involves one or more of the general recording criteria set forth in [29 CFR 1904.7](#) (e.g., medical treatment beyond first-aid, days away from work).

- iv. On April 10th, 2020 OSHA provided [additional guidance](#) on recordkeeping requirements.
4. **Identify corrective actions:** These items will include what additional measures could be put into place to prevent further spreading of the virus on the jobsite or in the workplace as well as future occurrences. Such measures may include the cleaning and sanitizing of the work area(s) and/or tools (hand and power) and equipment as well as reinforcing the guidelines for prevention outlined by CDC with others in the workplace and on the jobsite.
5. **Establish a procedure to communicate:** Communicate with both affected and non-affected employees on the status of the suspected or confirmed COVID-19 case, but do not communicate the name of affected individuals or specific medical diagnoses. Where there is a confirmed case of COVID-19, notify affected employees and encourage them to seek medical attention. If a suspected case tests negative, notify affected employees and encourage them to return to work.
 - a. Affected employees are someone who has been in close contact, less than 6 feet for more than 10 minutes without a facial covering.
 - b. [\(Attachment 2 - Confirmed COVID-19 Case Memo\)](#) – this memo template can be used to notify employees and project teams of a confirmed or suspected case of COVID-19.
 - c. [\(Attachment 3 – Consent and Authorization Waiver\)](#) – this waiver template can be used if a confirmed or suspected employee wishes to release their medical information.

SECTION 2: Handling a Diagnosed, Confirmed or Suspected Case of COVID-19

The intent of this list is to provide response guidance when an employee(s) is diagnosed, confirmed or suspected to have a case of COVID-19. Suspected means the employee is exhibiting COVID-19 symptoms upon arrival to or while at work, an employee has been exposed to someone with a confirmed case of COVID-19, or a member of the employee’s household has been told to quarantine/isolate because they were potentially exposed to COVID-19.

If the employee(s) has been diagnosed or tested positive (i.e., confirmed case), then:

1. The employee(s) will be directed to self-quarantine away from work. Employees that test positive and are symptom free may return to work when at least 10 days have passed since the onset of signs and symptoms of COVID-19 and he or she has not had a subsequent illness.
2. Employees who are diagnosed or test positive, while away from work, should self-isolate until each of the following conditions are met:
 - a. Anyone asked to leave should **NOT** return to work until:
 - i. at least 10 days have passed since symptoms first appeared, AND,
 - ii. at least 3 days (72 hours) have passed since recovery defined as resolution of fever without the use of fever-reducing medications, AND,
 - iii. other symptoms have improved (for example, when your cough or shortness of breath have improved).
 - b. Please see [CDC’s Interim Guidance Pertaining to Critical Infrastructure Workers](#).
 - c. An individual contractor may require, in order to return to work after experiencing any of these symptoms or being sent away for not passing pre-site screening, that personnel to produce a doctor’s note or a negative COVID-19 test results. For non-COVID-19 related illness, workers may return to work sooner upon guidance of healthcare provider, and may be required to produce a doctor’s note.

3. Ask the employee for names of those that may have had close contact, less than 6 feet for more than 10 minutes without facial covering, focusing on the last 48 hours from symptoms and signs onset. ([Attachment 3 - COVID-19 Close Contact Check List](#)).
4. Interview Supervisor and close contact co-workers.
5. Determine if any other employee had close contact with the affected employee and should consider quarantine. Anyone in close contact, less than 6 feet for more than 10 minutes without a facial covering, should be considered to self-quarantine.
6. Accompany applicable employees off-site while practicing social distancing.
7. Quarantine the immediate work area of suspected employee(s) until it is cleaned and disinfected. Clean and disinfect the work area if necessary. Reference Section 3 below.
8. Employers should communicate appropriately with the workforce.

If the employee is a suspected case, then:

1. Suspected means the employee is exhibiting COVID-19 symptoms upon arrival to or while at work.
2. If an employee exhibits COVID-19 symptoms, the employee should be sent home. He or she must remain at home until:
 - a. at least 10 days have passed since symptoms first appeared, **AND**,
 - b. at least 3 days (72 hours) have passed since recovery defined as resolution of fever without the use of fever-reducing medications, **AND**,
 - c. other symptoms have improved (for example, when your cough or shortness of breath have improved).
3. If necessary, quarantine the immediate work area of suspected employee(s). Clean and disinfect, if necessary. Reference Section 3 below.
4. If a suspected case is confirmed to be positive, the employee should follow guidelines for self-isolation and return to work when directed to do so by their health care provider. ([Attachment 4 – PA DOH COVID-19 Patient Instructions for Self-Isolation](#)) – See guidance from PA Department of Health on self-isolation.
5. An individual contractor may require, in order to return to work after experiencing symptoms of COVID-19, that personnel produce a doctor’s note or a negative COVID-19 test result.
6. For non-COVID-19 related illness, workers may return to work sooner upon guidance of healthcare provider and should produce a doctor’s note.
7. Employers should communicate appropriately with the workforce.

