

**Addendum: Standard Operating Guidelines (SOG)  
COVID-19 Exposure & Risk Mitigation**

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**References**

- [OSHA’s COVID-19 Guidance](#)
- [CDC guidance: Emergency Response](#)

## Definitions

*Confirmed/Suspect COVID-19:* A person who has tested positive for COVID-19 or a person who satisfies epidemiological and clinical criteria.

*Close Contact:*

a) being within approximately 6 feet of a COVID-19 case for a prolonged period of time; close contact can occur while caring for, living with, visiting, or sharing a healthcare waiting area or room with a COVID-19 case – or –

b) having direct contact with infectious secretions of a COVID-19 case (e.g., being coughed on)

*Isolation:* Separates sick people with a contagious disease from people who are not sick.

*Mission critical personnel:* Those that execute functions that are designated by CTCLUSI for the purposes of maintaining continuity of essential or critical government operations. This applies to personnel that 1) perform essential duties related to the protection of life and property; or 2) maintain systems or equipment operation, maintenance, or inspections of those systems or equipment that are integral to security, safety, or proper functioning of the mission.

*Quarantine:* Separates and restricts the movement of people who were exposed or potentially exposed to a contagious disease to see if they become sick.

## Purpose

To provide guidance for staff health, safety, and risk management in planning, preparing for, and responding to potential spill incidents where the risk of exposure to COVID-19 exists. The overarching goal is to develop risk assessment and control processes relevant to the specific tasks and duties performed by CTCLUSI spill response personnel to allow for the safe execution of mission essential support during the COVID-19 pandemic. We must also take into account the potential for measures designed to limit exposure/spread such as social distancing to last for an extended/indeterminate length of time.

Ensuring worker and public health and safety is always the highest priority and the safety of CTCLUSI management will always be a consideration on when and how we respond or plan for mission essential travel. We must thoughtfully manage our resources in a way that aligns with our desired outcome of slowing the transmission of COVID-19. This aggressive posture may affect operations as we work to balance the needs of mission-critical work and greater social distancing.

This interim guidance has been developed and shared quickly in order to address pandemic conditions. This document contains information and recommendations based upon publications and evidence-based approaches from the U.S. Centers for Disease Control and Prevention (CDC), Occupational Safety and Health Administration (OSHA), and best practices from other agencies and industry partners. However, the decision on how and whether to travel or respond to an environmental emergency during the pandemic must be made on a case by case basis and this document should inform but not replace Tribal administrative, department, team, and individual decision-making.

## Hazard Description

This addendum addresses CTCLUSI’s plan to protect employees from exposure to COVID-19 during spill response field activities, as well as traveling to and from job sites. This addendum outlines proper hygiene, social distancing, and decontamination procedures. The virus causing COVID-19 is called SARS-CoV-2. Knowledge surrounding viral risk, transmission, diagnostics and immunity continues to evolve.

## Symptoms

We now know from recent studies that a significant portion of individuals with coronavirus lack symptoms (“asymptomatic”) and that even those who eventually develop symptoms (“pre-symptomatic”) can transmit the virus to others before showing symptoms.<sup>1</sup> This means that the virus can spread between people interacting in close proximity—for example, speaking, coughing, or sneezing—even if those people are not exhibiting symptoms.

Data suggests that symptoms may appear in as few as 2 days or as long as 14 days after exposure to the virus that causes COVID-19. Symptoms can include fever, cough, difficulty breathing, and shortness of breath. Some people infected with the virus have reported experiencing other non-respiratory symptoms. Emergency warning signs include trouble breathing, persistent pain or pressure in the chest, new confusion or inability to arouse, and bluish lips or face.

## Transmission

How easily a virus spreads from person-to-person can vary. Some viruses are highly contagious, like measles, while other viruses do not spread as easily. Information from the ongoing COVID-19 pandemic suggests that this virus is spreading more efficiently than influenza, but not as efficiently as measles, which is highly contagious.

COVID-19 is thought to spread mainly from person-to-person via respiratory droplets among close contacts. Respiratory droplets<sup>2</sup> are produced when an infected person coughs, sneezes or talks and can land in the mouths or noses, or possibly be inhaled into the lungs, of people who are within close proximity. It is important to remember that COVID-19 can most likely be spread by asymptomatic people who are not showing symptoms.

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<sup>1</sup> The onset and duration of viral shedding and period of infectiousness for COVID-19 are not yet known. It is possible that SARS-CoV-2 RNA may be detectable in the upper or lower respiratory tract for weeks after illness onset, similar to infection with MERS-CoV and SARS-CoV. However, detection of viral RNA does not necessarily mean that infectious virus is present. Existing literature regarding SARS-CoV-2 and other coronaviruses (e.g. MERS-CoV, SARS-CoV) suggest that the incubation period may range from 2–14 days.

<sup>2</sup> Respiratory infections can be transmitted through droplets of different sizes: when the droplet particles are >5-10 µm in diameter they are referred to as respiratory droplets. According to current evidence, COVID-19 virus is primarily transmitted between people through respiratory droplets and contact routes. The immune response to COVID-19 is not yet understood. Patients with MERS-CoV infection are unlikely to be re-infected shortly after they recover, but it is not yet known whether similar immune protection will be observed for patients with COVID-19 (CDC).

Airborne transmission refers to the presence of microbes within droplet nuclei (generally considered to be particles  $<5\mu\text{m}$  in diameter) which can remain in the air for long periods of time and be transmitted to others over distances greater than 1 meter. However, in an analysis of 75,465 COVID-19 cases in China, airborne transmission was not reported.

Spread of the virus may also come from contact with contaminated surfaces or objects. Transmission of the virus can occur when a person touches a surface or object (e.g. writing utensil, computer keyboard) that has the virus on it and then touches their own mouth, nose, or possibly their eyes.

