Overview
The construction industry faces unique challenges to remaining open or returning to work during the pandemic. This return to work guidance provides actions the construction industry (employers and employees) can take to keep employees safe and work moving forward. The construction industry serves as the backbone for many supply chains, construction, and specialty contracting organizations, and has adapted rapidly to the changing health and safety challenges COVID-19 has introduced.

SARS-CoV-2, the virus that causes COVID-19, is thought to be spread primarily through aerosolized respiratory droplets at close range. Airborne transmission from exposure to very small droplets over long distances is unlikely. However, there is evidence that this mode of transmission is possible, particularly in crowded, indoor spaces. People may also become infected by touching contaminated surfaces. The virus has been shown to survive in aerosols for hours and on surfaces for days. Infection can occur through eyes, nose, and mouth exposures. There is also strong evidence that people can spread the virus while pre-symptomatic or asymptomatic.

Construction firms have taken the risk management frameworks used to control high risk work activities and shifted that same mindset and framework to the health-related risks of COVID-19. Construction markets remained somewhat open under critical infrastructure, and construction projects have implemented unique solutions in order to adapt and manage worker health for return to work as well as managing schedules with an impacted workforce. Project sites should create pandemic infection controls plans and follow the hierarchy of controls when developing controls measures for physical distancing, worker hygiene and advanced cleaning and disinfecting protocols. Both the Centers for Disease Control (CDC) and American Society of Safety Professionals (ASSP) provide guidance on applying the hierarchy of controls.

With stay at home and shelter in place restrictions beginning to lift, construction companies are faced with difficult questions that must be addressed as they transition back to normal operations, such as:

- How can we protect our employees, third parties, and project sites from COVID-19?
- How can we minimize the risk of disease transmission if those that are ill or those who have had contact with positive COVID-19 in our workforce?

What should an Employer do to protect themselves and their workers?
Construction companies and vendors should continually monitor global (World Health Organization [WHO]), federal (CDC and Occupational Safety and Health Administration [OSHA]), state, and local guidelines for changes in recommendations, disinfection strategies, worker protections and other best management practices.

Employers should consider forming a knowledgeable team to monitor, assess, and implement new strategies as they become available. In addition, employers should consider the following strategies for reducing the risk of COVID-19 transmission in regards to physical distancing, ventilation, enhanced cleaning and disinfecting practices, restrooms (NOTE: See Supplement guidance on use of air dryers), gathering areas and contact surfaces, personal hygiene, employee wellness, personal protective equipment (COVID-related protective equipment should include face coverings/masks and/or face shields for close contact activities, regular work gloves), training, waste and laundering, and communication.

Tips to Return to Business Operations:
- At minimum, follow the CDC Interim Guidance for Implementing Safety Practices for Critical Infrastructure Workers.
- Provide employees with accurate, understand-
able information about the SARS-CoV-2 virus and COVID-19 disease and what steps can be taken to protect them.

- Complete a task-based risk assessment or job hazard analysis to best determine physical distancing of at least 6 feet and evaluate where engineering controls and/or administrative controls can be implemented to reduce or eliminate spread.

