

These Job Site 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 not to be relied upon to prevent the spread or transmission of COVID-19 on any specific job site or to prevent a safety violation from being issued by a jurisdictional authority. 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](#) 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 transmission and 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, cloth facial coverings, hand washing on a regular basis, and no large group meetings.**

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

SECTION 1: Worker Personal Responsibilities

1. Employees need to take steps to protect themselves. Refer to CDC guidelines on [How to Protect Yourself](#).
2. If you are sick, do **NOT** report to work. It is critical that individuals **NOT** report to work while they are experiencing illness symptoms such as fever of 100.4 or higher (or local jurisdiction), cough, shortness of breath or difficulty breathing, dry cough, body aches, chills, or fatigue, or loss of sense of smell and/or taste. Refer to CDC guidelines on [What To Do If You Are Sick](#).
 - a. Workers should **NOT** return to work until:
 - i. **If you have not had a test** to determine if you are still contagious, you can leave home after these three things have happened:
 1. at least 10 days have passed since symptoms first appeared, **AND**,
 2. at least 3 days (72 hours) have passed since recovery defined as resolution of fever without the use of fever-reducing medications, **AND**,
 3. other symptoms have improved (for example, when your cough or shortness of breath have improved).
 - ii. **If you have had a test** to determine if you are still contagious, you can leave home after these three things have happened:
 1. You received two negative tests in a row, at least 24 hours apart, **AND**,
 2. You no longer have a fever (without the use of medicine that reduces fevers), **AND**,
 3. other symptoms have improved (for example, when your cough or shortness of breath have improved).

3. Individuals should seek medical attention if they develop these symptoms. Refer to CDC guidelines on [What To Do If You Are Sick](#).
4. An individual contractor may require, in order to return to work after experiencing any of these symptoms, personnel must produce a doctor's note or negative COVID-19 test results. For non-COVID-19 related illness, workers should follow guidance of healthcare provider and may be required to produce a doctor's note.
5. If you feel sick, uncomfortable, or unsafe, please stay home.

SECTION 2: Social Distancing

1. Limit physical contact with others. Direct employees to increase personal space (to at least 6 feet, where possible).
2. Limit in-person meetings and replace them with phone or online meetings.
3. Take breaks and lunch in shifts to reduce the size of the group in the lunch area at any one time to less than 10 people, ultimately maintaining 6 feet distance between individuals.
4. Subcontractor foremen and project managers should communicate with their general contractors about prohibiting large gatherings (currently no more than 10 people) on the job site, such as the all-hands meeting and all-hands lunches.
5. To limit the number of people on a jobsite, allow non-essential personnel to work from home when possible.
6. Avoid trade stacking, evaluate work schedule and consider things like shift work, resequencing work, etc.
7. Discourage hand-shaking and other contact greetings.
8. Social distancing should be used in hoists/elevators. Social distancing signage should be placed in all areas, hoists, elevators, stairs, and meetings areas. Individuals should be **encouraged to avoid hoists/elevators when walking up or down 5 flights of stairs** to limit contact with others. Conduct an evaluation of the size of the hoist/elevator to maintain 6 feet when possible. Separate material and people when possible.
9. Other considerations may be put into place at the contractor's discretion.

SECTION 3: General Jobsite / Office Practices

1. Employers should reference the CDC's [Interim Guidance for Businesses and Employers](#). Employers should check CDC recommendations frequently and update JHAs and safety plans accordingly. For work in the state of Pennsylvania refer to [Governor Tom Wolf's Construction Industry Guidance from April 23, 2020](#). For work in the City of Philadelphia refer to Mayor [Jim Kenney's Construction Activity Executive Orders](#).
2. A single point of contact/Pandemic Safety Officer should be identified by the General Contractor/Construction Manager for the implementation of all COVID-19 guidance. This individual will be responsible for implementation of all Building Trades Council/GBCA/Eastern Atlantic States Regional Council of Carpenters COVID-19 Recommended Job Site Protocols.
3. If an employee is well but someone in their immediate household is diagnosed with COVID-19, they should notify their supervisor. Refer to CDC guidance for [How To Conduct a Risk Assessment](#).
4. If an employee is confirmed, diagnosed, or suspected to have COVID-19, inform supervisor, refer to **Recommended Response Protocols**.
5. Attendance at meetings should be taken verbally and the foreman/superintendent can sign

in each attendee. Contractors should not pass around a sign-in sheet or mobile device (iPad, tablet, or mobile phone) to confirm attendance.