Currently no COVID-19 vaccine or measure exists outside of non-pharmaceutical interventions aimed at “flattening the curve”. However, it is critical to note that these interventions do not appear to work well, historically or in computer models, if isolation or social distancing policies are not well implemented or adhered to. This posture is difficult given the nature and interaction a typical response or project dictates. Therefore, consideration of all possible exposure risk will be taken prior to mission essential travel.

## Personal Protective Equipment

Recommendations for PPE specific to occupations or job tasks may change depending on geographic location, updated risk assessments for workers, and information on PPE effectiveness in preventing the spread of COVID-19. Examples of PPE include:

- Gloves
- Goggles
- face shields
- face masks
- respiratory protection, when appropriate
- Tyvek suit

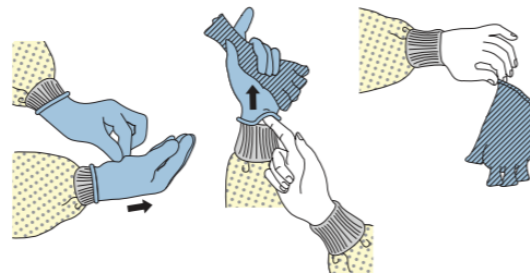
Cloth facial covering to cover the nose and mouth should be worn in public settings or around others where other social distancing measures are difficult to maintain.

Wear nitrile gloves to minimize the spread of COVID-19 from shared surfaces in situations where contact to surfaces is limited to one physical location. Do not wear or reuse the same gloves in multiple physical locations or facilities.

## Wearing and Removing Gloves and Face Coverings

### 1. GLOVES

- Outside of gloves are contaminated!
- If your hands get contaminated during glove removal, immediately wash your hands or use an alcohol-based hand sanitizer
- Using a gloved hand, grasp the palm area of the other gloved hand and peel off first glove
- Hold removed glove in gloved hand
- Slide fingers of ungloved hand under remaining glove at wrist and peel off second glove over first glove
- Discard gloves in a waste container



## 4. MASK OR RESPIRATOR

- Front of mask/respirator is contaminated — DO NOT TOUCH!
- If your hands get contaminated during mask/respirator removal, immediately wash your hands or use an alcohol-based hand sanitizer
- Grasp bottom ties or elastics of the mask/respirator, then the ones at the top, and remove without touching the front
- Discard in a waste container



## Donning and Doffing Tyvek Suits

### Remember:

- PPE should be in place before entering area where physical distancing cannot be practiced
- PPE should be removed slowly and deliberately in a sequence that prevents self-contamination.

**Donning (putting on the gear):** *More than one donning method may be acceptable.*

1. **Identify and gather the proper PPE to don.**
2. **Perform hand hygiene:** wash hands or use hand sanitizer.
3. **Put on cloth facial covering, surgical mask, or N95 filtering facepiece respirator** (If the mask has a nosepiece, it should be fitted to the nose with both hands, not bent or tented. Do not pinch the nosepiece with one hand. Cloth facial covering/Respirator/facemask should be extended under chin. Both your mouth and nose should be protected. Do not wear respirator/facemask under your chin or on top of head in between uses.
  - » **Respirator:** Respirator straps should be placed on crown of head (top strap) and base of neck (bottom strap).
  - » **Facemask:** Mask ties should be secured on crown of head (top tie) and base of neck (bottom tie). If mask has loops, hook them appropriately around your ears.
4. **Perform hand hygiene before putting on gloves.**

**Doffing (taking off the gear):** *More than one doffing method may be acceptable. Below is one example of doffing.*

1. **Remove gloves.** Ensure glove removal does not cause additional contamination of hands. Gloves can be removed using more than one technique (e.g., glove-in-glove or bird beak).
2. **Perform hand hygiene.**
3. **Remove and discard mask or respirator / if cloth facial covering, remove and place in disposable bag being used to house clothing to be laundered\*** Do not touch the front of the cloth facial covering, respirator or facemask.
  - » **Respirator:** Remove the bottom strap by touching only the strap and bring it carefully over the head. Grasp the top strap and bring it carefully over the head, and then pull the respirator away from the face without touching the front of the respirator.
  - » **Facemask:** Carefully untie (or unhook from the ears) and pull away from face without touching the front.
4. **Perform hand hygiene after removing the cloth facial covering/respirator/facemask** and before putting it on again if are practicing reuse.

# Sanitation Procedures

Current evidence suggests that SARS-CoV-2 may remain viable for hours to days on surfaces made from a variety of materials. Cleaning of visibly dirty surfaces followed by disinfection is a best practice measure for prevention of COVID-19 and other viral respiratory illnesses in households, hotel rooms, vehicles and community settings.

It is unknown how long the air inside a room occupied by someone with confirmed COVID-19 remains potentially infectious.

Facilities will need to consider factors such as the size of the room and the ventilation system design (including flowrate and location of supply and exhaust vents) when deciding how long to close off rooms or areas used by ill persons before beginning disinfection. Taking measures to improve ventilation in an area or room where someone was ill or suspected to be ill with COVID-19 will help shorten the time it takes respiratory droplets to be removed from the air.

## General Sanitation Best Practices

- Wash hands routinely with soap and water for at least 20 seconds, hand sanitizer with at least 60% alcohol, or disinfectant wipes.
- Using appropriate sanitizing substance (e.g. bleach wipes), wipe down any frequently touched surfaces (e.g. door handles, light switches), as well as field equipment and vehicles (handles, grab points, and other common surfaces) at the end of each field day and as needed throughout the day.
- Place used tissues, hand wipes, or other personal sanitation items directly into a trash bag.
- Additional prevention controls can be found at <https://www.cdc.gov/coronavirus/2019-ncov/prevent-getting-sick/prevention.html>.
- Approved disinfectants for COVID-19: <https://www.epa.gov/pesticide-registration/list-n-disinfectants-use-against-sars-cov-2-covid-19>