- Implement and inform employees of supportive workplace policies as applicable:
  - Flexible sick leave policies consistent with public health guidance. Providing paid sick leave is an important way to encourage employees to stay home when sick.
  - Consider not requiring a COVID-19 test result or a healthcare provider's note for employees who are sick to validate their illness in order to qualify for sick leave. If you do require a doctor's note from your employees to verify that they are healthy and able to return to work, be aware that healthcare provider offices and medical facilities may be extremely busy and not able to provide such documentation in a timely manner. Get more information related to the Americans with Disabilities Act during the COVID-19 pandemic.
  - Flexibility to stay home to care for a sick family member.
  - Human resources policies consistent with public health guidance, and state and federal workplace laws. For more information on employer responsibilities, visit the Department of Labor’s and the Equal Employment Opportunity Commission’s websites.
  - Employee assistance program and community resources to help employees manage stress and receive support.
  - Encourage employees at increased risk for severe illness to request special accommodations to allow them to perform their job duties safely while also protecting sensitive employee health information.
  - Encourage those who are sick or at greater risk to stay home. This includes:
    - People with underlying medical conditions.
    - People who live with elderly people or those who are at risk.
    - People with upper respiratory or flu-like symptoms or who live with someone with these clinical symptoms.
    - People with COVID-19, people who live with someone with COVID-19, or who have been exposed to someone with COVID-19.
  - Employers should educate employees to recognize the symptoms of COVID-19 and provide instructions on what to do if they develop symptoms. At a minimum, any worker should immediately notify their supervisor, their health care provider, and the local health department, who will provide guidance on what actions need to be taken.
  - Post signs and reminders at entrances and in strategic places providing instruction on hand hygiene, respiratory hygiene, and cough etiquette. This should include signs with images for non-English readers, as needed.
  - Ensure employees have cloth or disposable face coverings for the reduction of virus spread.
  - Reduce the number of individuals on the site to essential employees to complete the work.
  - Do not let anyone symptomatic onto the worksite. Work with your health providers for support and guidance.
  - Design work to reduce the number of people working in the same area, so employees can maintain 6-foot distances. Do not allow trade stacking unless it can be done without forcing employees to work near others.
– Consider limiting meetings to 10 people or less. Employees shall use virtual meeting tools, in lieu of in-person meetings, whenever possible.

– Eliminate non-essential visits, such as job tours, vendor demos, etc.

– Maintain a daily approved visitor log for the purposes of contact tracing. This log should include the date, time, and contact information of the visitor.

– Hold toolbox talks and safety meetings where there is adequate spacing (even when outdoors) and only have one person note who is in attendance (avoid sharing pens or tablet devices).

– Stagger shifts and other trades to isolate and compartmentalize employees. This will allow protection of others if an outbreak occurs and reduces/limits the number of people who are exposed. Having the same teams work together or travel together can limit the reach of a potential outbreak.

– Consider wearable technology such as proximity devices worn on hard hats or wrist bands to monitor employee physical distancing and tracing of contacts.

– Consider a 4-day work week to allow for 72 hours of downtime at the project site.
  – This allows for limited exposure to 4 days instead of 5 days.
  – CDC and recent studies have shown COVID-19 can stay active up to 3 days on surfaces.

– Stop employees from randomly walking floors, between floors, or between buildings, to reduce cross-contamination.
  – If your project build is complex and large, you may consider color code (stickers) on hard hats and restrict access to only the correct color for each building or space.
  – You may also want to color code T-shirts for easy recognition in a space.

– Temporary spaces (site/job trailers) should be cleaned and disinfected daily.

– Project teams shall clean and disinfect their shared workstations and equipment after use.

– Select appropriate disinfectants – consider effectiveness and safety.
  – The U.S. Environmental Protection Agency (EPA) has developed a list of products that meet EPA's criteria for use against SARS-CoV-2.
  – Do not mix different EPA registered chemicals together. The combination could be toxic by inhalation. Be particularly careful when using any products containing ammonia, sodium hypochlorite (bleach), or hydrogen peroxide.
  – Review product labels and Safety Data Sheets (SDS) and follow manufacturer specifications for cleaning/disinfecting.

– Consider consulting an Occupational and Environmental Health and Safety (OEHS) Science Professional or Industrial Hygiene expert if additional advice is needed. AIHA has a consultants list of such qualified professionals.

– Establish a disinfection routine.
  – Ensure disinfection protocols follow product instructions for application and contact time. All items should be allowed to dry thoroughly after cleaning.
  – Use disposable wipes or rags when available. If not available, ensure rags are maintained, handled, and cleaned per product instructions.

– Consider developing a standard operating procedure, a checklist, or audit system to consistently train employees on enhanced cleaning/disinfecting practices or to track when and how cleaning and disinfecting is conducted. Note that this may be a requirement in some states or local jurisdictions.

