

# **Pandemic Social Distancing and Daily Health Monitoring Implementation Guidelines for Department of the Interior (DOI) and Work Locations**

**Version 2 – 5/27/20**

The following guidelines provide for Pandemic Social Distancing and Daily Health Screening implementation in DOI work places. These guidelines are based on current Centers for Disease Control and Prevention (CDC) and Occupational Safety and Health Administration (OSHA) best practices to minimize risk of coronavirus transmission as employees return to the workplace. This guidance makes recommendations on social distancing measures and daily screening of employee health prior to reporting for duty for those employees physically returning to the workplace where contact with other people is likely. This memo serves as a national guide. Leaders in local DOI work locations should exercise discretion to develop action plans based on Federal and State guidance on reopening and based on specific conditions at each site. These guidelines may be updated as new information is learned about the transmission of COVID-19.

For General Services Administration (GSA) owned and leased facilities, GSA is authorized to make facility-level status decisions for Federally owned or leased buildings under the GSA's authority. DOI facility managers (i.e., Designated Officials) at these locations should work with their GSA representative, lessor, and, if necessary, co-tenants in the case of multi-tenant buildings to determine specific building protocols. The Designated Official is usually the chair of the building's Facility Security Committee (FSC) or the individual responsible for the overall operation of a facility. If you are unsure of who your Designated Official is for your facility, contact the GSA representative for your building.

**1. Appropriate Number of Staff at the Work Location.** Each DOI work location should continue to commit to the presence of the appropriate on-site staff required to accomplish daily tasks and the mission of the Department and individual bureaus. Supervisors may continue to use strategies such as staggered shifts and alternate work schedules for worksite social distancing. An emphasis should be placed on establishing the necessary personnel to be physically present on-site to accomplish DOI and bureau missions. Remaining personnel should follow Bureau plans phased approach for teleworking/working remotely and returning to duty stations consistent with DOI guidance including:

[https://www.doi.gov/sites/doi.gov/files/elips/documents/alternative\\_work\\_schedules.pdf](https://www.doi.gov/sites/doi.gov/files/elips/documents/alternative_work_schedules.pdf).

## **2. Health Monitoring of the Work Force.**

2.1. **Participation in a Self-Monitoring Program.** Participation in a daily self-monitoring program is encouraged for all DOI employees before reporting to work each day. Employees should follow the current CDC guidance to monitor for symptoms of and potential exposure to the COVID-19 virus, listed on the CDC website,<sup>1</sup> and are encouraged to use the [CDC Self-Checker](#) (for non-critical infrastructure workers) to help them make decisions and seek appropriate care.

---

<sup>1</sup> <https://www.cdc.gov/coronavirus/2019-ncov/symptoms-testing/symptoms.html>

2.2. Scope. This self-monitoring program only applies to DOI employees who are physically returning to a DOI workplace where contact with other people is likely.

2.3. Participation in a Self-Monitoring Program. Every employee as defined in 2.2 who is physically reporting to a duty station where contact with other people is likely, should conduct daily self-monitoring for symptoms of COVID-19 using the [CDC symptom webpage](#) prior to departing their home and should regularly monitor for symptoms throughout the workday. If additional assistance is needed for decision making, employees (non-critical infrastructure workers) are encouraged to utilize the [CDC Self-Checker](#).

2.4. Self Monitoring Results. An employee as defined in 2.2 should use the information from the daily self-monitoring program to determine if they should physically report to a duty station where contact with other people is likely or should consult with a health care provider for advice and guidance.

2.4.1. Any non-critical infrastructure worker should not physically report to the workplace if they are experiencing symptoms of COVID-19 or have had recent close contact with someone who has a suspected or confirmed case of COVID-19. The employee should coordinate with their supervisor and pursue telework flexibilities or leave options in accordance with Departmental policies.

