CONSIDERATIONS, CHECKLISTS, AND PROCEDURES FOR MANAGEMENT

Produced July 2020

by the Energy Smart Academy at Santa Fe Community College

with assistance from the Building Performance Association
NOT EVERYONE EXPOSED TO THE VIRUS SARS-COV-2 WILL CONTRACT COVID-19

SYMPTOMS

As many as half of the people infected with SARS-CoV-2 NEVER develop (or identify) symptoms. As a result, just because you, your co-workers, or your clients have no symptoms, does not mean you are not carrying the virus and are not infectious.

If someone is infected and going to present with symptoms, they usually present within 14 days.

Symptoms include: fever or chills, shortness of breath or difficulty breathing, cough, sore throat, congestion, fatigue, body aches, nausea or vomiting, diarrhea, and loss of taste or smell.

Symptoms differ depending on pre-existing health and age. Older populations experience more respiratory issues while younger, healthier adult populations experience more flu-like symptoms. Children present largely with gastrointestinal symptoms and are disproportionately likely not to be identified as carriers of the virus due to symptom-similarity to a variety of childhood illnesses.

The chances of developing Severe COVID-19 increase with age and presence of pre-existing conditions (including those that are currently undiagnosed).

TESTING

Active infection is identified by respiratory swab test -- a PCR or "molecular" test that identifies the virus's RNA reproducing in body's cells. These tests can have false negatives – meaning a person can test negative and still have the virus.

A positive respiratory swab PCR test means active infection and infectiousness. Anyone with a positive PCR test should self-isolate for at least 10 days, despite if they have no symptoms.

Prior infection is identified by testing for IgG antibodies present in the blood. These tests are not effective until 10-14 days after infection and the test itself gives no indication of WHEN the test subject was infected -- only that past infection took place -- and does not imply any future immunity to reinfection.

SARS-CoV-2 is transmitted primarily via respiratory droplets – when talking, breathing, eating, laughing, sneezing, singing, etc. – landing on someone else’s mouth, nose or eyes.

Transmission is most likely to occur during close contact: physical contact, close contact (within 6 feet for 10 minutes or more), shared environment (e.g., households, offices and restaurants), shared food and bathrooms, and shared beds.

Without any precautions taken, most active cases of SARS-CoV-2 will infect an average of 2-3 other people. With basic precautions, such as frequent hand-washing, wearing a face covering and physical distancing, that number can be reduced to 1 or less.

CONTACT TRACING

A person infected with SARS-CoV-2 starts being infectious 2 days before they first have symptoms (but they may not develop symptoms at all).

Infection lasts at least 10 days and patients are infectious the entire time.

SARS-CoV-2 carriers are determined to be no longer infectious at least 10 days after the onset of symptoms. They also must have improving symptoms and have gone at least 72 hours feverless without the aid of medication.

For those who never develop symptoms, 14 days after a positive respiratory swab PCR test they are considered to be no longer infectious.

If each infected person infects just 2 other people, by the 7th step of infection, over 100 people will be infected and at least 1 person will die. By the 20th step, the number of infected people is over 1 million and the death toll rises to 14,000.

Contact tracing works quickly to inform those who have been in close contact with someone who is COVID+ that there is potential they may be infected. This is important because, on average, there is a 3-day window between the time that Person 1 is infectious and passes the virus to Person 2 and the time Person 2 becomes infectious themselves. If Person 2 can self-isolate before they become infectious, they eliminate the risk of spreading the virus to others.
Have You Considered?

The list of information below, based on CDC, OSHA, NIBS, ISIAQ, NAEC, DOE, ASHRAE and NFPA guidelines, are protocols and procedures to review, establish and implement BEFORE returning employees to work.

Program Management:

► **Develop Pandemic Response or COVID-19 plan to include Infectious Disease Preparedness and Response Plan**

► **Appoint a COVID-19 Safety Officer or Point Person. Ensure that all employees know how to contact this person.**
  - Develop plan for PPE and cleaning supplies inventory
  - Develop plan for interaction with vendors, contractors, and suppliers
  - Consider providing work uniforms, or at least office laundry, for field employee clothing

► **Develop procedures for the following situations:**
  - Communicating and verifying daily health status of employees,
  - If employees present with symptoms outside of work,
  - If Office Staff presents with Symptoms while at Work,
  - If Field Employee presents with Symptoms while at work,
  - Deferral timelines for clients who present with symptoms before fieldwork,
  - If Client presents with symptoms during field work and may have exposed employees,
  - Symptomatic employee needs to be transported home or to a health-care facility either from the office or the field,
  - Operations need to shut down for several days to several weeks due to organizational or community outbreak of COVID-19