– Single-use items and used disinfection materials can be treated as regular waste, following regular safety guidelines.
• Any reused cloth materials should be washed and dried on the highest temperature setting allowable for the fabric.

• Deeper cleaning and disinfecting protocols should be developed and implemented in cases where confirmed cases of COVID-19 are discovered. Refer to AIHA’s Workplace Cleaning for COVID-19.

• Provide Safety Data Sheets (SDS) for cleaning and disinfection products and ensure employees are aware of the hazards of use. Incorporate new hazards into existing OSHA Hazard Communications Program.

• Employees should receive, at minimum, awareness training on cleaning and disinfection products used in the workplace following OSHA Hazard Communication Standards. For employees who will use cleaning and disinfecting products, training should also include proper use, PPE, disposal, and all precautionary measures.

• Provide natural ventilation by opening windows and doors whenever possible to increase air flow. If windows and doors cannot remain open, provide good indoor air quality by:
  – Keeping HVAC system operational to maintain thermal comfort and maximize outdoor air based on system design.
  – Maintaining the relative humidity at 40-60%.
  – Limiting the use of portable pedestal or overhead ceiling fans.

• If you need assistance on HVAC issues, ask an HVAC professional and see the American Society of Heating, Refrigerating, and Air-Conditioning Engineers’ (ASHRAE) COVID-19 (Coronavirus) Preparedness Resources updates for more information.
  – AIHA Occupational and Environmental Health and Safety (OEHS) Science Professionals and industrial hygienists are also well versed in general dilution ventilation. AIHA has a consultants list of such qualified professionals.

• Provide for several hand washing stations with soap and water in common areas and throughout the site. Touch-free hand sanitizer dispensers should be installed where possible.
  – Place portable wash stations.
  – Also provide hand sanitizer that contains that contains at least 60% ethanol or 70% isopropyl alcohol in vehicles and workstations.

• At minimum, employees should wash their hands after they have been in a public place, after touching their face covering, after blowing their nose, coughing, or sneezing, after using the restroom, after touching any common contact surfaces, and before eating. Avoid touching eyes, nose, or mouth with unwashed hands.

• Employees should wash hands with clean, running water, apply soap, lather and scrub for at least 20 seconds, then rinse. Dry hands using a clean paper towel or air dry. When soap and water can’t be used, use an alcohol-based hand sanitizer that contains at least 60% ethanol or 70% isopropyl alcohol. Any use of alcohol-based hand sanitizers should follow local and State guidelines.

• Modify break areas to allow for physical distancing. Stagger breaks to reduce people in break areas.
  – Picnic tables should be marked with “X”s to stop people from sitting close to each other.
  – Breakrooms should have chairs removed to stop any chance of gathering.
  – Janitorial employees should be disinfecting eating areas hourly.

• Eliminate sharing personal hand tools, and large shared tools shall be cleaned before and after use.

• Reduce the number of people in a van or pool vehicle for commuting to and from the job site.
Returning to Work: Construction Environment

DISCLAIMER:
These are meant to be general guidelines to help you re-open your establishment. Always follow local, state and federal laws and guidelines.

- Encourage employees to wash work clothes and cloth face coverings daily on the warmest setting possible.
- Monitor employees’ wellness through daily questionnaires of symptoms, exposure potential and travel to areas with widespread transmission. If they are not feeling well, they should stay home.
- Provide up-to-date information about COVID-19, SARS-CoV-2 and local, state and federal guidelines.
  - Engage your human resources for health and wellness programs, which should include mental health resources and support.
  - Provide additional information for employee and family use (e.g., Employee Assistance Program, EAP).
- If a positive COVID-19 case amongst the workforce is identified, conduct contact tracing for anyone who may have come in contact with the employee, identify areas of the work environment where the employee worked and accessed for disinfecting/cleaning, and isolate those areas until cleaning has occurred.
  - Contact tracing and sharing of employee information should be done under the guidance of Human Resources due to privacy requirements of HIPAA, Americans with Disabilities Act (ADA), and EEOC.
- For transparency, each contractor should notify the client and/or general contractor of any positive cases or close contact to positive cases (involve your HR professional to ensure privacy requirements are followed and maintained when communicating employee illness).
- Communicate and reinforce with employees (while maintaining privacy requirements per HIPPA) they may have been exposed and they need to closely monitor their health, including checking their temperatures often and watching out for COVID-19 symptoms.
- Provide employees with additional PPE and monitoring (at the company’s discretion).
- Follow Critical Infrastructure Exposure Protocol
  - CDC interim guidance.

