INFECTION CONTROL AND PREVENTION PLAN

Company Name
Street Address
City, State Zip
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1. POLICY

1.1. Company Name is committed to providing a safe and healthy work environment for its employees. To accomplish this goal, the following Infection Control and Prevention plan is provided to eliminate or minimize occupational exposure to infectious illness.

1.2. The exposure control plan is reviewed and updated as needed. In addition, the plan is reviewed and updated as situations change and to reflect the latest technological advances. By doing this, Company Name is protecting its employees to the best of their knowledge.

2. PURPOSE

2.1. This plan outlines policies, procedures, practices, equipment, and personal protective equipment to be followed and used when potential exposure to infectious illness may occur.

2.2. Infectious illnesses are unpredictable but recurring events that can have consequences on human health and economic well-being worldwide. Advance planning and preparedness are critical to help mitigate the impact of an epidemic.

2.3. Our goal is continual improvement on employee safety and business continuity, while addressing associated areas of safety and compliance. By accepting mutual responsibility to operate safely, management, supervisors, and employees all contribute to the well-being of personnel and subsequently, the company.

3. SCOPE

3.1. Company Name has established and implemented a control plan which integrates safety and health measures in the event of an epidemic, so that safety, health, and job performance become synonymous.

3.2. The intent of a formal plan is to provide a framework for organizational infectious disease preparedness. A plan that is:
   - Adaptable to meet the organizational needs
   - Identifies areas in need of enhanced PPE protocol
   - Identifies the need for enhanced employee infection prevention education

4. DEFINITIONS:

4.1. Infectious Diseases - A disease caused by organisms including bacteria, viruses, fungi and parasites. Infectious diseases are frequently harmless, but effects can range from mild inflammation to epidemics with significant mortality.

4.2. Contagion – A disease that spreads by direct physical contact between people or animals. It is spread by touching items an ill individual has touched. It can also be spread airborne by droplets expelled when the afflicted person speaks, coughs or sneezes. All diseases are infectious but only some are contagious such as Small-Pox and Influenza.

4.3. Epidemic – A widespread occurrence of a communicable disease within a community at a particular time.

4.4. Pandemic – An epidemic that has spread across several continents or worldwide.
5. PLANNING CONSIDERATIONS:

5.1. Time
   5.1.1. There may be a matter of weeks to three months warning from the time a viral pathogen with epidemic potential is announced to impact of operations.
   5.1.2. The epidemic may last as long as eighteen months with the impact occurring in waves.
   5.1.3. Severe periods with spikes of cases may last 1-4 months.

5.2. Staffing & Absenteeism
   5.2.1. Absenteeism of 15-50% of facility employees, vendors, temporary employees and service providers may occur.
   5.2.2. Every employee that is infected will likely be absent for a few days up to four weeks.
   5.2.3. In a severe epidemic 0.1% - 3.0% of employees who become ill may die.

5.3. Treatment & Vaccination
   5.3.1. Current antiviral medications may not be effective against novel viruses.
   5.3.2. A vaccine may not be available for 12-18 months after identification of a novel virus.
   5.3.3. Social distancing strategies may be required to slow the spread.
   5.3.4. Isolation of sick people will be necessary.
   5.3.5. Self-isolation and/or quarantine of people who have close contact with sick people will likely be needed for a time period equal to the incubation time of the virus.

5.4. Suppliers, Vendors, Contractors and Products
   5.4.1. Utility infrastructure and public services will be stressed.
   5.4.2. Essential supplies, materials and services provided by contractors, vendors and consultants will be affected and possibly irregular.

6. RESPONSIBILITIES:

6.1. Management, supervisors, and employees are responsible for maintaining a safe and healthy work environment. Although roles and objectives may need to be altered during an outbreak, the scope and results are the same – improve overall safety awareness and increase prevention of an infectious disease or contagion.

6.2. The Program Administrator is responsible for the implementation of this exposure control plan.
   6.2.1. The Program Administrator oversees all operations to maintain and provide all necessary and related supplies, controls and information to employees on proper behaviors and work practices.
   6.2.2. Program Administrator: Formal Title of Designated Administrator
   6.2.3. The Program Administrator and designees will complete the initial Infection Control and Prevention Management Checklist and communicate to the designated team members and leadership.
     6.2.3.1. This checklist is intended for planning purposes. Employers and workers should use this planning guidance to help identify risk levels in workplace settings and to determine any appropriate control measures to implement.
6.2.3.2. Checklist can be found as an additional form with the Infection Control and Prevention Plan.