2.4.2. Critical infrastructure workers (e.g. firefighters, law enforcement officers, etc) who are experiencing symptoms of COVID-19 should not report to work. Critical infrastructure workers may continue to work as long as they remain asymptomatic, self-monitor for symptoms before and during work, and follow appropriate precautions in accordance with CDC Guidance –Safety Practices for Critical Infrastructure Workers. <https://www.cdc.gov/coronavirus/2019-ncov/community/critical-workers/implementing-safety-practices.html>. If a DOI employee is unsure if they are considered a “critical infrastructure worker” they should consult their supervisor.

2.4.3. Employees do not need to record or submit the results of their daily self-monitoring. The Department will neither request nor retain copies of the self-monitoring. Supervisors will not record any results of employee self-monitoring results, and employees will record appropriate entries for work (including telework) and leave in Quicktime.

2.5. Workplace Awareness. Employees should be alert for the appearance of symptoms consistent with COVID-19 as most recently defined by the CDC: currently listed as cough, shortness of breath or difficulty breathing, fever, chills, muscle pain, sore throat, new loss of taste or smell (<https://www.cdc.gov/coronavirus/2019-ncov/symptoms-testing/symptoms.html>). Employees should follow [CDC’s self-isolation and discontinuation of isolation guidelines](#) and should not be present in the workplace until they have recovered (per CDC guidance: At least 3 days (72 hours) have passed since recovery defined as resolution of fever without the use of fever-reducing medications and improvement in respiratory symptoms (e.g., cough, shortness of breath); and, at least 10 days have passed *since symptoms first appeared*. Managers and supervisors should: (1) advise/encourage sick employees to leave the workplace; (2) work with the employee to extend telework and leave flexibilities in accordance with Departmental

policies; (3) work with their local safety managers for any additional steps that may need to be taken consistent with DOI guidance, including asking an employee to leave the workplace, and (4) Follow [CDC's guidelines](#) for cleaning and disinfection after a suspected or confirmed case has been present in the workplace.

2.6. Return to Work. During the period of this Pandemic, the CDC has requested that whenever possible, offices and duty stations not require an individual to obtain a doctor's note to return to the workplace after resolution of their symptoms, but to rely upon the individual's assurance that they have met CDC's return to work criteria, and consulted with their primary care provider. This request is based on the need to diminish burdens on medical resources for verification of fitness to return to duty. Although employers are permitted to require a doctor's note certifying an employee's fitness for duty when returning to work, DOI aligns with CDC's guidance that employees with suspected/confirmed COVID-19 should not be required to provide a COVID-19 test result or a healthcare provider note to validate their illness, qualify for sick leave, or to return to work.

### **3. Maintain Social Distancing Standards.**

3.1. Social Distancing Generally. The CDC guidance includes a primary objective of disease mitigation through good hygiene, staying home when sick, and social distancing. Social distancing is a set of actions taken to stop or slow the spread of a highly contagious disease. The CDC has determined that social distancing is an essential step in preventing the spread of COVID-19. The goal of social distancing is to limit face-to-face contact to decrease the spread of illness among people in community settings. Employees should practice social distancing by putting space (currently six feet) between themselves and others.

3.2. Determine Maximum Occupancy of Each Work Location. Each work location should determine the maximum number of individuals that can safely occupy a particular indoor workspace without exceeding social distancing standards and consistent with any occupancy limits established by States in their reopening plans. This number will be the maximum allowable number of individuals in a particular workspace and could change over time if social distancing recommendations are altered or eliminated. Work locations in larger outdoor spaces, such as employees engaged in field work may not require such a calculation; however social distancing should be maintained.

3.2.1. Limit Occupancy. Visitors that exceed the maximum occupancy for the space should not enter the space. Any waiting area should also be structured to limit aggregation of people to avoid crowding and maintain social distancing. Waiting areas should have suitable floor markings to facilitate social distancing.

3.2.1.1. Occupancy guidelines may make allowances for those brief circumstances where close quarters will not allow for full social distancing (e.g., access to equipment or uniform storage areas during a personnel shift change). Use of cloth face coverings in these situations is highly encouraged.

3.2.1.2. Work locations with limited space for employees to participate in shift breaks or meals may need to explore use of alternative spaces or staggered times to promote adherence to social distancing guidelines during these times.