## Hard (Non-porous) Surfaces

- If available, wear disposable gloves when cleaning and disinfecting surfaces. Gloves should be discarded after each cleaning. If reusable gloves are used, those gloves should be dedicated for cleaning and disinfection of surfaces for COVID-19 and should not be used for other purposes. Consult the manufacturer's instructions for cleaning and disinfection products used. Clean hands immediately after gloves are removed.
- If surfaces are dirty, they should be cleaned using a detergent or soap and water prior to disinfection.
- In addition to EPA-approved disinfectants for hard surfaces, diluted bleach solutions (at least 1000ppm sodium hypochlorite) can be used if appropriate for the surface. Follow manufacturer's instructions for application, ensuring a contact time of at least 1 minute, and allowing proper ventilation during and after application. Check to ensure the product is not past its expiration date. Never mix household bleach with ammonia or any other cleanser. Unexpired household bleach will be effective against coronaviruses when properly diluted.
- Prepare a bleach solution by mixing:
  - 5 tablespoons (1/3rd cup) bleach per gallon of water or
  - 4 teaspoons bleach per quart of water

## Soft (Porous) Surfaces

- For soft (porous) surfaces such as carpeted floor, rugs, and drapes, remove visible contamination if present and clean with appropriate cleaners indicated for use on these surfaces.
- After cleaning, launder items as appropriate in accordance with the manufacturer's instructions. If possible, launder items using the warmest appropriate water setting for the items and dry items completely. Otherwise, use products that are EPA-approved for use against the virus that causes COVID-19 and that are suitable for porous surfaces.

## Electronics

- For electronics such as cell phones, tablets, touch screens, remote controls, and keyboards, remove visible contamination if present.
- Follow the manufacturer's instructions for all cleaning and disinfection products.
- Consider use of wipeable covers for electronics.
- If no manufacturer guidance is available, consider the use of alcohol-based wipes or sprays containing at least 70% alcohol to disinfect touch screens. Dry surfaces thoroughly to avoid pooling of liquids.

## Linens, clothing, and other items that go in the laundry

- Wear disposable gloves when handling dirty laundry from an ill person and then discard after each use. If using reusable gloves, those gloves should be dedicated for cleaning and disinfection of surfaces for COVID-19 and should not be used for other household purposes. Clean hands immediately after gloves are removed. If no gloves are used when handling dirty laundry, be sure to wash hands afterwards.
- If possible, do not shake dirty laundry. This will minimize the possibility of dispersing virus through the air.
- Launder items as appropriate in accordance with the manufacturer's instructions. If possible, launder items using the warmest appropriate water setting for the items and dry items completely. Dirty laundry from an ill person can be washed with other people's items.
- Clean and disinfect clothes hampers according to guidance above for surfaces. If possible, consider placing a bag liner that is either disposable (can be thrown away) or can be laundered.

## Best Practices

In order to minimize the transmission of the COVID-19 virus within the CTCLUSI government and Tribal community, the following precautions are recommended for mission-critical employees who must enter administrative facilities until otherwise directed by Tribal Administration or Department Director.

### General Best Practices

- Wash your hands often with soap and water for at least 20 seconds especially after you have been in a public place, or after blowing your nose, coughing, or sneezing. Wash hands before and after touching mucosa, food, locks, knobs, switches, remote control, cell phone, watches, computers, desks, TV, etc. and when using the bathroom. (<https://www.cdc.gov/handwashing/when-how-handwashing.html>)

- If soap and water are not readily available, use a hand sanitizer that contains at least 60% alcohol. Cover all surfaces of your hands and rub them together until they feel dry.
- Avoid touching your eyes, nose, and mouth with unwashed hands.

## Social Distancing, Social Interaction

- Stay home as much as possible.
- Practice social distancing and stay at least 6 feet from any other person.
- Maintain a distance of at least 6 feet while using work-related transportation such as boats. If social distancing cannot be achieved, other transportation may be necessary.
- Avoiding touching your face, particularly your nose, mouth, or eyes. Regularly wash hands and stay home if you are ill, self-quarantining for at least a 2-week period after exposure to someone else infected with COVID-19.
- Avoid close contact with people who are sick.
- Keeping distance from others is especially important for people who are at higher risk of getting very sick.
- If an employee occupies a shared space, he/she should wipe their own phones and keyboards, doorknobs, etc. upon arrival and exit.
- Additionally, cleaning and disinfecting of individual offices/suites can be arranged through the Maintenance Department.
- Do not share headsets or other items that are near the mouth or nose.
- Do not use other common areas, such as conference rooms or common areas.
- Restrict your movements and keep a daily log of your travel path, including point of entry to the building, elevators and stairwells used, rooms occupied, restrooms and pantries utilized and any other space(s) or travel pathways.
- Where possible, consider options for separating employees into teams to reduce the risk of transmission to an entire employee group.
- If you are in a private setting and do not have on your cloth face covering, remember to always cover your mouth and nose with a tissue when you cough or sneeze or use the inside of your elbow.
- Throw used tissues in the trash.
- Avoid shaking hands or other physical greetings.
- Do not share personal protection equipment (PPE).
- If you or someone in your household is sick, do not report to work and notify your supervisor.
- If you are with someone experiencing symptoms while at work, cease operations and go home immediately. Keep your distance, wash your hands and common surfaces, and call your supervisor and HR as soon as possible.
- Ensure you have soap and handwashing facilities at your site or have access to facilities with running water. Do not rely on hand sanitizer alone.

## Remote / Telework Options

- Hold meetings via telephone or video interface. Options include Zoom, Webex, Adobe Connect, Microsoft Teams and others.
- Share data and files by digital media, such as through email, mobile text messages, video screen share, ArcGIS Online, etc.
- For classroom training: where possible move training from classroom to hangar or larger event space where seating could be spread out (6'), place handouts on desks in advance to minimize passing of documents, advise attendees in advance that there will not be a shared coffee station,



minimize passing around demo items (e.g. oil type kit, grain size kit), but show them up front and have them on the front table, Have students email a photo of their paperwork to the instructors each day rather than hand them (e.g. completed SCAT forms or sketches). List of “ground rules” that is covered prior to any group convening - Limit person to person contact (No handshakes, high fives, hugs), Good Respiratory hygiene (cover mouth when sneezing), Do not share food, location of hand sanitizer or disinfectant wipes and handwashing stations. Discuss transmissibility of COVID-19.