Screening and Temperature Check Tips for Employees

- Health checks and reporting requirements of individuals infected with COVID-19 should be explained to employees prior to reopening and again once operations have resumed.
- Communicate to employees the importance of being vigilant when monitoring symptoms and staying in touch with their employer or manager if or when they start to feel sick.
- Revisit your leave or sick program to allow for time off and follow all HR Policies and HIPAA/other regulatory requirements.
- Conduct employee temperature screening and wellness checks before each shift. (NOTE: be sure to comply with OSHA’s Access to Employee Exposure Medical Records standard for confidentiality.)
  - Temperature screening methods can include manual (use non-contact infrared thermometers) or thermal camera meeting FDA recommendations. Additional screening information/guidance can be found on the CDC website.
  - Assign an employee to manage and conduct the temperature screenings while following CDC guidelines in the above link. If this is not possible, employees can self-check their own temperature.
  - Screening should be done in a manner such that the privacy of employees is respected.
  - Perform a visual inspection for other signs of illness (e.g., flushed cheeks, rapid or difficulty breathing without recent physical activity, fatigue, extreme fussiness, cough).
DISCLAIMER: These are meant to be general guidelines to help you re-open your establishment. Always follow local, state and federal laws and guidelines.
What should an Employee do to protect themselves?

- Educate yourself with the facts of COVID-19.
  - Obtain your information about COVID-19 from credible sources like the Centers for Disease Control (CDC) and World Health Organization (WHO).
- Employees should evaluate their health continuously; if they are sick, have a fever or symptoms, or someone at home is sick, then they should remain home. **NOTE:** Employer HR Policies, HIPAA guidelines and other laws should be followed at all times.

- Maintain physical distancing. Depending on local requirements, in alignment with CDC recommendations, wear a cloth or disposable (or better if you have it) face covering at minimum whenever physical distancing cannot be maintained (indoors or outdoors). Ensure the face covering is properly maintained and cleaned. Additional information on cloth face coverings can be found on [CDC’s website](https://www.cdc.gov). *(NOTE: Cloth or disposable face coverings primarily protect other people. A cloth or disposable face covering is not a substitute for physical distancing.)*

- With the exception of children less than two, and individuals who have difficulty breathing, are unconscious, or otherwise unable to remove a face covering without assistance, CDC recommends that all people wear a cloth or disposable face covering in public settings and when around people who don’t live in their household, especially when other physical distancing measures are difficult to maintain.

- Non-medical cloth or disposable face coverings or cloth or disposable face coverings are NOT Personal Protective Equipment (PPE), but they do offer some protection to others and should be worn while near other people in common spaces or shared workspaces. They are not a substitute for physical distancing, engineering controls, cleaning and disinfecting, proper hygiene, or staying home while sick.
- Remove cloth or disposable face coverings correctly and wash hands after handling or touching a used face covering.
- Wash cloth face coverings after each use. Cloth face coverings can be included with regular laundry. Use regular laundry detergent and the warmest appropriate water setting for the cloth used to make the face covering. Use the highest heat setting and leave in the dryer until completely dry. If air drying, lay flat and allow to completely dry. If possible, place in direct sunlight.
- Let your employer know if you have concerns about PPE that may be provided to you and that you are properly instructed on how to use it. The CDC has recommended sequences for donning and doffing PPE.

**NOTE:** If an employer chooses to provide or the employee supplies their own N95 respirator, please fully consider all the potential OSHA requirements.