6.2.3.3. Additional guidance may be needed as outbreak conditions change, including new information about the illness, its transmission, and impacts becomes available.

6.2.3.4. Alert Level based on events are established for implementation of plan procedures and used in planning of the response following announcement of potential epidemic. Refer to Section 10.

6.2.4. Refer to the facility Contingency or Emergency Response Plan for additional emergency contact information.

6.2.5. Refer to the facility Business Continuity Plan for additional planning information.

6.3. Management Responsibilities:

6.3.1. Management will support this program to help ensure employee Health and Safety.

6.3.2. Management will support the implementation of controls outlined in Section 7 of this plan as needed and as the situation evolves.

6.3.3. Management will set and model the expectation that sick employees must stay home.

6.3.4. In severe cases, Management will investigate and implement remote work arrangements for all employees who are able to do so.

6.3.5. Management will communicate travel limitations to employees for business and the possible implications that personal travel could have.

6.3.6. Management will provide employees with relevant updates and information.

6.3.6.1. Communicate necessary safety information from the Centers for Disease Control (CDC) or state and local health departments including a review of symptoms for supervisors to be aware of when monitoring or interacting with employees.

6.3.6.2. Communicate the organization’s expectations of employees and what they can expect from the organization.

6.3.6.3. Provide infection prevention awareness training as outlined in section 9 of this plan to all employees in a manner indicated by the situation i.e. face to face, computer-based training, remote, etc.

6.3.7. Management is also responsible for limiting the negative impact on safety and business continuity. Additional Management considerations specific to this plan include:

- Possible temporary adjustment to the organization’s sick-leave, health care, remote work and pay policies to encourage sick employees to stay home and remain home until symptoms resolve, provide care to sick family members or as part of required mitigation strategies.

6.4. Supervisor Responsibilities:

6.4.1. Supervisors must be committed to the ongoing health and safety of employees and must be able to effectively communicate and enforce all safety and health policies and procedures. The responsibility of leadership typically involves:

- Reminding employees to use proper hand hygiene.
• Encouraging employees to stay home and requiring them to leave work if they are symptomatic.
• Providing PPE as required for situation, assigned tasks and possibly employee comfort.
• Ensuring voluntary respirator wearers are properly trained.
• Ensuring hand washing supplies and hand sanitizer are replenished as needed.
• Following up with employees who are out of work while sick with an infectious illness, especially employees who are vulnerable or living alone.
• Isolating employees at work who exhibit infectious illness-like symptoms until they can arrange transportation home.
• Increasing space to at least three feet and limiting face-to-face contact between workers.
• Postponing or canceling large meetings.
• Separate those who are more vulnerable or at higher risk for complications from an infectious illness.

6.5. Employee Responsibilities:

6.5.1. Practice Preventative Hygiene and Health Habits by:

• Wash your hands frequently with soap before and after eating, drinking, smoking/vaping, and after restroom use and following contact with shared surfaces.
  1. Wet hands (avoid using hot water).
  2. Apply soap and lather for at least 20 seconds ensuring soap contacts all surfaces of both hands up to the wrist.
  3. Rinse and dry with disposable towel or hand dryer.
• Cover your mouth and nose by coughing and sneezing into a tissue or the inside of your elbow.
• Avoid touching your face, specifically your eyes, nose and mouth.
• Apply the recommended social distancing of 3-6 feet when working or eating around others.
• Clean and disinfect shared machinery or surfaces prior to use with an approved sanitizer and in accordance with manufacturer’s instructions.
• Stay home and isolate yourself if you are exhibiting infectious illness-like symptoms. Follow CDC guidelines for appropriate timeframe and notifications.
• Communicate with supervisor the status of your well-being when out sick.
• Seek medical attention if symptoms increase or are prolonged; or if there are other health concerns which may cause complications.
• Drink your recommended amount of water each day.
• Eat well balanced meals and get plenty of rest.
• Consider obtaining any available contagion vaccines.
• Disinfect phones before and after use.
• Don’t share food, beverages, or smoking/vaping devices.
7. EXPOSURE CONTROLS AND PERSONAL PROTECTIVE EQUIPMENT

7.1. To effectively protect employees from contagion hazards in the workplace, there are mechanisms which may be used to minimize infectious disease and contagion exposure.