► Online training on PPE proper use and cleaning prior to re-entry into the field

► Implement flexible sick leave and other flexible policies and procedures, such as telework, if feasible

► Monitor absenteeism of employees and create a roster of trained back-up staff

► Develop a plan and protocol for collecting applications remotely and, in instances where remote applications are not plausible, identify and implement strict distancing protocols

► Determine exactly what cannot be done electronically and what absolutely must be done in person. Communicate with funders/partners that majority, if not all, documents will be electronic

► Develop a plan for field staff traveling to and from job sites, as well as how to allow clients to verify identify of workers and lunch and bathroom procedures for staff while in the field

► Determine diagnostics procedures to minimize spread -- will a house be pressurized or depressurized? Will assessor stand inside or outside during test?
Have You Considered?

Building Management:
- Do complete audit of HVAC system, making necessary improvements with regard to filtration and disinfection
- Ensure an adequate flow of fresh air must be provided and optimized. If possible, increase outdoor air ventilation and reduce recycled airflow. Consider running air handler all day.
- Flush the water systems of all buildings that have been shut down due to shelter-in-place orders. Stagnant water needs to be released and replaced with fresh utility water
- Test the system after flushing to determine whether disinfection is needed, checking every water-using device, including ice machines and decorative water features
- Refill all floor and sink traps
- Get rid of carpet
- Establish secure location outside of office for deliveries
- Set up intercom or video camera so that delivery people can alert you to new package arrivals
- Ensure continuous ventilation of bathrooms to outdoors via ducted fan – windows get closed when the weather gets unpleasant
- Consider installing waterless urinals, lids on toilets, and hands-free adaptive technologies for faucets and doors
- Reevaluate existing fire and emergency evacuation plans and relay new plan to team
- Avoid “cleaning and disinfecting” technologies beyond soap and water and EPA List N disinfectants. Ozone generators, hydrogen peroxide vaporizers, and upper room UVGI are designed for use in hospitals. Office spaces are an inappropriate application for these potentially hazardous technologies.

Cleaning and Disinfection:
- Develop cleaning and disinfection schedule for work areas, restrooms, job trailers, and vehicles with a systematic procedure that is tracked and publicized
- Consider PPE training as well as chemical safety training for cleaning staff
- Choose one disinfecting solution from EPA’s List N for a given room and stick with it. Do not mix isopropyl alcohol and hypochlorous solutions, or ammonia and chlorine solutions.
- Thoroughly clean all individual work stations at least once a week
- Ensure clean toilet and handwashing facilities
- Put hand sanitizer in strategic places around office, including at sign-in sheet and fill dispensers regularly
- Disinfect frequently touched items regularly
- Limit number of people allowed in communal bathrooms to one at a time
Have You Considered?

Office Flow:
► Encourage telework as much as possible, particularly for administrative and management tasks, as well as front-end home assessments and back-end inspections
► Get rid of the company coffee pot and water cooler-- breakroom/lunch room facilities should be pass-through only
► Move desks or cubicles to make larger walkways
► Tape arrows or lines on the floor for visual reminders
► Post signs to remind people not to congregate, particularly in "choke points" such as hallways, ingress and egress points
► Wear face protection (can be homemade) when circulating or communicating face to face, even while physically distancing and particularly for in-person meetings
► Post signs on how to stop the spread of COVID-19, properly wash hands, promote everyday protective measures and properly wear a face covering
► Limit occupancy of meeting rooms to no more than what comfortably allows 6’ between others and post signs with new occupancy limit (at least less than half of what it was before)
► Block/tape off chairs in waiting areas and meeting rooms to create physical barriers
► To the extent possible, screen all visitors in advance of their arrival on the job site for signs and symptoms of COVID-19 – consider taking non-touch temperature before entry is allowed
► In elevators and personnel hoists, ensure 6 feet distance between passengers in all directions and require face coverings

Communications and Data Management:
► Move client files to cloud servers in order to have up-to date files available to various staff
► Create and test communication systems for employees for self-reporting and notification of exposures
► Set up interoffice chat software to allow on-going conversations between staff to keep connected
► Encourage all levels of field workers to take digital photographs to document work on homes and minimize need for return visits
► Host meetings remotely, even when all participants are in the same office
► Create sign-in sheet for guests and delivery people, with space for date, name and phone number for contact tracing purposes. Scan sheet into digital files at the end of each day.
► Keep record of where crews are every day to facilitate OSHA recording and contact tracing.