- Cover your mouth and nose with a tissue when you cough or sneeze and throw used tissues in the trash. If you don't have a tissue, cough or sneeze into your elbow, not your hands. Immediately wash your hands after blowing your nose, coughing or sneezing. Learn more about coughing and sneezing etiquette.

- Maintain good hygiene practices (washing hands with soap and water for at least 20 seconds or a hand sanitizer with at least 60% ethanol or 70% isopropyl alcohol). For more information, refer to [CDC’s handwashing guidelines](https://www.cdc.gov).

- If an employee tests positive for COVID-19:
  - Stay home and isolate until cleared for physical return to the workplace by your medical provider,
Returning to Work: Construction Environment

following the CDC’s Discontinuation of Isolation for Persons with COVID-19 Not in Healthcare Settings.

– Contact your supervisor and report your results as soon as possible.

• Understand the rules within the workspace – avoid large gatherings of greater than 10 employees, unless physical distancing of 6 feet or greater can be maintained

• Weekly toolbox talks should be virtual or in smaller groups. All hands meetings shall be reduced.

• Returning back to work, employee should at minimum follow most recent CDC guidelines.

Worker Rights
AIHA believes that basic protections are worker rights, as well as an essential ingredient of occupational health and safety systems, and that employers must provide a safe and healthful work environment.

What can Visitors to the jobsite do to minimize the transmission of COVID-19?

• Visitors to the job site should follow the same practices of physical distancing.

• Use a cloth or disposable face covering when entering the job site and inspecting or meeting with workers.

• Avoid physical contact when greeting others.

• If you are symptomatic – do not visit the site and stay home.

• Increased use of virtual technology for project tracking and updates to reduce visitors and support such as engineers and inspectors from visiting the project but accomplish project reviews.

• In-person meetings should be avoided, and the use of video, chats, or other conference line-type systems should be considered first.

Resources

• AGC: The Construction Association – Proactive Measures for Addressing COVID-19 / Pre-Screening Questionnaire


• Cybersecurity and Infrastructure Security Agency CISA resource on Critical Infrastructure Workers

• CDC Health Screening “Should we be screening employees for COVID-19 symptoms?” section of General Business Frequently Asked Questions

• Numerous wellness questionnaire examples are available online (e.g.,)

• The EPA has developed a list of disinfectants for use against SARS-CoV-2.

• American Society of Heating, Refrigeration, Air-conditioning Engineers ASHRAE COVID 19 resource for ventilation

• CDC Interim Critical Infrastructure Guidelines

• CPWR

• NIOSH site.

• AIHA’s Indoor Environmental Quality Committee developed these guidance documents about re-opening and cleaning buildings after closures due to COVID-19: Recovering from COVID-19 Building Closures and Workplace Cleaning for COVID-19

• AIHA’s Considerations on the Safe Use of UVC Radiation

• AIHA’s Focus on Construction Health: COVID-19

• AIHA’s Effective and Safe Practices: Guidance for Custodians, Cleaning and Maintenance Staff

• AIHA’s Employers Guide to COVID-19 Cleaning & Disinfection in Non-Healthcare Workplaces
Returning to Work: Construction Environment

• AIHA’s Reducing Risk of COVID-19 Using Engineering Controls
• AIHA’s PPE for SARS-CoV-2
• AIHA’s Use of Real Time Detection Systems
• AIHA’s Proper Use of Respirators for Healthcare Workers & First Responders
• AIHA’s Workers Rights White Paper
• American Cleaning Institute’s COVID-19 Resources

About Occupational and Environmental Health and Safety Professionals

Occupational and environmental health and safety (OEHS) professionals (also known as industrial hygienists) practice the science of anticipating, recognizing, evaluating, controlling and confirming workplace conditions that may cause workers’ injury or illness. Through a continuous improvement cycle of planning, doing, checking and acting, OEHS professionals make sure workplaces are healthy and safe.

• Get additional resources at AIHA’s Coronavirus Outbreak Resource Center.
• Find a qualified industrial hygiene and OEHS professionals near you in our Consultants Listing.

