Commonwealth Regional Council

Infectious Disease (COVID-19) Prevention Plan

Adoption Date: August 19, 2020

Revision(s):
Organization Policy
The Virginia Department of Labor and Industry (DOLI) at the direction of Virginia Governor Ralph Northam has developed and implemented the policies set forth in Virginia Code 16 VAC 25-220. This Emergency Temporary Standard for preventing the infectious disease SARS-CoV-2 (otherwise known as COVID-19) is designed to prevent the spread of COVID-19 and protect Virginia's workers. The Commonwealth Regional Council is dedicated to ensuring that our employees (full-time, part-time, and temporary) are fully protected, and can return to their families at the conclusion of their workday. This policy sets forth the measures, policies, assessments, and enforcement measures that the Commonwealth Regional Council will utilize to ensure the best possible outcome. Employees failing to abide by the requirements of this policy may receive disciplinary action.
Should you have any questions please contact Melody Foster, Executive Director to address any questions or concerns that you may have.
Γhank you,
Mike Hankins, Chairman Commonwealth Regional Council

Definitions

Administrative Control: Any procedures which significantly limits daily exposure to COVID-19 related to workplace hazards and job tasks by control or manipulation of the work schedule or manner in which the work is performed. Personal Protective Equipment (PPE) is not considered an administrative control.

Asymptomatic: A Person who does not have symptoms.

Close Contact: Any individual within six (6) feet of an infected person for at least fifteen (15) minutes starting from two (2) days before the person became sick until the person was isolated.

Engineering Control: The use of substitution, isolation, ventilation, and equipment modification to reduce exposure to COVID-19 related workplace hazards and job tasks.

Exposure Risk Level: Assessment of the possibility that an employee could be exposed to the hazards associated with COVID-19 disease which are based on risk factors present during the course of employment regardless of location. These have been broken down to "very high", "high", "medium", and "lower".

- Very High: Exposure risk hazards or job tasks are those in places of employment with high potential for employee exposure to known or suspected sources of the COVID-19 including but not limited to specific medical, postmortem, or laboratory procedures.
- High: Exposure risk hazards or job tasks are those in places of employment with high potential for employee exposure with known or suspected sources of COVID-19 that are not otherwise classified as "very high".
- Medium: Exposure risk hazards or job tasks that are not otherwise classified as very high or high and require more than minimal occupational contact with other employees or persons who may be infected with, but are not known or suspected COVID-19 carriers.
- Lower: Exposure risk hazards or job tasks are those not otherwise classified as very high, high, or medium, that do not require contact with person known to be, or suspected of being, or who may be infected with, nor contact with other employees, other persons or the general public except as otherwise provided in this definition.

Face Covering: Item normally made of cloth or various other materials with elastic bands or cloth ties to secure over the wearer's nose and mouth in an effort to contain or reduce the spread of potentially infectious respiratory secretions at the source. A face covering is not subject to testing and approval by a state government agency, so it is not considered a form of personal protective equipment or respiratory protection equipment under VOSH laws, rules, regulations, and standards.

Physical Distancing: Keeping space between yourself and other persons while conducting work-related activities inside and outside of the physical establishment by staying at least six (6) feet from other persons.

Symptomatic: Employee is experiencing symptoms similar to those attributed to COVID-19 including fever or chills, cough, shortness of breath or difficulty breathing, fatigue, muscle or body aches, headache, new loss of taste or smell, sore throat, congestion or runny nose, nausea or vomiting, or diarrhea. Symptoms may appear in two (2) to fourteen (14) days after exposure to the virus.

Employer Requirements

Employees are encouraged to self-monitor for signs and symptoms of suspected COVID-19 infection. These signs and symptoms may include the following: fever or chills, cough, shortness of breath or difficulty breathing, fatigue, muscle or body aches, headache, new loss of taste or smell, sore throat, congestion or runny nose, nausea or vomiting, or diarrhea. Symptoms may appear in 2 to 14 days after exposure to the virus.