- a. iPad and mobile device use should be limited to a single user.
6. Communicate key CDC recommendations (and post signage where appropriate) to your staff and tradespeople:
 - a. [How to Protect Yourself](#)
 - b. [If You are Sick](#)
 - c. [COVID-19 Frequently Asked Questions](#)
 - d. Place posters that encourage [staying home when sick](#), [cough and sneeze etiquette](#), and [hand hygiene](#) at the entrance to your workplace and in other workplace areas where they are likely to be seen.
7. Workers will be required to answer questions related to COVID-19 related health conditions. Additionally, personnel may be temperature scanned daily prior to accessing a project by a trained and qualified individual in the safe use and interpretation of thermometers. Temperature scanning may continue for the foreseeable future.
8. Employers should consider designating a trained and qualified individual to take employees' temperatures with a digital, non-contact, medical grade thermometer, or equivalent. If a contact thermometer is needed, it must be properly disinfected between uses.
 - a. Training for this individual should include following the manufacturer's instructions for the thermometer. Note that some people with COVID-19 may not have a fever, so this should not be the only means of detection.
 - b. [GBCA has provided a JSA template for Pre-Site Screening and Temperature Taking](#).
9. Pre-Site Screening Recommendations
 - a. **Screening Question Process** - Greet the person and state: "As a precaution and in an effort to help prevent the spread of COVID-19 we are conducting a pre-site screening." Screener should ask the following questions to all employees prior to entering the jobsite. If they answer "yes" to any, they should be directed to the site point of contact/Pandemic Safety Officer for guidance. It is at an individual contractor's discretion to ask additional screening questions.
 - i. Have you been in close contact (less than six feet for more than 10 minutes without facial coverings) with a person that has shown signs/symptoms, or been diagnosed with COVID-19 within the past 14 days?
 - ii. Have you or anyone in your household been instructed to quarantine or self-isolate due to COVID-19 within the past 14 days?
 - iii. Are you having trouble breathing or have you had flu-like symptoms within the past 72 hours, including: fever, dry cough, shortness of breath, sore throat, body aches, chills, loss of taste or smell, or fatigue? [*Review Current CDC Symptoms](#).
 - b. **Temperature Scanning** – If required by site and if "no" to all questions: Step in and extend arm to get reading, then step away to show the results. If over 100.4, they cannot enter the site. Refer to them to your site point of contact/Pandemic Safety Officer. Temperature scanner should follow host/owner rules. Follow thermometer instructions and recognize precision of reading range.
 - c. **A person's temperature is considered to be private health information – do NOT record the temperature in association with the person's name.** Do not share the

temperature unless given permission by that employee. If host requires temperature records, it should be done anonymously, or the employer must handle the information as CONFIDENTIAL as per [EEOC rules relating to coronavirus.](#)

- d. 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).
 - e. 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 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.
10. Do not congregate in lunch areas and wipe all common areas with appropriate disinfectant.
11. Do not share tools. When sharing is necessary, wipe down with proper disinfectant first.

SECTION 4: Sanitation and Cleanliness

1. Promote **frequent and thorough hand washing with soap and running water** for at least **20 seconds**. Hand washing stations are recommended to help prevent the spread of COVID-19. Employers should also provide hand sanitizer when hand washing facilities are not available. Refer to CDC guideline for [When and How to Wash Your Hands](#). Hand washing stations or hand sanitizer should be provided at all access points, hoists, elevators, restrooms, etc.
 - a. All workers should wash hands often, especially before eating, smoking, or drinking, and after blowing your nose, coughing, or sneezing. Workers should refrain from touching their face.
 - b. All sites should have hand washing stations readily available to all workers on site. If you have a large site, get a hand washing station from your portable job site toilet provider.
 - c. Providing hand sanitizer is acceptable in the interim between availability of hand washing facilities.
2. Disinfect frequently touched surfaces within the workplace multiple times each day. Refer to CDC guideline for [Clean & Disinfect](#).
 - a. **Disinfectant wipes** should be available and used to wipe down any surfaces (doorknobs, keyboards, remote controls, desks) that are commonly touched periodically each day.
 - b. **Portable job site toilets** should be properly cleaned by leasing company at least twice per week, when possible. Double check that hand sanitizer dispensers are filled. Frequently touched items (i.e., door pulls and toilet seats) should be cleaned frequently.
 - c. Job site offices/trailers and break/lunchrooms frequently touched surfaces should be cleaned at least twice per day.
 - d. Employees performing cleaning will be issued proper PPE, such as nitrile gloves and eye or face protection as needed.
 - e. Maintain Safety Data Sheets (SDS) of all disinfectants on site.
 - f. Follow the CDC guidelines on use and types of disinfectants.
3. Employers should **encourage employees to cover their noses and mouths** with a tissue (or elbow