Disclaimer

AIHA is the association for scientists and professionals committed to preserving and ensuring occupational and environmental health and safety (OEHS) in the workplace and community. Founded in 1939 as the American Industrial Hygiene Association® (AIHA®), we support our members with our expertise, networks, comprehensive education programs and other products and services that help them maintain the highest professional and competency standards. More than half of AIHA’s nearly 8,500 members are Certified Industrial Hygienists (CIH), and many hold other professional designations. AIHA serves as a resource for those employed across the public and private sectors, as well as to the communities in which they work. For more information, visit AIHA.org.

AIHA®

AIHA is the association for scientists and professionals committed to preserving and ensuring occupational and environmental health and safety (OEHS) in the workplace and community. Founded in 1939 as the American Industrial Hygiene Association® (AIHA®), we support our members with our expertise, networks, comprehensive education programs and other products and services that help them maintain the highest professional and competency standards. More than half of AIHA’s nearly 8,500 members are Certified Industrial Hygienists (CIH), and many hold other professional designations. AIHA serves as a resource for those employed across the public and private sectors, as well as to the communities in which they work. For more information, visit AIHA.org.

AIHA®

AIHA is the association for scientists and professionals committed to preserving and ensuring occupational and environmental health and safety (OEHS) in the workplace and community. Founded in 1939 as the American Industrial Hygiene Association® (AIHA®), we support our members with our expertise, networks, comprehensive education programs and other products and services that help them maintain the highest professional and competency standards. More than half of AIHA’s nearly 8,500 members are Certified Industrial Hygienists (CIH), and many hold other professional designations. AIHA serves as a resource for those employed across the public and private sectors, as well as to the communities in which they work. For more information, visit AIHA.org.

AIHA®

AIHA is the association for scientists and professionals committed to preserving and ensuring occupational and environmental health and safety (OEHS) in the workplace and community. Founded in 1939 as the American Industrial Hygiene Association® (AIHA®), we support our members with our expertise, networks, comprehensive education programs and other products and services that help them maintain the highest professional and competency standards. More than half of AIHA’s nearly 8,500 members are Certified Industrial Hygienists (CIH), and many hold other professional designations. AIHA serves as a resource for those employed across the public and private sectors, as well as to the communities in which they work. For more information, visit AIHA.org.

AIHA®

AIHA is the association for scientists and professionals committed to preserving and ensuring occupational and environmental health and safety (OEHS) in the workplace and community. Founded in 1939 as the American Industrial Hygiene Association® (AIHA®), we support our members with our expertise, networks, comprehensive education programs and other products and services that help them maintain the highest professional and competency standards. More than half of AIHA’s nearly 8,500 members are Certified Industrial Hygienists (CIH), and many hold other professional designations. AIHA serves as a resource for those employed across the public and private sectors, as well as to the communities in which they work. For more information, visit AIHA.org.

AIHA®

AIHA is the association for scientists and professionals committed to preserving and ensuring occupational and environmental health and safety (OEHS) in the workplace and community. Founded in 1939 as the American Industrial Hygiene Association® (AIHA®), we support our members with our expertise, networks, comprehensive education programs and other products and services that help them maintain the highest professional and competency standards. More than half of AIHA’s nearly 8,500 members are Certified Industrial Hygienists (CIH), and many hold other professional designations. AIHA serves as a resource for those employed across the public and private sectors, as well as to the communities in which they work. For more information, visit AIHA.org.

AIHA®

AIHA is the association for scientists and professionals committed to preserving and ensuring occupational and environmental health and safety (OEHS) in the workplace and community. Founded in 1939 as the American Industrial Hygiene Association® (AIHA®), we support our members with our expertise, networks, comprehensive education programs and other products and services that help them maintain the highest professional and competency standards. More than half of AIHA’s nearly 8,500 members are Certified Industrial Hygienists (CIH), and many hold other professional designations. AIHA serves as a resource for those employed across the public and private sectors, as well as to the communities in which they work. For more information, visit AIHA.org.

