





Note: This guidance is no longer in effect. Most businesses now follow the <u>COVID-19 Prevention</u> <u>Emergency Temporary Standards</u>. Visit the California Department of Public Health's <u>COVID-19 website</u> for the current COVID-19 public health guidance. This document is provided only for historical purposes.







### **COVID-19 General Checklist**

#### for Life Sciences Employers

July 2, 2020

This checklist is intended to help life sciences employers implement their plan to prevent the spread of COVID-19 in the workplace and is supplemental to the <u>Guidance for Life Sciences</u> <u>Employers</u>. This checklist is a summary and contains shorthand for some parts of the guidance; familiarize yourself with the guidance before using this checklist.

## **Workplaces that Handle Infectious Pathogens**

Research facilities, laboratories, and other locations that handle material that may contain pathogens and whose operations may disperse pathogens in the air must establish, implement, and maintain an effective written Biosafety Plan, administered by the facility's biological safety officer. The Biosafety Plan must include the following:

List of job classifications with exposure to infectious pathogens.
List of infectious pathogens known or reasonably expected to be present in laboratory materials and applicable biosafety measures.
Procedures to ensure all incoming materials containing pathogens are treated as virulent, until verified as deactivated or attenuated.
A risk assessment, performed by the biological safety officer, in accordance with CDC's Biosafety in Microbiological and Biomedical Laboratories guidelines.
Feasible engineering controls including containment equipment and procedures.
Required safe work practice controls and prohibited unsafe work practices in accordance with the risk assessment and CDC guidelines.
Necessary personal protective equipment (PPE), including respiratory protective equipment.
Effective decontamination and disinfection procedures for laboratory surfaces, equipment, and tools.
Procedures for communicating hazards to workers and providing required worker training.
Emergency procedures for uncontrolled releases in the facility and untreated releases outside the facility.
Provision of applicable vaccines to workers.
Procedures to investigate and provide medical follow up to workers exposed to laboratory pathogens.
Procedures to annually inspect facilities and annually audit the facility's biosafety procedures.



 Procedures to record and correct deficiencies found during inspections and audits.

# Contents of Written Workplace Specific Plan

All facilities, whether they handle pathogens or not, must institute a written workplace specific plan to reduce COVID-19 transmission.

WO	rkplace specific plan to reduce COVID-19 transmission.	
	The person(s) responsible for implementing the plan.	
	A risk assessment and the measures that will be taken to prevent spread of the virus.	
	Use of face coverings, in accordance with the <u>CDPH guidance</u> .	
	Training and communication with workers and worker representatives on the plan.	
	A process to check for compliance and to document and correct deficiencies.	
	A process to investigate COVID-cases, alert the local health department, identify and isolate close workplace contacts and infected workers.	
	Protocols for when the workplace has an outbreak, in accordance with <u>CDPH</u> <u>guidance</u> .	
	Update the plan as necessary to prevent further cases.	
Topics for Worker Training		
	If applicable, training on the facility's biosafety plan and all controls used to prevent transmission of aerosol transmitted diseases while working with pathogens.	
	Information on COVID-19, preventing spread, and who is especially vulnerable.	
	Self-screening at home, including temperature and/or symptom checks using CDC guidelines.	
	The importance of not coming to work if workers have a cough, fever, difficulty breathing, chills, muscle pain, headache, sore throat, recent loss of taste or smell, congestion or runny nose, nausea or vomiting, or diarrhea, or if they or someone they had contact with has been diagnosed with COVID-19.	
	To return to work after a COVID-19 diagnosis only after 10 days since symptom onset and 72 hours of no fever.	
	When to seek medical attention.	
	The importance of hand washing.	
	The importance of physical distancing, both at work and off work time.	
	Proper use of cloth face covers, including information in the <u>CDPH guidance</u> .	
	Information on paid leave benefits, including the <u>Families First Coronavirus</u> <u>Response Act</u> and workers' compensation benefits under the Governor's <u>Executive Order N-62-20</u> while that Order is in effect.	
	Train any independent contractors, temporary or contract workers, and	

volunteers in these policies and ensure they have necessary PPE.



## **Individual Control Measures & Screening**

- Symptom screenings and/or temperature checks.
- Encourage workers who are sick or exhibiting symptoms of COVID-19 to stay home.
- Provide and ensure workers use all necessary PPE, including eye protection and gloves where necessary.
- Encourage frequent handwashing and use of hand sanitizer.
- Provide disposable gloves to workers who are screening others for symptoms, or handling commonly touched items.



### **Cleaning and Disinfecting Protocols**

- □ Perform thorough cleaning in high traffic areas.
- ☐ Frequently disinfect commonly used surfaces.
- Clean and sanitize shared equipment between each use.
- Clean touchable surfaces between shifts or between users, whichever is more frequent.
- Ensure that sanitary facilities stay operational and stocked at all times and ensure workers have necessary cleaning products.
- ☐ Make hand sanitizer and other sanitary equipment readily available to workers.
- Ensure all water systems are safe to use after a prolonged facility shutdown to minimize risk of Legionnaires' disease.
- Use products approved for use against COVID-19 on the <u>Environmental Protection Agency (EPA)-approved</u> list and train workers on chemical hazards, product instructions, ventilation requirements, and Cal/OSHA requirements. Follow CDPH asthma-safer cleaning methods.
- □ Modify offerings in any on-site cafeterias.
- Provide time for workers to implement cleaning practices during their shifts.
- Clean floors using a vacuum with HEPA filter or other methods that do not disperse pathogens into the air.
- □ Consider upgrades to improve air filtration and ventilation.
- For those facilities in laboratory, research, or clinical settings, evaluate existing cleaning and disinfecting protocols and determine additional measures or necessary adjustments to prevent exposure to COVID-19.



## Physical Distancing Guidelines

- Implement measures to physically separate all persons by at least six feet using measures such as physical partitions or visual cues (e.g., floor markings, colored tape, or signs to indicate to where workers and/or employees should stand).
- Minimize exposure between persons where physical distancing cannot be maintained, such as Plexiglas barriers.
- Redesign spaces to ensure at least six feet between workers.

Utilize work practices to limit the number of workers in the office at one time.  Reassign lockers or stagger locker use.
Adjust in-person meetings, if they are necessary, to ensure physical distancing. Otherwise, use phone or digital platforms.
Place additional limitations on the number of workers in enclosed areas to ensure at least six feet of separation.
In areas where physical distancing is difficult to maintain, increase symptom screenings for workers including temperature, visual, and verbal checks.
Stagger employee breaks, in compliance with wage and hour regulations, to maintain physical distancing protocols.
Reconfigure, restrict, or close common areas, like employee break rooms and provide outdoor break areas with shade covers where physical distancing can be practiced.
Use the following hierarchy to prevent transmission of COVID-19 in research, production, and other work areas especially where physical distancing is difficult to maintain: engineering controls, administrative controls, and PPE.

- Engineering controls include creating physical or spatial barriers between employees such as Plexiglas or other sturdy and impermeable partitions.
- Administrative controls include increasing the number of shifts to reduce the number of personnel present at one time and ensure adequate physical distancing.
- PPE includes face shields, some masks, and impermeable gloves for persons who have no contact with materials that may have pathogens. Note that some disposable equipment such as some face shields and respirators are prioritized for health care workers and workers that handle pathogens and should not otherwise be used.