Most importantly, model the behavior you want to see in your workplace. Set the example of how to interact and behave so that it’s clear and easy to follow.
Check with local health department for recommended procedures

Notify local health officials, staff and clients (if possible) immediately of a possible case while maintaining confidentiality as required by the ADA

Employee's space and any areas the employee may have been in contact with should be closed down for 24 hours

Inform co-workers who may have had close contact with employee and create opportunity to work from home and self-isolate

Send all employees who may have had even minimal contact with infected person for swab PCR testing, if available in your area

Open outside doors and windows, if possible, to increase air circulation in office spaces

Wait 24 hours before cleaning and disinfecting affected areas, including desk, vehicle, staff bathroom, tools and equipment

Don proper PPE and replace HVAC air filter

Ask employee with COVID+ test to speak with local health department and appropriate contact testing agency

Pass recorded work-related contact tracing information of any COVID+ workers along to local health department, with information about presumed levels of contact (time and proximity)

Check if infected employee and co-worker contacts have social support to get groceries, medication pick-up, etc. if needed during isolation (for those COVID+) or quarantine (for contacts).

Those who were not in contact with the employee may immediately and safely return to work after disinfection.

Be prepared to close for a few days if there is a case of COVID-19 in the workplace.

FROM OSHA’S ‘REVISED ENFORCEMENT GUIDANCE FOR RECORDING CASES OF COVID-19’ DATED 5/19/2020

“Per OSHA’s recordkeeping requirements, COVID-19 is a recordable illness, and thus employers are responsible for recording cases of COVID-19, if:

1. The case is a confirmed case of COVID-19, as defined by the CDC
2. The case is work-related as defined by 29 CFR Section 1904.5
3. The case involves one or more of the general recording criteria set forth in 29 CFR Section 1904.7

“Given the nature of the disease and ubiquity of community spread, however, in many instances it remains difficult to determine whether a COVID-19 illness is work-related, especially when an employee has experienced potential exposure both in and out of the workplace...In light of these considerations, OSHA is exercising its enforcement discretion in order to provide certainty to employers and workers.

“Recording a COVID-19 illness does not, of itself, mean that the employer has violated any OSHA standard...Pursuant to existing regulations, employers with 10 or fewer employees and certain employers in low hazard industries have no recording obligations.”

**Check with your local OSHA Compliance Officer to verify current recording requirements.**
As part of intake process, have clients sign documentation (digitally, if possible) saying that they will disclose if a member of their household develops symptoms and/or is tested COVID+ -- need not disclose which household member, but should include what date the symptoms first developed and positive test was taken.

Determine if work in home needs to be stopped or deferred, and for how long.

If feasible, communicate community resources available to affected client household, including information for local public health office to begin contact tracing, local grocery and pharmacy services, and other support organizations.

Determine which, if any, of your workers had "contact" with the infected household – i.e., was inside the home for at least 10 minutes and communicated directly with a member of the household, even with masks on.

Send any workers who had "contact" for immediate swab PCR test, if available in your area, and determine whether it is necessary for worker to self-quarantine.

Worker to stay at home while waiting for test results or for 14 days if no test is available

Implement work from home options, if possible, for affected workers.

Verify in files that any tools or equipment used in "infected household" were properly cleaned and disinfected before being transported to any additional houses or back to the warehouse that day.

Check back in with client after two weeks to determine if additional household members have gotten sick and when, and whether it is necessary to extend deferral, etc.
In and Around the Office – COVID-Safe Practices

Most important:

- Wash your hands often and thoroughly
- Keep your distance, at least 6 feet, from anyone not in your own household
- Don’t touch your face

General Protocols:

Know what to do if you start feeling symptoms

Know what to do if visitor is in building with symptoms or is later confirmed positive

Don’t congregate. This includes the lunch/break room and locker rooms

Wear face protection (can be homemade or surgical mask) when having face-to-face (physically distanced) conversations, or the entire day if preferred

Host meetings remotely, even when all participants are in the same office

Remind guests and delivery people to sign-in whenever they enter the office. Sheet should include space for date, name, and phone number for contact tracing purposes (see attachment). Put hand sanitizer by sign in sheet.