## Best Practice Recommendations for General Activities

<p><b>If you do have to leave the house - consider these simple steps to minimize exposure:</b></p>	<p>Social distancing still applies in public - so does washing your hands thoroughly! The use of cloth face coverings in public settings is recommended.</p> <ul style="list-style-type: none"> <li>● Look for the Americans with Disability accessibility buttons most contemporary buildings have, it's easy enough to push that with your hip or elbow than open the door handle with your hand. It's a large round button with a handicap icon on it.</li> <li>● Our smart phones - We do not pay much attention to where we place our phones. Sure we sanitize the screen, but rarely think about what the outer case picks up - bring a handkerchief from home, or a packet of disinfectant wipes, or even baby wipes and pull one out to set your phone down upon if out in public. Lastly - do you REALLY need to take your phone into the bathroom stall with you? The less you expose your phone to shared surfaces the better.</li> <li>● Try to adhere to self check where you can to limit proximity to other individuals - Use the produce bags provided in all grocery stores to place over your hand should you need to touch any produce (testing avocado ripeness for example). Once home, thoroughly wash your hands as well as all produce prior to consumption. Throw away plastic bags you brought groceries home in, do not re-use them.</li> <li>● It's difficult to break the habit of personal greetings - handshake, hug, pat on the back, fist bump. Resist the temptation and also stay away from elbow taps or otherwise. The goal is to maintain social distance (6 ft) from others which is nullified by an elbow tap.</li> <li>● What if I wear contacts? That's a tough habit to break when in public, but do everything you can to prevent touching your eyes. WASH your hands frequently and as soon as you get home. Put up a note that you see as soon as you walk through the front door.</li> <li>● Wash your hands even before going to the bathroom, even disinfect the soap dispenser pump and sink faucet handles.</li> <li>● Make sure to carry napkins, disinfectant wipes or tissue with you when you leave your home - reach for it should you need to wipe your nose, open a door handle, or push a shopping cart.</li> <li>● Think about using your credit card or debit card more than cash. It minimizes proximity to others when you pass cash directly to another person. You can also use your knuckle to sign your name on the card kiosk.</li> <li>● Upon returning home - A good hygienic practice to limit dirt and bacteria from being tracked farther into your home - remove your shoes immediately upon entering the house.</li> </ul>
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<p><b>Shopping for food and other household items</b></p>	<ul style="list-style-type: none"> <li>● Avoid shopping if you have a fever, cough, or shortness of breath.</li> <li>● If possible, order food and other items online for home delivery or curbside pickup.</li> <li>● Only visit the grocery store, or other stores selling household essentials, in person when you absolutely need to. This will limit your potential exposure to others and the virus that causes COVID-19.</li> <li>● When you do have to visit in person, go during hours when fewer people will be there (for example, early morning or late night).</li> </ul> <p>Here are ways to protect yourself while shopping:</p> <ul style="list-style-type: none"> <li>● Stay at least 6 feet away from others while shopping and in lines.</li> <li>● Cover your mouth and nose with a cloth face covering when you have to go out in public</li> <li>● If you are at higher risk for severe illness, find out if the store has special hours for people at higher risk. If they do, try to shop during those hours. People at higher risk for severe illness include adults 65 or older and people of any age who have serious underlying medical conditions.</li> <li>● Disinfect the shopping cart, use disinfecting wipes if available</li> <li>● Cover coughs and sneezes</li> <li>● Do not touch your eyes, nose, or mouth</li> <li>● If possible, use touchless payment (pay without touching money, a card, or a keypad). If you must handle money, a card, or use a keypad, use hand sanitizer right after paying.</li> <li>● After leaving the store, use hand sanitizer. When you get home, wash your hands with soap and water for at least 20 seconds.</li> <li>● At home, follow food safety guidelines: clean, separate, cook, chill (There is no evidence that food or food packaging has been linked to getting sick from COVID-19.)</li> </ul>
<p><b>Accepting deliveries and takeout orders or handling mail</b></p>	<ul style="list-style-type: none"> <li>● If possible, pay online or on the phone when you order.</li> <li>● Accept deliveries without in-person contact whenever possible. Ask for deliveries to be left in a safe spot outside your house (such as your front porch or lobby), with no person-to-person interaction. Otherwise, stay at least 6 feet away from the delivery person.</li> <li>● After receiving your delivery or bringing home your takeout food, wash your hands with soap and water for 20 seconds. If soap and water are not available, use a hand sanitizer with at least 60% alcohol.</li> <li>● After collecting mail from a post office or home mailbox, wash your hands with soap and water for at least 20 seconds or use a hand sanitizer with at least 60% alcohol.</li> </ul>
<p><b>Banking</b></p>	<ul style="list-style-type: none"> <li>● Bank online whenever possible.</li> <li>● If you must visit the bank, use the drive-through ATM if one is available. Clean the ATM keyboard with a disinfecting wipe before you use it.</li> <li>● When you are done, use a hand sanitizer with at least 60% alcohol. Wash your hands with soap and water for at least 20 seconds when you get home.</li> </ul>