Disclaimer

AIHA is not legally responsible and shall be held harmless from all claims, causes of action, and demands, whatsoever, any third party may incur on account of damage, loss or injury resulting from adhering to these guidelines.

These guidance documents were primarily developed for those smaller business that don’t have readily available occupational health and safety resources, and designed to help business owners, employers, employees and consumers implement science-backed procedures for limiting the spread of the coronavirus. They are subject to any local, state, or federal directives, laws, or orders about operating a business and should only be used if they do not conflict with any such orders. These documents are subject to revision and shall be updated accordingly.

AIHA makes no representations or warranties of any kind concerning its Copyrighted Material, either express or implied, including without limitation any implied warranties of merchantability, title, infringement or fitness for a particular purpose. AIHA shall be indemnified, defended and held harmless by all third parties and their directors, officers, agents, employees and assigns, and anyone authorized by any of them, from and against any and all claims, liabilities, losses and damages, including reasonable attorneys’ fees, caused by or arising wholly or in part from the use of the Copyrighted Material.
Exhibits for specific areas, items and locations

How to Move people to the project site or around the project site

Pool Vehicle Commuting spacings

Using a Bus to move employees or general public
Decision Tree

**COVID-19 | DECISION TREE**

Does the employee show any signs of COVID-19 illness (cough, fever, shortness of breath) or at least two of the following symptoms: chills, repeated shaking with chills, muscle pain, headache, sore throat, loss of taste or smell?

**YES**

Was the employee directly or indirectly exposed to a person, or attend an event with a confirmed case of COVID-19, within the last 14 days?

**NO**

Has the employee travelled internationally in the past 14 days?

**NO**

Did the employee encounter anyone traveling from another country?

**NO**

Did the employee encounter anyone traveling from a Level 3 country?

**YES**

SELECT ONE

- Has the employee had any direct contact with a confirmed case of COVID-19 (within 8 ft for prolonged period)?
- OR: Has the employee had indirect contact with a confirmed case of COVID-19 (Secondary or Tertiary Exposure)?

**HIGH RISK**

Employee is ASYMPTOMATIC

Self-quarantine for 14 days after the last potential exposure. No public activities, controlled travel. Update supervisor daily on condition. May return to work following the CDC How To Discontinue Home Isolation.

Employee is SYMPTOMATIC

Intermediate isolation under medical guidance. Contact local doctor/clinic to obtain reference for COVID-19 test. Update supervisor daily on condition. May return to work following the CDC How To Discontinue Home Isolation.

**MEDIUM RISK**

- Asymptomatic Primary Exposure Protocol: No Quarantine as long as asymptomatic. Most follow enhanced O&M and monitoring daily for 14 days, including temperature screening. Cold symptoms (e.g., cough, sneezing) may require a medical test. Wear a mask. Maintain social distancing of six feet, frequent hand washing.

- Self-isolation for a minimum of 14 days, contact local doctor/clinic to determine if medical evaluation is needed. If determined necessary, obtain reference for COVID-19 test. Update supervisor daily on condition. May return to work following the CDC How To Discontinue Home Isolation.

**LOW RISK**

- Secondary Exposure Protocol: No Quarantine as long as asymptomatic. If the primary exposure contact is positive for COVID-19, employee should follow Asymptomatic Primary Exposure protocol.

- Self-isolation for a minimum of 14 days, contact local doctor/clinic to determine if medical evaluation is needed. If determined necessary, obtain reference for COVID-19 test. Update supervisor daily on condition. May return to work following the CDC How To Discontinue Home Isolation.

**NO IDENTIFIABLE RISK**

Continue normal routines, be mindful of good hygiene practices.

Periodically scan this QR Code to check if any new versions of AIHA’s guidance documents have been posted, as well as to find guidance documents for other businesses and industries.
Communication

Posters that are visible through the workspace for general public and employees or as a quick take-away.

All images and posters are courtesy of ©M.C. Dean, Inc. (2020)