Employees who are experiencing symptoms listed above are encouraged to stay home and notify a supervisor of your absence. On a case-by-case basis, you may be authorized to work remotely. Should the need arise to remain away from work for an extended period of time due to COVID-19, the Commonwealth Regional Council sick leave policy allows for:

CRC General Use of Sick Leave

An employee who is not able to report to work because of illness or injury shall be eligible to use his/her accumulated sick leave. In such cases, he/she, or someone else, shall notify the Executive Director the first day of his/her absence. An employee who has prior knowledge that he/she may have to use his sick leave for an operation, special medical, or other treatment shall make application for such leave in advance of use. In the case of absence due to illness for more than three (3) consecutive days, the Executive Director may require a physician's certification.

Accrual of Sick Leave

Sick leave shall accrue for full-time permanent employees at the rate of fifteen (15) days per fiscal year or at the rate of one and one-fourth (1 $\frac{1}{4}$) days or 10 hours per month. This leave is intended for use when an employee is unable to work because of illness or death in the immediate family.

Accumulation of Sick Leave

Sick leave shall accumulate to a maximum of 960 hours (120 days) for each permanent full-time employee. Sick days are non-compensable at time of separation

Use of Sick Leave for Severe Illness or Death in the Immediate Family

In the case of severe illness or death in the immediate family, up to three (3) days sick leave for any one occurrence may be used. Immediate Family includes only the employee's parents, wife, husband, children, brother or sister, and any relative living in the household of the employee. For deaths and illness other than the immediate family, up to two (2) days sick leave may be used for any single occurrence. Use of sick leave for these purposes may not exceed a total of six (6) days in a fiscal year.

Use of Sick Leave for Inclement Weather

When inclement weather conditions cause some staff employees to miss work, those employees who miss work will have the time deducted from their sick leave. In the situation where inclement weather causes the Office to be closed, no leave time for staff absence will be required.

Disposition of Sick Leave At Separation

An employee leaving the Commonwealth Regional Council shall lose all sick leave credits. The employee shall not receive any payment for unused sick leave at the time of separation from the Council.

Any organizations conducting contracting work with the Commonwealth Regional Council is required to impress upon the contractor(s) about the importance of suspected COVID-19 contractors or temporary employees staying home. Known or suspected COVID-19 contractors or temporary workers shall not report to work or be allowed to remain on the job site until cleared to return to work.

To reduce the spread of COVID-19, employees, unless infeasible, will be required to practice physical distancing. When physical distancing is infeasible, employees will be required to ensure the use of a face covering. All employees when occupying a vehicle together for work purposes are required to utilize a face covering. If a face covering is contrary to an employee's safety or health, a face covering is not required; however, based on physical distancing, the employee may be required to utilize a face shield or other PPE device to ensure protection.

Employees who are required to interact with customers, contractors, or the general public will be provided with, and must immediately use supplies to clean and disinfect areas where there is potential for exposure to COVID-19. All common areas (bathrooms, and other frequently touched surfaces) must be cleaned at least at the end of each day or as determined by enhanced cleaning procedures.

Return to Work

If an employee of the Commonwealth Regional Council is suspected or has tested positive for COVID-19, the following guidelines are to be followed:

If an employer (supervisor) is notified of a positive test for one of its own employees, contractors, temporary employees, or other person who was present at the place of employment within the previous fourteen (14) days, the employer shall notify:

- Its own employees at the same place of employment who may have been exposed within twenty-four (24) hours of discovery while keeping confidential the identity of the COVID-19 person in accordance with the Americans with Disabilities Act (ADA) and other applicable laws and regulations.
- Other employers whose employees were present at the work site during the same time period; and the building/facility owner (if different from the employer).

Choose one or both of the strategies below

Employees may return to work based on the time-based strategy implemented by the Commonwealth Regional Council. Employees who are suspected or known COVID-19 employees may return to work when (seventy-two) 72 hours have passed since recovery (resolution of fever without the use of fever-reducing medications, and improvement in respiratory symptoms); AND at least ten (10) days have passed since the symptoms first appeared.