or shoulder if a tissue is not available) when coughing or sneezing. Wash your hands after each time you cough, sneeze, or blow your nose, and any time before touching your face or food. Refer to CDC guideline for [Coughing & Sneezing](#).

4. Do not use a common water cooler. Provide individual water bottles or instruct workers to bring their own.
5. Instruct workers to consider changing potentially contaminated work clothes prior to arriving home; and to wash clothes in hot water with soap.
6. Utilize disposable hand towels and no-touch trash receptacles.
7. Avoid cleaning techniques, such as using pressurized air or water sprays that may result in the generation of bioaerosols.

SECTION 5: Personal Protective Equipment (PPE)

1. **Gloves:** Gloves are recognized as a means of possibly preventing contact spread. 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.
2. **Eye protection:** Eye protection may be a means of preventing exposure and should be worn at all times.
3. **The CDC recommends wearing cloth face coverings in public settings where social distancing measures are difficult to maintain.** Contractors should continue to provide and direct employees to wear face masks if required by the work. For tasks performed within 6 feet of another person, should consider additional respiratory protection. Please consult a professional for respiratory protection guidance. Perform a job hazard analysis.
4. Do not share personal protection equipment (PPE).
5. Sanitize reusable PPE per manufacturer's recommendation prior to each use.
6. If tasks require workers be within 6 feet, additional PPE is advised.
 - o Examples include:
 1. any kind of face covering and a face shield, **OR**
 2. a KN95 (or greater) and eye protection

Note:

1. **Cloth face covering:** Textile (cloth) covers are intended to keep the person wearing one from spreading respiratory secretions when talking, sneezing, or coughing. They are not PPE and it is uncertain whether cloth face coverings protect the wearer. CDC has guidance available on design, use, and maintenance of cloth face coverings.
2. **Facemask:** Facemasks are PPE and are often referred to as surgical masks or procedure masks. Use facemasks according to product labeling and local, state, and federal requirements. FDA-cleared surgical masks are designed to protect against splashes and sprays and are prioritized for use when such exposures are anticipated, including surgical procedures. Facemasks that are not regulated by FDA, such as some procedure masks, which are typically used for isolation purposes, may not provide protection against splashes and sprays.
3. **Respirator:** A respirator is a personal protective device that is worn on the face, covers at least the nose and mouth, and is used to reduce the wearer's risk of inhaling hazardous airborne particles (including dust particles and infectious agents), gases, or vapors. Respirators are certified by the CDC/NIOSH, including those intended for use in healthcare.

SECTION 6: Job Site Visitors

1. Restrict the number of visitors to the job site, including the trailer or office.
2. All visitors, deliveries and delivery personnel are subject to the same criteria and guidelines as regular onsite personnel to access the jobsite: including social distancing, cloth face coverings, hand washing, temperature scanning when applicable, and pre-site screening. Using the same questions as field personnel recognized above under Section 3 General Jobsite/Office Practices, number 7.

Other Resources

- CDC – [Coronavirus \(COVID-19\)](#)
- WHO – [Rolling Updates on Coronavirus disease \(COVID-19\)](#)
- OSHA – [Guidance on Preparing Workplaces for COVID-19](#)
- GBCA – [COVID-19 GBCA Updates](#)
- AGC of America – [General Guidance](#) and links to information on COVID-19



On behalf of General Building
Contractors Association



On behalf of Eastern Atlantic
States Regional Council of
Carpenters

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.)
 - 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:
 - 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);
 - The case is work-related, as defined by [29 CFR 1904.5](#); and
 - 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

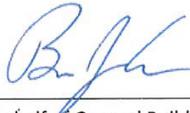
In an effort to protect others, additional protective measures may be put in place. These include:

- 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.

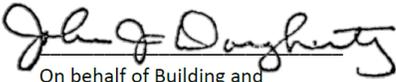
Refer to Section 5 of Recommended Job Site Protocols: Personal Protection Equipment (PPE) for additional guidance.

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