If the employee has been in close contact with a diagnosed, or confirmed, then:

1. Close contact is defined as being within 6 feet for at least 10 minutes without facial coverings.
2. The employee should self-quarantine until:
 - a. 14 days from the last time of their last contact with the diagnosed/confirmed case. Refer to [CDC Public Health Recommendations for Community-Related Exposure](#).
 - b. A negative COVID-19 test is not currently a definitive indication of non-infection.
3. Employee should self-monitor for symptoms of COVID-19. If the employee develops symptoms within quarantine period, they should contact their healthcare provider for further guidance.

Notes:

1. Diagnosed, confirmed or suspected cases should be reported to the employer.
2. Treat employee information as confidential (i.e., limit communication to those that need to know, do not identify name of the employee to the general workforce, etc.).
3. **Self-isolation** is done for someone who has tested positive for COVID-19 and should be completely separated from other household members.

4. **Self-quarantine** is done for someone who has had close contact with a positive COVID-19 case. Close contact is defined as less than 6 feet for more than 10 minutes without facial covering. Self-quarantine entails staying at home and not interacting with others outside the home.
5. [***\(Attachment 3 – Consent and Authorization Waiver\)***](#) – this waiver template can be used if a confirmed or suspected employee wishes to release their medical information.
6. Note that recommendations for discontinuing isolation in persons known to be infected with COVID-19 could, in some circumstances, appear to conflict with recommendations on when to discontinue quarantine for persons known to have been *exposed* to COVID-19. CDC recommends 14 days of quarantine after exposure based on the time it takes to develop the illness if infected. Thus, it is possible that a person *known* to be infected could leave isolation earlier than a person who is quarantined because of the *possibility* they are infected.

SECTION 3: Cleaning and Disinfection

This guidance provides recommendations on the cleaning and disinfection of construction sites where [persons under investigation \(PUI\)](#) or those with diagnosed, or confirmed COVID-19 who have worked on a construction site or office/trailer. If there is a need to clean and disinfect jobsite area, follow these guidelines:

- 1) **Close off the area(s)** used by the sick worker.
- 2) **Open outside doors and windows** to increase air circulation in the area. If immediate cleaning is necessary, take the proper precautions.
- 3) Clean and disinfect **all areas used by the person who is sick**, such as offices, bathrooms, common areas, shared electronic equipment like tablets, touch screens, keyboards, and remote controls.
 - a. **Cleaning** refers to the removal of germs, dirt, and impurities from surfaces. It does not kill germs, but by removing them, it lowers their numbers and the risk of spreading infection.
 - b. **Disinfecting** refers to using chemicals, for example, EPA-registered disinfectants, to kill germs on surfaces. This process does not necessarily clean dirty surfaces or remove germs, but by killing germs on a surface after cleaning, it can further lower the risk of spreading infection.
- 4) **If more than 7 days** since the person who is sick has visited or used the facility, additional cleaning and disinfection is not necessary. Continue routine cleaning and disinfection. CDC believes there is no evidence the virus is viable on surfaces after more than 72 hours.
- 5) **How to clean and disinfect:**
 - a. **Hard (Non-porous) Surfaces** - Wear disposable gloves when cleaning and disinfecting surfaces. Gloves should be discarded after each cleaning. If reusable gloves are used, those gloves should be dedicated for cleaning and disinfection of surfaces for COVID-19 and should not be used for other purposes. Consult the manufacturer's instructions for cleaning and disinfection products used. [Clean hands](#) immediately after gloves are removed.
 - i. If surfaces are dirty, they should be cleaned using a detergent or soap and water prior to disinfection.
 - ii. For disinfection, most common EPA-registered household disinfectants should be effective.
 - iii. A list of products that are EPA-approved for use against the virus that causes COVID-19 is available at [EPA-registered disinfectants](#). Follow manufacturer's instructions for all

cleaning and disinfection products for (concentration, application method, and contact time, etc.).

- iv. Additionally, diluted household bleach solutions (at least 1000ppm sodium hypochlorite) can be used if appropriate for the surface. Follow manufacturer's instructions for application, ensuring a contact time of at least 1 minute (i.e. for bleach solutions), and allowing proper ventilation during and after application. Check to ensure the product is not past its expiration date. Never mix household bleach with ammonia or any other cleanser. Unexpired household bleach will be effective against coronaviruses when properly diluted. Once bleach is diluted with water, it is effective for only 4 hours. After that time a fresh bleach solution should then be prepared.
- v. Prepare a bleach solution by mixing:
 1. 5 tablespoons (1/3rd cup) bleach per gallon of water or
 2. 4 teaspoons bleach per quart of water
- b. **Soft (Porous) Surfaces** - Soft surfaces such as rugs, chairs, and office partitions shall be cleaned by a misting or steam generator with [EPA-registered disinfectants](#) that are suitable for porous surfaces. After the product is applied, this product must have no harmful residue.