Establish secure location outside of office for deliveries. Consider setting up intercom or video camera so that delivery people can alert you to new package arrivals

Wash hands thoroughly after handling any deliveries/packages

Desk Maintenance:

Do NOT use isopropyl alcohol and hypochlorous solutions on the same surfaces! Choose one disinfecting solution and stick with it.

Wipe down desk with soapy cloth

- At the start of the day
- Before lunch
- After lunch
- At the end of the day

Do not share computers, phones or workspaces with co-workers

If you must share equipment, wear a face covering

Clean electronic equipment, such as landline and cell phones, keyboards and screens:

- Wipe with lightly dampened microfiber cloth with a 1:1 solution of water and isopropyl alcohol, or a pre-mixed hypochlorous solution
- Do NOT make cloth too wet! Lightly dampened is enough
- Do NOT mix solutions!
- Toothpicks or barely dampened cottons swabs can be used for small places (e.g., earbuds, keyboard)
In and Around the Office – COVID-Safe Practices

Tele-Communications with Clients:
Verify that client has method for signing documents digitally and can transmit documents via email or other non-contact method.

Be compassionate above all else. Stress levels are high, particularly among marginalized and vulnerable communities such as the low-income, elderly and disabled.

Listen to client concerns and make notes in digital file so that other employees can be aware of past interactions and potential issues that may arise.

Lunch Etiquette:
No large lunch tables and get rid of the company coffee pot and shared utensils.
Consider purchasing pre-packaged bamboo or compostable utensil packs for in-office use (and then start a composting program)
Consider outsourcing coffee needs to a local drive-through coffee shop.
If local shop is willing to use them, consider personalized reusable travel mugs (a lovely welcome-back gift for workers, to let them know you care)
Create small workspace in lunch room for prepping food
Wash hands thoroughly before prepping food
Clean high-touch points before and after prepping lunch, particularly if you’re the type that licks your fingers after stirring something
Wash reusable utensils immediately after use and before setting on horizontal surfaces – even if they are your own from home
At desk, move keyboard, mouse and any other vulnerable electronic equipment off to side and cover with cloth or paper towel
Don’t avoid talking to co-workers during lunch, but do keep distance. If you have to talk across the office, so be it.
Eat outside if and when you can, but keep physical distance of at least 6 feet!
Do not work through lunch. Maintain your sanity.

Office Maintenance:
Thoroughly clean individual workspaces once a week
Remove carpets in office where possible and, if desired, replace with washable area rugs
Launder area rugs regularly and in hottest water possible
For any washable fabrics/rugs, when dirty, place in sealable container until opportunity to launder
Nightly vacuuming with HEPA-filter equipped vacuum, then mopping with basic soap and water. Steam cleaning is ideal.
Communal Bathrooms:

Follow organization policy for bathroom use

At a bare minimum, when in bathroom:

   Have exhaust fan on the entire time you’re in the bathroom

Make sure lids are down on toilet before flushing

Wash hands thoroughly every time you go

Dry counter with paper towel to remove any pooling water

Wipe down high-touch and horizontal surfaces with disinfecting wipes

   Flush handles

   Stall door handles and door in general

   Bars for handicap accessibility

   Faucet handles

   Paper towel and disinfecting wipe dispensers

   Anywhere you may have put down personal items

Anywhere you might have breathed on a horizontal surface and someone else is likely to touch with their hands (i.e., not the floor)

Keep trash can by door

Open door with disinfecting wipe and toss it in the trash as you exit and leave the exhaust fan on

Ventilation and Filtration:

If minimal allergy issues, open windows to create airflow through the building

Do NOT open windows by parking areas, exhaust vents, or open windows of other offices

Portable air cleaners in individual offices are an option for at-risk individuals but must be verified not to produce ozone, cannot be shared around office and must always be cleaned as though contaminated

Spray disinfectants from EPA’s List N are designed to be used on surfaces, not in the air, and have long dwell times – do not use as air sprays. This is an inappropriate application for them and may exacerbate existing respiratory issues for co-workers.
Delivery Persons and Visitors, Please Sign In and Out

Unless you are payrolled staff that is expected to be in this office at least once per day, Please Sign In every time you come into the building. A valid contact number is requested in case COVID-19 contact tracing becomes necessary in the future.