7.2. **Engineering Controls:** The following are potential engineering controls to aid in minimizing the spread of a contagion in the workplace:

- Barrier placement between employees and between employee and customers or clients.
- Sneeze guard barriers where appropriate.
- Use HVAC system to increase airflow and air turnover throughout facility.
- Install HEPA filters in ventilation systems.
- Open doors and/or windows.
- Use outdoor air intake tied to HVAC systems.
- Shut down drinking fountains and provide bottled water.

7.3. **Administrative Controls:** The following are potential administrative controls that may minimize the spread of a contagion in the workplace:

- Implement Visitor Policy: Screened prior to entry by completing health questionnaire. Only essential services and minimize non-essential visitors. See additional Infection Control and Prevent Forms in plan appendix.
- Limit temporary help and review the screening process that is being performed on our behalf.
- Development of policies that encourage ill workers to stay home without fear of reprisal.
- Discontinue non-essential travel to locations with a high prevalence of illness.
- Develop practices to minimize face-to-face contact between workers, such as extended use of e-mail, websites and teleconferences.
- Encourage flexible work arrangements such as telecommuting, or flexible work hours to reduce the number of workers on the work site at one time or in a specific location.
- Rely on the use of delivery companies to reduce the number of client or customer visits to the workplace.
- Develop emergency communications plans.
- Maintain a forum to communicate with employees and to address concerns.
- Use internet-based communications for employees if possible.
- Encourage and enforce good hygiene practices.

7.4. **Work Practices:** The following are potential work practices that may minimize the spread of a contagion in the workplace by reducing the duration, frequency, or intensity of exposure:

- Support good manufacturing practices, provide resources and a work environment that promotes personal hygiene.
Provide tissues, no-touch trash cans, hand soap, hand sanitizer, hand towels, disinfectants and disposable wipes for workers to clean their work surfaces.

- Encourage workers to obtain a seasonal influenza vaccine.
- Provide workers with up-to-date education and training on risk factors and protective behaviors.
  - Hand hygiene.
  - Cough and sneeze etiquette.
  - Avoid touching your face, specifically your eyes, nose and mouth.
  - Avoid skin to skin contact with others, such as hand shaking. Substitute with elbow bumps, waving, nodding, etc.
  - Keep work areas clean and disinfected.
  - Stay home when sick and do not send sick children to school or day care.
- Provide education and training materials in an easy to understand format and in the appropriate language and literacy level for all employees.
- Develop procedures or provide appropriate barriers to minimize contacts between workers and between workers and clients or customers.

7.5. **Personal Protective Equipment (PPE):** The following are potential personal protection equipment that may minimize the spread of a contagion in the workplace. While engineering and administrative controls and proper work practices are more effective in minimizing exposure to infectious illnesses, the use of PPE may also be indicated during certain exposure situations and during emergencies.

7.5.1. **PPE**
- **Respirators – N95**
  - Masks must be properly fitted
  - Users must be trained
- **Face shields (as needed)**
- **Goggles**
- **Disposable gloves (latex, nitrile or vinyl)**
- **Disposable gowns**

7.5.2. It is important that PPE be:
- Selected based on the hazard to the employee
- Conscientiously and properly worn
- Regularly maintained and replaced in accordance with the manufacturer’s recommendations
- Properly removed and disposed of to avoid contamination of self, others or the environment
- If reusable, properly removed, cleaned, disinfected and stored

7.6. **Antibacterial Hand Sanitizers, Wipes and Cleaners:**
- The Centers for Disease Control and Prevention recommends:
8. COMMUNICATIONS

8.1. Throughout epidemic event, accurate and up to date information will be critical to a successful response. Information will need to be provided to the following audiences:

- Employees
- Product Suppliers, Vendors, Contractors, Consultants
- Customers, Clients

8.2. Responsibility for Communication Content and Approval

8.2.1. Communication Content will be developed by the following individuals:

- List names, title
- Alternate name, title

8.2.2. Communication content will be approved for dissemination by the following individuals:

- List name, title
- Alternate name, title

8.3. Modes of Communication

8.3.1. Email
8.3.2. Website Posting
8.3.3. Intranet Posting
8.3.4. Text Message
8.3.5. Phone Message
8.3.6. Dedicated Phone Number for Employees or Customers
8.3.7. In Person

8.4. Communication Modes Information Table

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8.5. Information to be disseminated will be dependent on Alert Level of event. See Section 10.