3.3. Use of Telework and Staggered Schedules. Staff at work locations that exceed the maximum occupancy standard described in Section 3.1 should operate in telework status. Staff may be rotated between telework and on-site status, or individual staff arrival and departure hours may be staggered, as determined by work location supervisors in coordination with the Designated Official for the DOI facility, where applicable.

3.4. Employee Gatherings. Each work location should evaluate activities that may cause individuals to congregate and take preventative measures to avoid or limit such activities where social distancing cannot be maintained. Staff meetings should conform to social distancing requirements or should be modified to occur through mitigation measures such as teleconferences. Areas typically used for informal staff gatherings, such as coffee or kitchen locations, break rooms, etc. should be modified or monitored to prevent crowds.

3.5. Avoid Crowding at Dining Facilities. Each work location should consider regulating business practices related to mealtimes and other breaks. These should be staggered throughout the day rather than at socially conventional times, such as 12 PM to 1 PM. If able, staff should be encouraged to bring food from home or use 'grab and go' options to promote dining at their assigned workstations. Facility managers should encourage frequent cleaning and proper food storage of these areas. These measures are intended to minimize assembly of individuals at locations such as dining facilities.

3.5.1. Seating areas at dining facilities may need to be marked to guide diners to appropriate appropriately distanced seating locations and/or have furniture rearranged or removed.

3.6. Avoid Communal Food and Beverage Stations. Each work location should evaluate office food and beverage procedures generally. Communal coffee and water dispensers should be avoided. Communal meal platters and food from employees intended for office sharing should also be avoided. Self-service, commonly shared utensils, plates, cups, etc. should be removed. Examples of good practices to minimize use of shared bulk containers include sealed, single serving packets of sweeteners, creamers, condiments, etc. Staff should be encouraged to utilize their own personal utensils, plates, cups, etc.

3.7. Modify Indoor Office Layouts and Flow Patterns. Each indoor office should consider altering the physical layout of workstation spaces, where possible and economically prudent, to maximize six-foot distancing between employees, and visitors. Additionally, indoor offices should reassess office flow patterns to limit intra-office and visitor traffic as much as possible. Selective removal of furniture may be helpful to minimize circumstances where individuals are seated too close together. Any physical alteration of workspace should be closely coordinated with facility and safety managers. Where modifications are not prudent or impermissible employees should be encouraged to utilize cloth face coverings.

3.7.1. Seating. Where possible consider reducing or rearranging lounge and common space capacity to encourage social distancing.

3.7.2. Signage. Post signage encouraging hand washing, hand sanitizing and wiping down of surfaces in high traffic, shared spaces (e.g., elevator lobbies, community desk, pantry, nooks, meeting rooms, restrooms, phone booths). Public space signage should be coordinated with each facility's Designated Official, where applicable.

3.7.3. Plexiglass Shields Physical Barriers, and Communal Land Lines. While not required, an example of engineering controls to reduce potential virus exposure where social distancing cannot be facilitated, involves placement of a "sneeze guard" like a transparent plastic or plexiglass barrier at the point of entry between visitors and forward-facing staff (i.e., those whose jobs necessitate public interaction). A floor marking indicating a six-foot standoff from the forward-facing employee, or a pair of floor stanchions with cord suspended between them are other alternatives. This will help to reduce the risk of virus transmission from speaking, sneezing, or coughing.

3.7.4. Other Mitigation Measures. There may also be locations where Plexiglass barriers are not practical and thus cannot be used. Utilize the job hazard analysis process and consider other mitigation strategies to meet the need of the particular task. Encourage cloth face coverings in these situations where social distancing cannot be achieved.

3.7.5. Cleaning. Each work location should create an overall cleaning schedule that is consistent with CDC cleaning recommendations including using Environmental Protection Agency (EPA) recommended cleaning and disinfecting solutions (<https://www.cdc.gov/coronavirus/2019-ncov/community/disinfecting-building-facility.html>). Additionally, employee workstation configurations should accommodate simplified cleaning measures wherever possible. For example, desktops should be free of clutter (devices, memorabilia, photographs, etc.).