Date: _____________________________

<table>
<thead>
<tr>
<th>Time In</th>
<th>Print Your Name</th>
<th>Contact Number</th>
<th>Company</th>
<th>Person/Department Visiting/Purpose</th>
<th>Time Out</th>
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<tr>
<td>8:52am</td>
<td>Juan Dominguez</td>
<td>505-000-1234</td>
<td>ABC Delivery</td>
<td>Certified Package</td>
<td>8:57am</td>
</tr>
</tbody>
</table>
Office Daily Checklist

Each Time You Enter the Office:

☐ Don face covering before entering office
☐ Wash Hands/use hand sanitizer upon arriving at office
☐ Wipe down cell phone
☐ If necessary, sign in/clock in
☐ Wipe down desk with soapy cloth
☐ Wipe down landline phone, keyboard and screen with damp microfiber cloth with a 1:1 solution of water and isopropyl alcohol OR a pre-mixed hypochlorous solution
☐ Keep face covering on at least until settled at your desk – can leave on all day if preferred
☐ Upon starting up computer at beginning of day, fill out and sign attestation form that you have no symptoms and, to the best of your knowledge, you have not been around anyone COVID+ within the last two weeks.
☐ Update your personal contact tracing file with those people/places where you’ve had contact since the last time you were in the office. Include phone numbers, if possible.

Throughout the Day:

☐ Use interoffice chat software to maintain conversations with co-workers
☐ Wear face covering whenever moving around the office
☐ Wash hands, consistently, especially after handling delivered packages or paperwork
☐ Limit face touching/scratching as much as possible

Lunch:

☐ Wipe down landline phone, keyboard and screen with damp microfiber cloth with a 1:1 solution of water and isopropyl alcohol OR a pre-mixed hypochlorous solution
☐ Maintain at least 6 feet physical distance from co-workers
☐ Clean high-touch points in food prep area before and after prepping lunch
☐ Wash reusable utensils immediately after use and before setting on horizontal surfaces
☐ If eating at desk, move keyboard, mouse and any other vulnerable equipment off to the side and cover with cloth or paper towel
☐ After lunch at desk, wipe down desk with soapy cloth and wash hands thoroughly
☐ If going to a restaurant, either for pick-up or sit-down, take note of restaurant’s phone number and approximate times you were there
☐ Remember to bring a face covering with you for while at restaurant
☐ Wipe down credit cards after transactions – avoid cash
☐ Follow steps listed above for Each Time You Enter the Office upon returning from restaurant

End of day:

☐ Gather personal belongings and set them safely away from the desk
☐ Wipe down desk with soapy cloth
☐ Wipe down landline phone, keyboard and screen with damp microfiber cloth with a 1:1 solution of water and isopropyl alcohol OR a pre-mixed hypochlorous solution
☐ Wear face covering as preparing to leave
☐ If necessary, sign out or clock out
☐ Wash hands thoroughly

Signature: ___________________________________________ Date: ____________________
Suggested Intake Questions

1. Are you comfortable having crews in and around your home/complex while wearing safety equipment?
2. Would you prefer your home/complex be deferred until such a time that the threat of COVID-19 has been deemed extremely low?
3. Have any occupants traveled across state lines in the last two weeks?
4. Do any occupants work in an environment that would regularly expose them to COVID-19 (e.g. hospital, respiratory clinic, testing facility)? *For MF, assume yes.*
5. Have you or any of the occupants been exposed to someone that has been confirmed positive COVID-19 within the last two weeks?
6. Are any occupants experiencing symptoms that are consistent with COVID-19 (fever or chills, cough, difficulty breathing, loss of taste/smell, nausea, congestion, fatigue or body aches, diarrhea)?
7. Can temperatures be taken of all members of the household/affected units the mornings that crews will be coming to do work?
8. Will you disclose if anyone (need not specify who) in the household or complex presents with a fever over 100.4 or any other COVID-19 symptoms at any point throughout work?
9. Does anyone in the household have any conditions that would place them in a high-risk category (client need not disclose condition)? *For multifamily, assume there will be high-risk occupants.*
   a. advanced age (over 65)
   b. lung diseases, particularly Chronic Obstructive Pulmonary Disease (COPD)
   c. serious heart conditions, such as heart failure, coronary artery disease or cardiomyopathies
   d. chronic kidney disease
   e. type 2 diabetes
   f. sickle cell disease
   g. immunocompromised, particularly from solid organ transplant
   h. obesity (BMI of 30 or higher)
10. Does anyone in the household have asthma or allergy issues that might be exacerbated by dust in the air? *Again, for MF, assume occupants with respiratory issues.*
11. Are you willing to remain in a separate location either within the house or in a different location entirely during work?
12. Is there space within the home or complex to maintain social distance? Are you open to crews setting up physical barriers in order to limit dust, etc (do not frame as trying to keep them out or hiding work)?
13. When crews arrive, would you rather they greet you (from a safe distance) with masks off? Or would you prefer they have masks on the entire time?
14. Can our crews have access to a sink, preferably the kitchen sink, to wash their hands throughout the visit?
15. In case of an emergency, are you comfortable with crew members using your bathroom?
16. Do occupants have access to a face covering and are they willing to wear them during any interaction with our crews?
17. If we provide face coverings, will occupants wear them?
18. Do you have access to the internet and a way to sign documents via the internet?
19. If we send you documents via the mail, can you ensure that they will be returned in no more than 2 weeks?
20. Do you have a way to take photos or video of your home/complex, if we provide you with examples?
21. Are you comfortable setting up a web meeting in order to show us around your home/complex?
22. Are you willing to help staff track visitors and inform staff when visitors arrive?
23. Are you willing to sign a waiver?
24. *If multifamily housing, are there vacant units that can be used for representative assessments?*
Assessment Considerations