<b>Visiting the Gas Station</b>	<ul style="list-style-type: none"> <li>● If available, use gloves or disinfecting wipes on handles and buttons before you touch them.</li> <li>● After fueling, use a hand sanitizer with at least 60% alcohol. Wash your hands for at least 20 seconds when you get home or somewhere with soap and water.</li> </ul>
<b>Laundry after:</b> <ul style="list-style-type: none"> <li>● <b>Public outing where physical distancing was limited</b></li> <li>● <b>Occupational setting where physical distancing was limited</b></li> <li>● <b>Care for infected individual</b></li> </ul>	<ul style="list-style-type: none"> <li>● If possible, do not shake dirty laundry. This will minimize the possibility of dispersing virus through the air.</li> <li>● Launder items as appropriate in accordance with the manufacturer’s instructions.</li> <li>● If possible, launder items using the warmest appropriate water setting for the items and dry items completely.</li> <li>● Laundry hamper - If possible, consider placing a bag liner that is either disposable (can be thrown away) or can be laundered</li> <li>● If you are on the road or in a hotel, consider using a disposable trash bag to place clothing in to launder at a later date</li> <li>● Wash hands after handling dirty laundry</li> </ul> <p>If caring for an ill individual:</p> <ul style="list-style-type: none"> <li>● Wear disposable gloves when handling dirty laundry from an ill person and then discard after each use. If using reusable gloves, those gloves should be dedicated for cleaning and disinfection of surfaces for COVID-19 and should not be used for other household purposes. Clean hands immediately after gloves are removed.</li> <li>● If no gloves are used when handling dirty laundry, be sure to wash hands afterwards</li> </ul>

## Exposure Levels and Risk Assessment

Risk depends on characteristics of the virus, including how well it spreads between people; the severity of resulting illness, the medical or other measures available to control the impact of the virus (for example, vaccines or medications that can treat the illness) and the relative success of these measures. In the absence of a vaccine or treatment medications, nonpharmaceutical interventions become the most important response strategy; these include community interventions that can reduce the impact of disease.

Risk from COVID-19 can be broken down into risk of exposure versus risk of serious illness and death:

Risk of Exposure is increased for:

- People in places of reported, ongoing community spread of the virus that causes COVID-19, with the level of risk dependent on the location
- Healthcare workers caring for patients with COVID-19
- Close contacts of persons with COVID-19
- Travelers returning from affected locations where community spread is occurring, with level of risk dependent on where they traveled

Risk of Severe Illness is increased for people who are:

- Are Immunocompromised
- Are Older in age
- With Asthma
- With HIV
- With liver disease
- With dementia
- With disabilities
- Experiencing homelessness
- Of racial or ethnic minority groups
- Are newly resettled refugee populations
- Older adults, with risk increasing by age

This guidance considers individual exposure risk and recommended precautions across multiple settings.

- Possible unrecognized COVID-19 exposures in U.S. communities/public settings
- Individuals who fall in the category of higher risk for serious illness
- Individuals with approved “mission essential” travel
- Person with symptomatic COVID-19 during period from 48 hours before symptoms onset

Person	Exposure to	Recommended Precautions
<input type="checkbox"/> All U.S. residents	<input type="checkbox"/> Possible unrecognized COVID-19 exposure in public settings where other social distancing measures are difficult to maintain (e.g. grocery stores)	<input type="checkbox"/> Practice social distancing <input type="checkbox"/> Maintain 6 feet of distance from others <input type="checkbox"/> Stay out of crowded places <input type="checkbox"/> Use of cloth facial coverings <input type="checkbox"/> Wash hands thoroughly before touching your face or eating <input type="checkbox"/> Be alert for symptoms <input type="checkbox"/> Watch for fever*, cough, or shortness of breath <input type="checkbox"/> Take temperature if symptoms develop <input type="checkbox"/> Follow CDC guidance if symptoms develop

<input type="checkbox"/> Individuals who fall in the category of higher risk for serious illness	<input type="checkbox"/> Possible unrecognized COVID-19 exposure in public settings where other social distancing measures are difficult to maintain (e.g. grocery stores)	<input type="checkbox"/> Practice all precautions listed above and, <input type="checkbox"/> Stay home if possible <input type="checkbox"/> Avoid all non-essential travel <input type="checkbox"/> Avoid close contact (within 6 ft) with individuals outside of your immediate partner or household member <input type="checkbox"/> Clean and disinfect frequently touched surfaces
<input type="checkbox"/> Individuals with approved “mission essential” travel	<input type="checkbox"/> Possible unrecognized COVID-19 exposure in crowded travel settings, like airports where the number of travelers from areas experiencing community spread of the disease increases and social distancing measures are difficult to maintain  <input type="checkbox"/> Possible unrecognized COVID-19 exposure when on-site work and lodging is expected	<input type="checkbox"/> See Mission Essential Travel Approved Worksheet
<input type="checkbox"/> Household member <input type="checkbox"/> Intimate partner <input type="checkbox"/> Individual providing care in a household without using recommended infection control precautions <input type="checkbox"/> Individual who has had close contact* < 6 feet for a prolonged period of time  *Close contact: A person who may be at risk of a contagious disease because of their proximity or exposure to a known case. Exact definition of close contact differs by disease; for COVID-19, the	<input type="checkbox"/> Person with symptomatic COVID-19 during period from 48 hours before symptoms onset until meets criteria for discontinuing home isolation (can be a laboratory - confirmed disease or a clinically compatible illness in a state or territory with widespread community transmission)	<input type="checkbox"/> Stay home until 14 days after last exposure and maintain social distance (at least 6 feet) from others at all times <input type="checkbox"/> Self-monitor for symptoms <input type="checkbox"/> Check temperature twice a day <input type="checkbox"/> Watch for fever*, cough, or shortness of breath <input type="checkbox"/> Avoid contact with people at higher risk for severe illness (unless they live in the same home and had same exposure) <input type="checkbox"/> Follow CDC guidance if symptoms develop

<p>CDC defines a close contact as anyone who has been within 6 feet of a person infected with the virus for a prolonged period of time, or has had direct contact with the infected person's secretions. (Source: CDC)</p>		
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## Out-of-Town Travel

Only mission-critical travel is recommended at this time. Heads of all Departments are authorized to determine what travel meets the mission-critical threshold. Travel by any employee to or within areas where there is community spread of COVID-19 should only be undertaken when there is an urgent need, such as to protect life and property.

### Transit

- Limit air travel.
- Avoid mass transit.
- Do not carpool.