General Recommendations for Routine Cleaning and Disinfection of Construction Site – Office/Trailer/Interior Work

- 1) Construction sites can practice routine cleaning of frequently touched surfaces (for example: tables, doorknobs, light switches, handles, desks, plan tables, toilets, faucets, sinks, and electronics (see below for special electronics cleaning and disinfection instructions)) with household cleaners and [EPA-registered disinfectants](#) that are appropriate for the surface, following label instructions. Labels contain instructions for safe and effective use of the cleaning product including precautions you should take when applying the product, such as wearing gloves and making sure you have good ventilation during use of the product.
- 2) For electronics follow the manufacturer's instructions for all cleaning and disinfection products. Consider use of wipeable covers for electronics. If no manufacturer guidance is available, consider the use of alcohol-based wipes or spray containing at least 70% alcohol to disinfect touch screens. Dry surfaces thoroughly to avoid pooling of liquids.

General Recommendations for Routine Cleaning and Disinfection of Construction Site – Exterior Work

- 1) Typical Construction items that may need to be cleaned and disinfected:
 - a. Power, hand tools, and equipment
 - b. Any machinery that an operator would be operating from
 - c. Ladders, gang ladders, and stair towers
 - d. Gang boxes
 - e. Port-a-Johns
 - f. Stair railings
 - g. Any frequently touched items such as door handles, printers, water coolers, coffee pots, panic hardware on exit door, etc.
 - h. Site fencing, locks and chains

SECTION 4: Additional Protective Measures


In an effort to protect others, additional protective measures may be put in place. These include:

- 1) CDC recommends wearing cloth face coverings in public settings where other social distancing measures are difficult to maintain, especially in areas of significant community-based transmission.
 - a. Coverings are used as a barrier against droplets, not as a filter for the air.
- 2) Gloves are recognized as a means of possibly preventing contact spread of COVID-19. The type of glove worn should be appropriate to the task. If gloves are not typically required for the task, then any type of glove is acceptable.
- 3) Eye protection can help protect from potential ocular contamination.

Refer to Section 5 of Recommended Job Site Protocols: Personal Protection Equipment (PPE) for additional guidance.

SECTION 5: Confidentiality/Privacy

Except for circumstances in which an employer is legally required to report workplace occurrences of communicable disease, the confidentiality of all medical conditions will be maintained in accordance with applicable law and to the extent practical under the circumstances. When it is required, the affected persons who will be informed that an unnamed employee has tested positive will be kept to the minimum needed to comply with reporting requirements and to limit the potential for transmission to others. An employer reserves the right to inform other employees, subcontractors, vendors, suppliers or visitors that an unnamed co-worker has been diagnosed, confirmed or suspected of having COVID-19 if the other employees might have been exposed to the virus so the employees may take measures to protect their own health. [\(Attachment 3 – Consent and Authorization Waiver\)](#) – this waiver template can be used if a confirmed or suspected employee wishes to release their medical information.



On behalf of General Building Contractors Association



On behalf of Eastern Atlantic States Regional Council of Carpenters

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 - b. Please see [CDC’s Interim Guidance Pertaining to Critical Infrastructure Workers](#).
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 - e. Port-a-Johns
 - f. Stair railings
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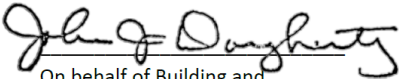
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Refer to Section 5 of Recommended Job Site Protocols: Personal Protection Equipment (PPE) for additional guidance.

SECTION 5: Confidentiality/Privacy

Except for circumstances in which an employer is legally required to report workplace occurrences of communicable disease, the confidentiality of all medical conditions will be maintained in accordance with applicable law and to the extent practical under the circumstances. When it is required, the affected persons who will be informed that an unnamed employee has tested positive will be kept to the minimum needed to comply with reporting requirements and to limit the potential for transmission to others. An employer reserves the right to inform other employees, subcontractors, vendors, suppliers or visitors that an unnamed co-worker has been diagnosed, confirmed or suspected of having COVID-19 if the other employees might have been exposed to the virus so the employees may take measures to protect their own health. [Attachment 3 – Consent and Authorization Waiver](#) – this waiver template can be used if a confirmed or suspected employee wishes to release their medical information.


On behalf of General Building
Contractors Association


On behalf of Building and
Construction Trades Council of
Philadelphia, Pennsylvania &
the Vicinity