Employees may return to work based on the test-based strategy implemented by the Commonwealth Regional Council. Employees who are suspected or known COVID-19 employees may return to work when there is a resolution of fever without the use of fever-reducing medications and improvement in respiratory symptoms, AND two (2) consecutive negative results from a U.S. Food and Drug Administration Emergency Use COVID-19 test taken at least (twenty-four) 24 hours apart. An employee has the right to refuse the COVID-19 test; however, the employer will then be required to follow the symptom-based strategy.

Job Safety COVID-19 Analysis			
Exposure	Potential Risks	Infection Protection Measures	Department/Work Class Groups
Lower Exposure Risk (Caution)	Lower exposure risk (caution) jobs are those that do not require contact with people known to be, or suspected of being, infected with COVID-19 nor frequent close contact with (within six (6) feet of) the general public. Workers in this category have minimal occupational contact with the public and other coworkers (employees in an office building and able to achieve minimal contact through administrative controls such as barriers, telecommuting or brief contact with others outside of 6ft.)	 Promote frequent and thorough hand washing provide alcohol-based hand rubs containing at least 60% alcohol Encourage employees to stay home if they are sick Encourage respiratory etiquette, including covering coughs and sneezes. Take advantage of policies and practices, such as flexible worksites (e.g., telecommuting) and flexible work hours (e.g., staggered shifts), to increase the physical distance among employees. Discourage employees from using other's phones, desks, offices, or other work tools and equipment, when possible. Maintain regular housekeeping practices, including routine daily cleaning and disinfecting of surfaces, equipment, and other elements of the work environment. 	All CRC Staff members

Exposure	Potential Risks	Infection Protection Measures	Department/Work Class Groups
Medium Exposure Risk	Medium exposure risk jobs include those that require frequent and/or close contact with (within six (6) feet of) people who may be infected with COVID-19, but who are not known or suspected COVID-19 patients. (Schools, juvenile detention centers, jails, sports, venues, entertainment, airports, bus and transit stations, high-population-density work environments, and some high-volume service settings).	 Include recommend safe job procedures from lower exposure risk above. Install physical barriers, such as clear plastic sneeze guards, where feasible. Consider offering face masks to ill employees and customers to contain respiratory secretions until they are able leave the workplace (i.e., for medical evaluation/care or to return home). Keep customers informed about symptoms of COVID-19 and ask sick customers to minimize contact with workers until healthy again, such as by posting signs about COVID-19 in areas where sick customers may visit. Where appropriate, limit customers' and the public's access to the worksite, or restrict access to only certain workplace areas. Consider strategies to minimize face-to-face contact (e.g., curbside delivery, phone-based communication, telework). Communicate the availability of medical screening or other employee health resources (e.g., on-site nurse; telemedicine services). Workers with medium exposure risk may need to wear some combination of gloves, a gown, a face mask, and/or a face shield or goggles. PPE for employees in the medium exposure risk category will vary by work task, the results of the employer's hazard assessment, and the types of exposures workers have on the job. 	NONE Class Groups NONE

Exposure	Potential Risks	Infection Protection Measures	Department/Work Class Groups
High Exposure Risk	High exposure risk jobs are those with high potential for exposure to known or suspected sources of COVID-19. Workers in this category include: • Healthcare delivery and Emergency staff (e.g., doctors, nurses, emergency response staff who must enter patients' rooms/homes) exposed to known or suspected COVID-19 patients. (Note: when such workers perform aerosol-generating procedures, their exposure risk level becomes very high.) • Medical transport workers (e.g., ambulance vehicle operators) or Law Enforcement moving known or suspected COVID-19 patients in enclosed vehicles.	 Include recommend safe job procedures from Lower and Medium exposure risks above. Post signs requesting patients and family members to immediately report symptoms of respiratory illness on arrival at any healthcare facility and use disposable face masks. Prompt identification and isolation of potentially infectious individuals is a critical step in protecting workers, customers, visitors, and others at a worksite. Encourage employees to selfmonitor for signs and symptoms of COVID-19 if they suspect possible exposure. Communicate procedures for employees to report when they are sick or experiencing symptoms of COVID-19. Where appropriate, develop procedures for immediately isolating people who have signs and/or symptoms of COVID-19, and train workers to implement them. Move potentially infectious people to a location away from workers, customers, and other visitors. Although most worksites do not have specific isolation rooms, designated areas with closable doors may serve as isolation rooms until potentially sick people can be removed from the worksite. Take steps to limit spread of the respiratory secretions of a person who may have COVID-19. Provide a face mask, if feasible and available, and ask the person to wear it, if tolerated. Note: A face mask (also called a surgical mask, procedure mask, or other similar terms) on a patient or other sick person should not be confused with PPE for a worker; the mask acts to contain potentially infectious 	NONE