### Accommodations

- Ask the host/hotel what sanitation and staff protocols they are implementing. These should generally align with best practices put forth in this addendum.
- Disinfect hotel rooms with EPA-registered cleaners or the alternatives listed above.
- Limit the number of people in your room (e.g., housekeeping, coworkers, colleagues).
- Avoid hotel breakfast buffets.
- Bring a cooler for meals or use drive-thru services to minimize crowd exposure at restaurants.
- Adhere to social distancing – 6 ft.
- Wear a cloth facial covering when in public
- Avoid large crowds
- Do not shake hands or speak to individuals without maintaining social distancing
- Try not to touch your face
- Make sure you have soap and water handwashing facilities at your site, do not rely on hand sanitizer alone.
- Increase frequency of handwashing. Make sure all personnel wash their hands prior to taking a break, prior to eating lunch, after use of the bathroom, etc.
- Use multiple offices or shift schedules on site, employ social distancing when setting up work spaces
- Disinfect work spaces, porta johns, handwash stations, etc. with an EPA registered cleaner - pay close attention to all touch points(<https://www.epa.gov/pesticide-registration/list-n-disinfectants-use-against-sars-cov-2>),
- Disinfect vehicles (wipe down steering wheel, door handles, touch points, etc) before travel and upon returning with an EPA registered cleaner (<https://www.epa.gov/pesticide-registration/list-n-disinfectants-use-against-sars-cov-2>).

- While at hotels, disinfect your own room with an EPA registered cleaner. (<https://www.epa.gov/pesticide-registration/list-n-disinfectants-use-against-sars-cov-2>)

## Risk Assessment for Approved Travel

A specific travel plan geared toward mitigating risk of exposure to COVID-19 will be developed by traveler(s) and ICP or CTCLUSI Safety Officer.

Things to consider before travel:

- Are you or your travel companion(s) more likely to get severe illness if you get COVID-19?
  - People at higher risk for severe disease are older adults and people of any age with serious chronic medical conditions (such as heart disease, lung disease, or diabetes). CDC recommends that travelers at higher risk for COVID-19 complications avoid nonessential travel.
- Do you live with someone who is older or has a serious, chronic medical condition? If you get sick with COVID-19 upon your return from travel, your household contacts may be at risk of infection. Household contacts who are older adults or persons of any age with severe chronic medical conditions are at higher risk for severe illness from COVID-19.
- Do you have a plan for taking time off from work, in case you are told to stay home for 14 days for self-monitoring or if you get sick with COVID-19? If you have close contact with someone with COVID-19 during travel, you may be asked to stay home to self-monitor and avoid contact with others for up to 14 days after travel. You will be asked to avoid contact with others (including being in public places) during this period of infectiousness.

	Travel Details	Recommended Precautions
1	Destination? Duration of travel? Duration of stay? *Many jurisdictions across the U.S. have mandated required quarantines or statements of purpose for travelers. Given situational dynamics, anyone considering a long distance drive or air travel should research what guidelines or requirements are in place for the states, counties and cities that they will be visiting for - closures, restrictions, food options and hotel reservations.	<input type="checkbox"/> Is COVID-19 spreading in the area where you're going? <input type="checkbox"/> Review local/state public health authority guidelines – are there public health alerts available for the destination location? <input type="checkbox"/> Review current CDC Domestic Travel Advisories <input type="checkbox"/> Review CDC's Geographic Risk Assessment for COVID-19 Transmission (CDC recommends individuals stay home for a period of 14 days after leaving an area that has a Level 3 Travel Health Notice) <input type="checkbox"/> Does the destination or location traveler is returning to have a mandated quarantine in place?

2	<p>Safe and appropriate commercial or personal conveyance modes of travel?</p> <p>Your risk of exposure to respiratory viruses like coronavirus may increase in crowded settings, particularly closed-in settings with little air circulation (buses, vehicles). Where possible take POV and limit or prevent passenger carry/ rideshare/ car-pooling.</p>	<ul style="list-style-type: none"> <li><input type="checkbox"/> Will you or your travel companion(s) be in close contact with others during travel? If yes, how can you plan in advance to minimize close contact? <ul style="list-style-type: none"> <li><input type="checkbox"/> Take personal POV</li> <li><input type="checkbox"/> Sit several seats away from each other (e.g. if possible, on airplane, bus, other)</li> </ul> </li> <li><input type="checkbox"/> Have travelers reviewed best practices to reduce risk of exposure at the: <ul style="list-style-type: none"> <li><input type="checkbox"/> Gas Station</li> <li><input type="checkbox"/> How to sanitize vehicle</li> </ul> </li> </ul>
3	<p>Availability of safe lodging conducive to isolation recommendations?</p>	<ul style="list-style-type: none"> <li><input type="checkbox"/> Have travelers reviewed best practices to reduce risk of exposure at the: <ul style="list-style-type: none"> <li><input type="checkbox"/> Hotel</li> </ul> </li> </ul>
4	<p>Availability of meals, medical services, and other basic day to day needs?</p> <p>*Important to plan ahead - While restaurants remain closed for dine in, grocery stores remain open. Looking for availability of takeout options near lodging, or work site, along with checking to see if your hotel room includes basic kitchenette amenities is essential.</p>	<ul style="list-style-type: none"> <li><input type="checkbox"/> How will meals be provided? Does the hotel have a small kitchenette? At work site, how will meals be taken to ensure adherence to social distancing/prevent cross contamination?</li> <li><input type="checkbox"/> Have travelers reviewed best practices to reduce risk of exposure at the: <ul style="list-style-type: none"> <li><input type="checkbox"/> Delivery or takeout</li> <li><input type="checkbox"/> What medical services, testing or screening details/locations/availability exist?</li> </ul> </li> </ul>
5	<p>Assess planned daily activities for:</p>	<ul style="list-style-type: none"> <li><input type="checkbox"/> Limitations/constraints that prevent adherence to physical distancing guidelines?</li> <li><input type="checkbox"/> Availability of necessary services such as: handwashing stations, cleaning/disinfecting supplies?</li> <li><input type="checkbox"/> Does the facility or building have any protective measures implemented (spacing, ventilation, screening)?</li> </ul>
6	<p>Does the traveler have adequate PPE/supplies necessary for the specific location, duration of travel and planned activities?</p>	<ul style="list-style-type: none"> <li><input type="checkbox"/> See PPE COVID Go-Kit</li> <li><input type="checkbox"/> Optional - Thermometer</li> </ul>