Remote Options:
- How much of the assessment can be done remotely or, if Multifamily, in vacant units?
- Is the home/housing complex clear on Google Earth?
- Can client take photos or give walk-through of house via digital medium?
- Can any assumptions be made based on time period and style of the house?
- Limit time in client home by completing as much of the assessment remotely as possible
- Review agency and grantee pandemic response plan and check for updates, review Health and Safety Plan
- Has there been clear communication from the intake screener with all questions answered and documents signed?
- Organize material and supply lists for the work scope of each client file to ensure crews have everything needed before heading to jobs
- Do local vendors offer curbside pick-up or delivery to minimize trips to vendor? Ensure allowable substitutions have been identified

Via Telephone with Client Morning of Assessment:
- Verify to client that you are asymptomatic and, to the best of your knowledge, COVID negative
- Verify client preference, before you arrive, if client would rather initial greeting take place from appropriate 6-foot distance with masks off or masks on
- Ask if any occupants have had a change in COVID status since intake interview took place (have tested COVID+ via swab PCR test or presented with symptoms – client need not give names) and verify if it is safe to come to home for assessment THAT DAY
- If COVID status of occupants has changed, discuss rescheduling process and timeline with client

At the Home:
- Wash hands when arriving and when leaving and in between activities as needed
- Set up visitor contact tracing list with client
- Complete Job Hazard Analysis for any hazard encountered in the home noting what hazards must be dealt with before work can begin - should include client risk habits
- Defer client if necessary due to medical concerns
- Use situation-appropriate PPE at all times, including in attics, crawlspaces and basements
- Implement appropriate blower door procedures to minimize spread of contagion
- Reiterate client education that was conducted during intake interviews
- Emphasize during client education the need to keep ventilation fan operating at calculated settings
- Communicate to client (via telephone if necessary) that the assessment is finished and you will be leaving

Before Next House:
- Complete any notes for audit in online client file and upload images
- Communicate to management any client concerns
- Communicate to crew specific list of tools needed
- Communicate to crew list of visitors that were tracked
- Communicate to crew physical distancing bottlenecks such as tight spaces, potentially as part of Hazard Analysis

Signature of Assessor: _____________________________________________ Date: __________________
# JOB HAZARDS ANALYSIS

## Risk Assessment Code (RAC) Matrix

<table>
<thead>
<tr>
<th>Severity</th>
<th>Frequent</th>
<th>Likely</th>
<th>Occasional</th>
<th>Seldom</th>
<th>Unlikely</th>
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### JOB HAZARDS ANALYSIS

- **Date:**
- **Activity:**
- **Activity Location:**
- **Prepared By:**

### Risk Assessment Code (RAC) Matrix

<table>
<thead>
<tr>
<th>Job Steps</th>
<th>Hazards</th>
<th>Actions to Eliminate or Minimize Hazards</th>
<th>RAC</th>
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</table>
Field Work Checklist – Print as Many of this Page as Needed for List of Tasks, DO NOT Forget Second Page

Date: ____________________

Client File: _________________________________________

Team Member(s) / Vehicle Taken: ________________________________

Work Tasks for the Day: 1.

2.

3.

4.