High Exposure Risk (cont.)		respiratory secretions at the source (i.e., the person's nose and mouth) Restrict the number of personnel entering isolation areas. Consider offering enhanced medical monitoring of workers during COVID-19 outbreaks. Provide personnel who may be exposed while working away from fixed facilities with alcohol-based hand rubs containing at least 60% alcohol for decontamination in the field.	
Exposure	Potential Risks	Infection Protection Measures	Department/Work Class Groups
Very High Exposure Risk	Very high exposure risk jobs are those with high potential for exposure to known or suspected sources of COVID-19 during specific medical, postmortem, or laboratory procedures. Workers in this category include: • Healthcare workers (doctors, nurses, paramedics, emergency medical technicians) performing aerosolgenerating procedures (e.g., intubation, cough induction procedures, bronchoscopies, or invasive specimen collection) on known or suspected COVID-19 patients. Healthcare or laboratory personnel collecting or handling specimens from known or suspected COVID-19 suspected COVID-19 resupported COVID-19 resupported COVID-19 resupported COVID-19 resupported COVID-19 resupported COVID-19 resupported COVID-19	 Include recommend safe job procedures from Lower, Medium and High exposure risks above. Most workers at high or very high exposure risk likely need to wear gloves, a gown, a face shield or goggles, and either a face mask or a respirator, depending on their job tasks and exposure risks. Those who work closely with (either in contact with or within 6 feet of) patients known to be, or suspected of being, infected with SARS-CoV-2, the virus that causes COVID-19, should wear respirators. For the most up-to-date information, visit OSHA's COVID-19 webpage: www.osha.gov/covid-19 PPE ensembles may vary, especially for workers who may need additional protection against blood, body fluids, chemicals, and other materials to which they may be exposed. Additional PPE may include medical/surgical gowns, fluid-resistant coveralls, aprons, or other disposable or reusable protective clothing. Gowns should be large enough to cover the areas requiring protection. OSHA may also provide updated guidance for PPE use on its website: www.osha.gov/covid-19. 	NONE

patients (e.g., manipulating cultures from known or suspected COVID-19	
patients).	

Training

The Commonwealth Regional Council is dedicated to ensuring employee protection. This is done to ensure that employees can return home to their families safely at the conclusion of their workday. To do that, employees must be effectively trained. Training will be accomplished as prescribed below:

- To all employees initially
- To all employees who lack understanding of the policy
- To all newly hired employees

Training will cover the information as prescribed below:

- COVID-19 signs and symptoms
- Self-monitoring for signs and symptoms
- Employer responsibilities and return to work policy
- Cleaning and disinfecting
- Specific COVID-19 analysis for employee jobs
- Commonwealth Regional Council enforcement policy
- Allow for questions and answers

Responsible Party

The Commonwealth Regional Council has developed this policy based on the temporary 16 VAC 25-220 Emergency Temporary Standard developed by the Virginia DOLI. This policy is designed to be in place through January 15, 2021; however, this policy may be continued by the Commonwealth Regional Council based on Federal, State, or local guidelines. The Commonwealth Regional Council Executive Director is responsible to ensure the adoption, dissemination, and enforcement of this policy for the safety and health of the employees of the Commonwealth Regional Council.