	<p>Has traveler reviewed when to implement protective measures, proper wear, removal or cleaning?</p>	<ul style="list-style-type: none"> <li><input type="checkbox"/> See Donning/Doffing</li> <li><input type="checkbox"/> See Cleaning/Disinfecting</li> </ul>
<p>7</p>	<p>Consider what steps, personal preferences exist should the traveler become infected, sick or otherwise incapacitated?</p> <p>Identify and Isolate Suspected Cases</p> <p>In workplaces where exposure to COVID19 may occur, prompt identification and isolation of potentially infectious individuals is a critical first step in protecting others at the work site.</p> <p>Wherever feasible, immediately isolate individuals suspected of having COVID-19. On the work site, move potentially infectious individuals to a location away from workers and other visitors and with a closed door, if possible.</p> <p>Take steps to limit the spread of the individual's infectious respiratory secretions, including by providing them a facemask and asking them to wear it, if they can tolerate doing so. The surgical mask acts to contain potentially infectious respiratory secretions at the source (i.e., the person's nose and mouth).</p> <p>In most types of workplaces (i.e., those outside of healthcare):</p> <p>Isolated individuals should leave the work site as soon as possible. Depending on the severity of the isolated individual's illness, he or she might be able to return home or seek medical care on his or her own, but some individuals may need emergency medical services.</p>	<ul style="list-style-type: none"> <li><input type="checkbox"/> Will there be adequate medical resources on-scene to deal with COVID 19 or other health emergencies?</li> <li><input type="checkbox"/> If the individual does fall ill - <ul style="list-style-type: none"> <li><input type="checkbox"/> What arrangements are available on-site for lodging and care? Will the hotel allow the infected individual to stay?</li> <li><input type="checkbox"/> Can the ill individual safely return home? How?</li> </ul> </li> <li><input type="checkbox"/> Who on-scene will assist someone with a serious health concern? And how?</li> </ul>

8	<p>Comprehensive individual assessment of personal risk factors?</p> <p>Factors including:</p> <ul style="list-style-type: none"> <li>● Age,</li> <li>● Pre-existing conditions,</li> <li>● required medications &amp; access</li> <li>● Any other individual concerns relative to exposure potential to other family or household members etc.</li> </ul>	<ul style="list-style-type: none"> <li><input type="checkbox"/> Every traveler should evaluate personal risk factors to determine whether or not they are comfortable with the proposed controls in place to adequately mitigate their perceived individual risk level. No one should agree to travel unless comfortable doing so.</li> <li><input type="checkbox"/> Who is responsible for the responder's safety?</li> <li><input type="checkbox"/> All appropriate and reasonable safety considerations for the employee have been discussed and thoroughly reviewed prior to accepting travel. If not, then a justification of why not should be captured.</li> </ul>
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<p>Travel via Automobile</p>	<ul style="list-style-type: none"> <li>● Take POV when able</li> <li>● Do not take “ride shares”, do not carpool</li> <li>● Wipe down contact surfaces on rental cars</li> <li>● If possible, carry hand sanitizer, gloves and cleaning supplies (wipes, disinfectant spray/paper towels) to utilize when getting gas or making stops</li> <li>● Wash or use hand sanitizer before putting on facial covering/masks and when eating, drinking</li> </ul> <p>Do not carry passengers outside of your immediate family that resides with you. If you have to provide transportation to others, please see below for recommended car sanitation guidelines:</p> <ul style="list-style-type: none"> <li>● Before cleaning - leave doors/windows open to allow for sufficient air changes to remove potentially infectious particles (15 – 30 minutes, consider if windy or still air)</li> <li>● Wear the following: <ul style="list-style-type: none"> <li>○ gloves you can dispose of</li> <li>○ eye protection (safety glasses or sunglasses or goggles)</li> <li>○ cloth or other facial covering</li> <li>○ Button up shirt or disposable covering (tyvek)</li> </ul> </li> <li>● Use disinfecting wipes or disinfectant spray on all common interior surfaces that you will be touching when driving the vehicle next- window controls, shifter, seat belt, climate controls, radio dials. Wipe down exterior door handles that were touched</li> <li>● Allow to air dry</li> <li>● Doors remain open while cleaning to provide adequate ventilation</li> </ul>
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<p>Travel via Commercial aircraft</p> <p>*Travelers should be prepared for possible delays or flight cancellations as various localities impose or modify quarantines and statements of purpose. Make sure to research guidelines or restrictions imposed by local authorities - in advance - for your planned destination.</p>	<p>Check specific airport websites you will be flying out of and transiting through, as well as visiting your specific airline carrier website. Each airport and airline have instituted varying measures to reduce risk of exposure. However, airlines are recommended to comply with guidelines from the Centers for Disease Control and Prevention to clean and disinfect the interiors of their aircraft.</p> <ul style="list-style-type: none"> <li>● If possible adhere to social distancing guidelines on the plane - sit or move seats to allow for adequate distancing</li> <li>● Avoid crowded waiting areas</li> <li>● Wipe down handles of check baggage upon retrieval</li> </ul>
<p>Travel via Small boat</p>	<ul style="list-style-type: none"> <li>● Agency vessel - Follow preventative measures agency has in place</li> </ul>
<p>Travel via Response aircraft (USCG, or chartered)</p>	<ul style="list-style-type: none"> <li>● Wipe down communications gear (mics, headsets, etc.)</li> </ul>
<p>Hotel stay - Alternative lodging may be a viable option (Airbnb, RV, etc.) should it provide improved physical distancing measures.</p>	<p>Many international hotel brands have instituted elevated cleaning protocols to reassure guests of their safety and to minimize the economic impact felt by the severe reduction in travel. Large hotel chains like Marriott and Hilton have published their specific cleaning measures such as increasing the frequency of cleaning public areas, increasing hand sanitizer availability, using disinfectant to wipe down surfaces within hotel rooms and improve staff training protocols.</p> <p>Ex. Marriott “ Hand Hygiene: In our daily meetings, our teams are reminded that cleanliness starts with this simple act. It’s important for their health and that of our guests.</p> <p>Guest Rooms: Hotels use cleaning and disinfecting protocols to clean rooms after guests depart and before the next guest arrives, with particular attention paid to high-touch items.</p> <p>Public Spaces: Hotels have increased the frequency of cleaning and disinfecting in public spaces, with a focus on the counter at the front desk, elevators (and elevator buttons), door handles, public bathrooms and even room keys.</p> <p>Back of House: In the spaces where associates work “behind the scenes,” hotels are increasing the frequency of cleaning and focusing on high-touch areas like associate entrances, locker room, laundry rooms and staff offices.</p> <ul style="list-style-type: none"> <li>● Use Hotel Brand app to download digital key to enter room - check in via hotel app or over phone to minimize time spent in hotel lobby or standing in check-in area.</li> <li>● Proper PPE when cleaning room:</li> </ul>