9. EMPLOYEE TRAINING

9.1. Training will be provided to employees on the following topics:
   9.1.1. Contagion Awareness
   9.1.2. Hand Hygiene and Respiratory Etiquette
   9.1.3. Social Distancing
   9.1.4. PPE
   9.1.5. Workplace Cleaning and Disinfection
   9.1.6. Illness Notification and Reporting
   9.1.7. Return to Work Protocols

   9.1.8. Additional training will be provided for employees determined to have additional exposures such as ERT members, Custodial and Health & Safety employees

10. EMERGENCY RESPONSE PERSONNEL & EPIDEMIC RESPONSE

10.1. The Emergency Response Team and Program Administrator, in coordination with facility management, will implement these common procedures based on the following established alert levels:
   - Level 1 – Human to Human transmissible virus identified outside the area of facility operations
   - Level 2 – Confirmed cases in the state/region
- Level 3 – Confirmed cases in the immediate area/city
- Level 4 – Widespread infection, Epidemic/Pandemic Declaration
- Level 5 – Post Epidemic

10.2 Level 1 Actions:
- Estimate the impact of an epidemic on Company Name services.
- Ensure epidemic infectious illness plans and protocols are in place.
- Review internal emergency response procedures (refer to the Emergency Response Plan).
- Establish contact and plan with state and local public health agencies as needed.
- Update and/or inventory resources, input materials and ensure that suppliers have adequate business continuity plans.
- Establish/maintain inventory of personal protective equipment (PPE).
- Develop and maintain contact lists of Company Name personnel (including work and home communication information).
- Conduct education/training for employees on the facility’s Epidemic Plan and Personal Epidemic Plan to reduce absenteeism.

10.3 Level 2 Actions:
- Continue activities of the pre-epidemic period.
- Review and update Company Name Infection Prevention and Control Plan with management.
- Review, revise as needed, and activate guidelines for prevention and control measures.
- Maintain contact and continue planning with state and local public health agencies.
- Provide training to employees as appropriate to include:
  - Infectious Illnesses
  - Prevention activities (i.e. hand washing, social distancing, etc.)
  - Home care of those who have fallen ill
- Exercise each of the key components of the plan and revise/adjust plan accordingly.

10.4 Level 3 Actions:
- Activate the Infection Prevention and Control Plan.
- Improve sanitation of surfaces, shared machinery/equipment and other public areas.
- Provide hand sanitizer, proper cleaning solutions and wipes.
- Remain up to date on the latest recommendations from governmental public health authorities.
- Implement a plan for early detection, reporting and treatment of personnel.
- Reinforce infection control procedures to prevent the spread of infectious disease.
• Reinforce use of appropriate PPE.
• Post additional signage for respiratory hygiene/cough etiquette, stay home if sick, hand hygiene.
• Follow guidelines for when sick staff can return to work.

10.5 Level 4 Actions:
• All Level 3 Actions
• Screen all incoming employees and visitors for infectious illness - temperature screenings (ADA “Direct Threat” threshold must be met), questionnaire.
• Limit visitors and non-essential personnel.
• Increase social distancing practices to include all gatherings, meetings, client visits, customer contact.
• Anticipate possible facility closure, self-isolation, shelter in place order from local or state government.
• Implement business continuity plans.

10.6 Level 5 Actions:
• Scale back activities as appropriate, returning to pre epidemic period activities.
• Initiate recovery operations, consider stress management training and crisis counseling (as needed).
• Summarize and analyze the epidemic response and lessons learned for future epidemic situations.
• Update Self-Assessment Checklist.
• Review and revise the control plan based on outcome measurements and performance results of the current plan.
• Rebuild/reinstate services.

11. REVISION HISTORY

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