<table>
<thead>
<tr>
<th>TASK #___:</th>
<th>PPE FOR TASK #___:</th>
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<tbody>
<tr>
<td><strong>TOOLS NEEDED</strong></td>
<td><strong>DISINFECTANT TO BRING</strong></td>
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<tr>
<td><strong>EQUIPMENT NEEDED</strong></td>
<td><strong>DISINFECTANT TO BRING</strong></td>
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</table>
Date: ______________________
Client File: ______________________________________
Vehicle Driver Name: _________________________________ (should match initials at bottom)

**VERIFY PPE AND CLEANING KIT:**

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<tr>
<th>Item</th>
<th>How many</th>
<th>Box(es) of Nitrile Gloves</th>
<th>Item</th>
<th>How many</th>
<th>Dish Pan(s)</th>
<th>Item</th>
<th>How many</th>
</tr>
</thead>
<tbody>
<tr>
<td>N-95 Respirators</td>
<td></td>
<td></td>
<td>Face Shields</td>
<td></td>
<td></td>
<td>Dish Pan(s)</td>
<td></td>
</tr>
<tr>
<td>Full-face Respirators</td>
<td></td>
<td></td>
<td>Water Containers Full</td>
<td></td>
<td></td>
<td>Hand soap</td>
<td></td>
</tr>
<tr>
<td>Respirator Cartridges</td>
<td></td>
<td></td>
<td>Eye Protection</td>
<td></td>
<td></td>
<td>Disinfecting Wipes</td>
<td></td>
</tr>
<tr>
<td>Eye Protection</td>
<td></td>
<td></td>
<td>Tyvek Suits</td>
<td></td>
<td></td>
<td>Work Gloves</td>
<td></td>
</tr>
<tr>
<td>Work Gloves</td>
<td></td>
<td></td>
<td>Booties</td>
<td></td>
<td></td>
<td>Hard Hats</td>
<td></td>
</tr>
<tr>
<td>Hard Hats</td>
<td></td>
<td></td>
<td>Fall Harness</td>
<td></td>
<td>Five Gallon Buckets x 2</td>
<td>Booties</td>
<td></td>
</tr>
<tr>
<td>Knee Pads</td>
<td></td>
<td></td>
<td>Sealable Laundry Containers</td>
<td></td>
<td></td>
<td>Paper Bags</td>
<td></td>
</tr>
<tr>
<td>Ear Plugs</td>
<td></td>
<td></td>
<td>Paper Bags</td>
<td></td>
<td></td>
<td>Pre-cut Plastic Sheeting or Towels</td>
<td></td>
</tr>
<tr>
<td>Zip Walls?</td>
<td></td>
<td></td>
<td>Plastic Timer</td>
<td></td>
<td></td>
<td>Batteries working?</td>
<td></td>
</tr>
<tr>
<td></td>
<td></td>
<td></td>
<td>Hand soap</td>
<td></td>
<td></td>
<td>Paper Towels</td>
<td></td>
</tr>
</tbody>
</table>

Any supplies low? ________________________________________________________________

Low supplies reported to: __________________________________________

I verify that all necessary tools, equipment, supplies and cleaning have been gathered and are in the vehicle to be used today. _______ (Initial)

**THREE FINAL CHECKS:**

Has client been called to verify household is asymptomatic? _______ Who called? _________________________

Has client requested workers greet them with masks on or off? __________

If interior work, will occupants self-isolate or will physical barriers be needed? __________
Inspection Considerations

Remote Options:

- How much of the inspection can be done remotely or, if Multifamily, in vacant units?
- Is the home/housing complex clear on Google Earth?
- Did crew take and upload photos of work throughout the process?
- Do crew photos verify that COVID-19 Safe Work Practices were maintained throughout work?
- Can client take photos of any missing details via digital medium?
- Limit time in client homes by completing as much of the inspection remotely as possible.
- Review agency and grantee pandemic response plan, Health and Safety Plan, and check for updates
- Verify that funders will accept digital forms and reports

Via Telephone with Client:

- Has there been clear communication with the client throughout the work process – from intake to assessment to field work – with all questions answered?
- Gather client’s visitor contact tracing list information (either via dictation over the phone or via email – keep in digital format attached to client file)
- Ask if any occupants have had a change in COVID status since field work took place (have tested COVID+ via swab PCR test or presented with symptoms – client need not give names) and verify if it is safe to return to home for inspection, if necessary
- If COVID status of occupants have changed, narrow down dates for when occupants first presented with symptoms or tested positive (via swab PCR test) and, if within two weeks of when crews were onsite, determine if field crew may have been exposed
- Alert COVID-19 Point Person if assessor and/or crew may have been exposed