	<ul style="list-style-type: none"> <li>● Face mask</li> <li>● Eye protection - to prevent splash from cleaning materials</li> <li>● Nitrile gloves</li> <li>● Once in room, wipe down frequently touched surfaces with antibacterial wipes or disinfectant spray and a rag for key places - the phone, door knobs, toilet handle, ice bucket, microwave buttons, remote control, and bathroom faucet handles. Don't forget light switches.</li> <li>● Wipe down hard surfaces, such as the night table, or coffee table. You don't need to do them all, but prioritize surfaces where you will set down things that will go near your face or in your mouth (think shelves that house glassware, or nightstands where you put your glasses.)</li> <li>● Wipe down bathroom surfaces - all hard surfaces, including the toilet seat and lid.</li> <li>● There's no guarantee that your room glasses and mugs aren't simply rinsed off under the tap by the cleaning staff, or even wiped down with the same sponge that's used to clean other parts of the bathroom. The quick way to deal with this is to run your cup under hot water for a minute or two before using it; this will kill most bacteria. Or pack a travel mug from home. <ul style="list-style-type: none"> <li>● Ask the hotel how often they wash the heavy comforter - many hotels wash the top covers intermittently and wash the sheets after each use. Ditch the decorative pillows on the couch and bed that do not have the cases washed daily.</li> </ul> </li> <li>● Use NO HOUSEKEEPING Sign.</li> </ul>
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## Best Practices: On-Scene, at an ICP & in the Field

Should “mission essential travel” be deemed necessary, work with Safety Officer and Supervisor to implement appropriate protocols (training, PPE, travel plan, etc.).

### Considerations:

- How can I reduce exposure time while on scene?
- How can I reduce hours and other stresses on-scene?
- Understand that response times may be delayed due to travel/ quarantine/ personnel availability
- NRT guidance and special protocols? Not yet, seen as locally driven by local and state health restrictions
- Concerns about response bringing virus to remote communities?

Consider the following applicable questions to discuss with FOSC prior to deployment:

- Contact info for Incident's Safety officer
- ICP set-up, protection measures
- Teleconference capabilities -Can agencies use ZOOM, adobe connect, and other communication platforms?
- Availability and policies of local lodging and food?

Consider the following applicable questions regarding ICP site support.

- Is the surrounding area impacted by the response one deemed high risk for COVID-19 exposure by local health authorities? (See Mission Essential Travel Approved - Worksheet to determine geographic hazard levels)
- What is the Agency/Facility implementing to minimize exposure/spread?
- How frequently are common surfaces being cleaned/disinfected?
- What entry restrictions are in place to minimize gatherings of 10 or more people?
- How are meetings being held? What options for remote meetings exist?
- How are work areas set up? Is there appropriate spacing of 6' between individual work areas?
- What HEPA filters/ventilation rate does the meeting room/work space have?
- How will food be served?
- Will hand sanitizer, disinfecting wipes and PPE (n95 masks, gloves, Tyvek suits) be available on site? Given limitations to availability of PPE/cleaning supplies - how will this be managed?
- What is the protocol for when a suspected infected person is or has been in the ICP?
- What notifications can we expect to receive should someone working in the ICP have tested positive for COVID-19?
- What if any medical support is on scene to screen potential cases? What does that screening entail?
- How will security or site restrictions be enforced to restrict non-essential visitors, general public?

Industry Partner Best Practice - Focus on initial screening of staff - e.g. creating and maintaining a "clean zone" for the ICP, this includes effectively managing field operations.

1) Once you have "clean" personnel who you have screened in, how can you minimize contact with possible outside contamination sources?

- A small number of "clean" hotels, mandatory to stay there
- Catering, so people don't go out for meals and mingle with the "outside"
- Controlled transportation means to/from the ICP and lodging

2) Social distancing in the ICP

- Smaller rooms with the individual sections rather than the big ballroom
- Really limiting staff at meetings
- Space between workstations
- No physical contact (handshakes, hugs, and high fives)
- Common distance (x ft) for conversations

### 3) Sanitizing workspace

- Hand sanitizer for everyone
- No common work equipment
- Spacing shift change so outgoing people can sanitize area prior to departing
- Periodic sanitizing of equipment and workspaces during a shift (e.g., every 2 hours, every 4 hours)
- Good ventilation, lots of small, high quality air filters
- Control of high contact spaces like the water coolers and coffee pots.
- Periodic sanitizing of high contact spaces like doorknobs and handrails

### 4) Effective stress management (the best defense is a good immune system)

- Actively manage the hours people work
- Positive encouragement and support for eating better
- Provide places for de-stressing within the "clean zone," like gym facilities, places to run, pleasant outdoor areas

#### **A.** Job Hazard Analysis for specific tasks:

- Field work
- SCAT Job Hazard Analysis

#### **B.** Guidance and example Site Safety Plans (ICS 208) that include controls to mitigate exposure and spread of coronavirus during a response