3.7.6. Ventilation. Designated officials at each indoor facility should consult with building engineers and their servicing safety office/manager to assess their ventilation systems to determine if any air circulation mitigation is advisable per CDC and OSHA guidance (<https://www.osha.gov/Publications/OSHA3990.pdf>) for building ventilation systems.

3.8. Encourage Use of Cloth Face Coverings. CDC recommends wearing cloth face coverings in public settings where other social distancing measures are difficult to maintain, especially in areas of significant community transmission. Cloth face coverings may prevent people who do not know they have the virus from transmitting it to others. CDC does not recommend the general public wear surgical masks or N-95 respirators to protect themselves from respiratory diseases, including coronavirus (COVID-19). N-95s and other filtering facepiece respirators should continue to be reserved for those at increased risk of exposure including health care workers and other medical first responders, as recommended by current CDC guidance and a job hazard analysis.

3.8.1. Appropriate Personal Protective Equipment (PPE). Cloth face coverings are not respirators and are not appropriate substitutes where filtering facepiece respirators are required. Employees

who are performing tasks at elevated risk requiring respirators as identified through the job hazards analysis will be provided with the appropriate Personal Protective Equipment (PPE) to perform their jobs safely.

3.8.2. Encouraged Use. Use of a cloth face covering is voluntary at DOI work locations, but the use of cloth face coverings should be encouraged at all times when social distancing cannot be maintained.

3.8.3. While DOI emphasizes the importance of using cloth face coverings when social distancing cannot be maintained, there are some work circumstances in which cloth face coverings are not practical and could interfere with communication or the safe performance of a job. For example, some arduous and hazardous work functions (such as digging fire line, climbing towers, taking the Wildland Fire pack test) that increase physiologic or thermal stress could be hindered by use of cloth face coverings, leading to difficulty breathing, increased cardiovascular strain, and increased risk of heat stress. In such instances, supervisors should consult with their local safety officer to assist in addressing whether safety concerns outweigh the potential preventive benefits of a cloth face mask.

3.9. Job Hazard Analysis. To determine mitigation strategies for individual jobs that may be at risk of exposure to COVID-19, a job hazard analysis should be completed and appropriate mitigations considered using the mitigation guidance on the [DOI employee COVID-19 information portal](#).

**4. Visitors**. Signage should be posted at entrances and highly trafficked areas notifying the public that some facilities have limited staffing during reopening and directing visitors to adjust their expectations. Signage should also strongly encourage visitors to: (1) wash hands frequently with soap and water or use hand sanitizer upon entry and prior to departure, and (2) utilize a cloth face covering for the duration of their visit when social distancing cannot be maintained. Use of a cloth face covering is voluntary, but highly recommended, and may be mandated by some State plan requirements. Any visitor who refuses to follow the social distancing guidelines may be asked to leave the facility or come into compliance with recommendations.

4.1. Encouraged Use of Cloth Face Coverings. The recommended use of cloth face coverings when social distancing cannot be maintained applies to DOI employees, contractors, volunteers and visitors.

4.2. Visitors who chose not to wear a cloth face covering should be encouraged to follow the social distancing guidelines, no physical contact with staff, appropriate use of hand cleansing, and cough etiquette. If social distancing of six feet or more is not possible for meetings and/or visits, meetings and visits should instead occur via phone or video conference.

4.3. Visitors exhibiting or reporting COVID-19 symptoms (i.e., cough or shortness of breath or difficulty breathing fever, chills, muscle pain, sore throat, new loss of taste or smell) should be encouraged through notice and signage to leave the facility and reschedule their meeting/visit for a future time when they are in good health.

4.4. Signage. DOI work locations/facilities should clearly post visible signage regarding these requirements at primary points of entry and other highly trafficked areas.

4.5. Enforcement Actions. DOI employees and contractors are not authorized to take enforcement actions (beyond politely reminding the visitors of social distancing guidelines) regarding cloth face coverings. If a visitor, contractor, employee, or any other individual is not adhering to a specific work location policy, a supervisor should be alerted, and, in the event a life-threatening hostile situation develops, security should be alerted.