At the Home:

- Defer inspection if necessary due to medical concerns
- Wash hands when arriving and when leaving and in between activities as needed
- Verify that issues found in initial Job Hazard Analysis were remediated as necessary and possible
- Use situation-appropriate PPE at all times, including in attics, crawlspace and basements
- Implement appropriate blower door procedures to minimize spread of contagion
- Emphasize the need to keep ventilation fan operating at calculated settings

Before Next House:

- Communicate to client (via telephone if you are not indoors) that you are leaving the premises
- In addition to cleaning and disinfecting tools and equipment, complete any notes for inspection in online client file and upload images
- Communicate to management any client concerns

Signature of Inspector: _______________________________ Date: __________________
Sources for COVID-19 Handouts

COVID-19 Fact Sheet for Workers and Clients

Johns Hopkins Coronavirus Resource Center, COVID-19 Case Tracker https://coronavirus.jhu.edu


Have You Considered – Management Checklist


CDC’s NIOSH National Personal Protective Technology Laboratory updated content
https://www.cdc.gov/niosh/npptl/default.html

ASHRAE’s COVID-19 Preparedness Resources https://www.ashrae.org/technical-resources/resources


International Society of Indoor Air Quality and Climate (ISIAQ) Webinar Series: Spread of Infectious Diseases in Indoor Environments https://www.isiaq.org/webinars.php

Healthy Indoors Show, March and April episodes https://healthyindoors.com/healthy-indoors-show/


OFFICE DAILY CHECKLIST AND OFFICE PROCEDURES


International Society of Indoor Air Quality and Climate (ISIAQ) Webinar Series: Spread of Infectious Diseases in Indoor Environments https://www.isiaq.org/webinars.php

Healthy Indoors Show, March and April episodes https://healthyindoors.com/healthy-indoors-show/

Peccia J, Zulli A, Brackney DE, et al. SARS-CoV-2 RNA concentrations in primary municipal sewage sludge as a leading indicator of COVID-19 outbreak dynamics (not yet peer-reviewed) https://doi.org/10.1101/2020.05.19.20105999

**SUGGESTED INTAKE QUESTIONS**

Johns Hopkins University, Bloomberg School of Public Health, Coursera.org COVID-19 Contact Tracing Course. 

Centers for Disease Control and Prevention, updated content. 

Johns Hopkins Coronavirus Resource Center, COVID-19 Case Tracker 
https://coronavirus.jhu.edu

New England Journal of Medicine, updated content. 
www.nejm.org/coronavirus

**ASSESSMENT CONSIDERATIONS AND INSPECTION CONSIDERATIONS**

Olson R, Tajima MM. Remote Energy Assessments during a Pandemic and Beyond. Oral presentation for: National Home Performance Conference; April, 2020; online. 
https://events.building-performance.org

https://events.building-performance.org

https://events.building-performance.org

https://events.building-performance.org

**PREP FOR FIELD WORK CHECKLIST**

CDC’s Cleaning and Disinfecting Your Facility 


OSHA’s COVID-19 – Control and Prevention/Construction Work updated content 
https://www.osha.gov/SLTC/covid-19/construction.html

DOE WAP Memorandum 062, Weatherization Assistance Program’s Response to Guidelines for Opening Up American Again – Phase One & Frequently Asked Questions (FAQs) 
https://www.energy.gov/sites/prod/files/2020/05/f75/wap-memo-062.pdf

NASCSP’s COVID Considerations for Fieldwork 

CLIENT HOME PROCEDURES

COVID-19 CONTRACTED CHECKLIST

OTHER RECOMMENDED RESOURCES
National Association of County and City Health Officials: https://www.naccho.org/membership/lhd-directory to find your local public health office
COVIDExitStrategy.org, How We Safely Reopen: https://www.covidexitstrategy.org/ to monitor your state’s readiness to be reopened based on White House and CDC criteria
COVIDActNow.org, America’s COVID Warning System: https://www.covidactnow.org/?s=58173 to monitor your state’s risk level based on 4 criteria. Can be broken down by county.
COVID Reproduction Rates by state (R_t): https://rt.live/ to monitor your state’s COVID reproduction rate. Anything over R_t=1.0 means the virus is spreading in your state.