AGC of Minnesota COVID-19 Recommended Practices (including best practices) for Construction Jobsites

The world health community continues to monitor the emergence of the SARS-CoV-2 virus and the disease it causes. The virus, named “corona virus disease 2019 (COVID-19)” has already had a tremendous impact on our daily lives, including the way AGC of Minnesota and its Contactors conduct business. The AGC Contractors are committed to the protection of all construction employees, trade partners and the communities in which we do business.

All contractors should incorporate COVID-19 transmission and prevention into all job hazard analyses (JHAs) and pre-task safety planning for all aspects of the work. This tool is provided solely as a guideline for contractors and is not to be relied upon to prevent the spread or transmission of COVID-19, or prevent a safety violation from being issued by a jurisdictional authority. This is not legal advice. Contractors should continually evaluate the specific hazards at their job sites along with the Centers for Disease Control and Prevention (CDC) recommendations to determine the most appropriate job hazard analysis for the project/task as it relates to the spread and/or transmission of COVID-19.

Worker Personal Responsibilities

- It is critical that individuals NOT report to work or stay at work if they are experiencing symptoms of acute respiratory illness (i.e., fever, cough, shortness of breath, sore throat, runny/stuffy nose, body aches, chills, or fatigue). Individuals should seek medical attention if they develop these symptoms. They must stay home and not come to work until free of symptoms for at least 72 hours, without the use of medicine, or as recommended by the CDC. Refer to CDC guideline: What To Do if You Are Sick. [https://www.cdc.gov/coronavirus/2019-ncov/if-you-are-sick/steps-when-sick.html](https://www.cdc.gov/coronavirus/2019-ncov/if-you-are-sick/steps-when-sick.html)
- Employees must notify their supervisors and stay home if they are sick. They must consult medical attention if they develop symptoms of acute respiratory illness.
- Employees are discouraged from using other workers’ phones, I Pads, electronic devices, desks, workstations, offices, tools, and equipment including (PPE) personal protective equipment.

Disease Transmission

COVID-19 is transmissible by respiratory secretions such as saliva or mucus. Infected individuals can spread it by introducing the virus into the air, which can then be inhaled by other individuals nearby. Though unproven, there is also concern that COVID-19 may be transmitted by touching a surface or object that has the virus on it and then touching your mouth, nose or eyes. For these reasons, people
are advised to cover their cough, wash their hands, and disinfect frequently touched surfaces to prevent transmission of the disease.

- **(Best Practice)** Develop an COVID-19 Response Team at all levels in your organization.
- **(Best Practice)** Create a job-site specific “Safety Committee” with participation from all trades including names, e-mail addresses, phone number / text messaging so the field can report real time information regarding any concerns related health hazards including unsafe practice’s / housekeeping / unsanitary conditions.

### Social Distancing

Social distancing is a new concept to most of us. To prevent transmission of the virus through the air through saliva or mucus, the CDC recommends maintaining a distance of 6 feet from another person. By maintaining a proper “social distance” of 6 feet from others, we will prevent transfer of the virus when someone coughs, sneezes or speaks.

- **Work in occupied areas should be limited to only those tasks that are strictly necessary.**
- Limit physical contact with others. Direct employees to increase personal space (to at least 6 feet, where possible).
- **(Best Practice)** Conduct immediate workflow audits that remove instances of employees being within 6’ of each other.
- **(Best Practice)** Whenever possible don’t stack trades.
- **(Best Practice)** Develop and communicate scheduled stagger use of “Skip, Elevator, Stairwell” volumes control for build entry and exit procedures.
- **(Best Practice)** Develop and communicate “Emergency Action Plan” with rally points for 10 people of less outside & inside including severe weather shelters.
- When possible, limit out-of-office meetings and replace them with phone or online meetings.
- Take breaks and lunch in shifts to reduce the size of the group in the lunch area at any one time to less than 10 people.
- **(Best Practice)** Stagger shifts and/or break times to allow social distancing when this is not achievable due to space limitations.
- Reconfigure break spaces to allow “social distancing” of 6 feet.
- Clean and disinfect break tables at the end of break.
- Do not congregate in lunch / break areas.
- Subcontractor foremen and project managers should communicate with their general contractors about prohibiting large gatherings (currently no more than 10 people) on the job site, such as the all-hands meeting and all-hands lunches.
- Discourage hand-shaking and other contact greetings.
- Do not hold, or participate in site-wide meetings, stand-downs, celebrations or lunches whenever possible.
- **Morning Stretch and Flex and Toolbox Talk safety meetings to continue at a crew level while maintaining social distancing of 6 feet or more.**
• When in-person meetings are required, maintain social distancing.
• Eliminate community provided food (such as lunch buffets, donuts, candy dishes, etc…..).
• Eliminate community coffee pots, water dispensers, hot boxes and microwaves from break and other common areas.

Visitor and Employee Screening
In addition to limiting outside visitors from all work locations, persons returning to a jobsite or office location and participants in essential meetings must be screened before being allowed at any work location. The screening will follow CDC recommendations and ask the following questions:
1. Have you been diagnosed with COVID-19?
2. Are you currently or have you in the past 14 days experienced fever (100.4°F or higher) without using fever reducing medication, coughing or shortness of breath?
3. Have you traveled internationally, been on a cruise, or been to any domestic location categorized as Level 3/high risk by the CDC in the last 14 days?
4. In the last 14 days, have you been in close contact* (see below for definition) with anyone who has been diagnosed with COVID-19?
5. In the last 14 days, have you been in close contact* (see below for definition) with anyone who: a. Is experiencing symptoms and may have COVID-19 but is yet to be confirmed as a positive OR b. who has been exposed to someone with a confirmed case of COVID-19?

*CLOSE CONTACT is defined as:
• Being within approximately 6 feet (2 meters) of a COVID-19 case or potential case for a prolonged period of time; close contact can occur while caring for, living with, working with, visiting, or sharing a healthcare waiting area or room with a COVID-19 case or potential case OR
• Having direct contact with infectious secretions of a COVID-19 case or potential case (e.g. being coughed on)

If the person answers yes to any of the questions above, their access to all work locations is prohibited until a member of the COVID-19 Response Team reviews their response and contacts them to discuss their return to the work location. If the response team determines the person must quarantine for a period of time, they will again need to complete the screening questionnaire prior to returning to a work location.

Jobsite / Office Practices
• Communicate key CDC recommendations (and post signage where appropriate) to your staff and tradespeople: o How to Protect Yourself https://www.cdc.gov/coronavirus/2019-ncov/prepare/prevention.html
o If You are Sick . https://www.cdc.gov/coronavirus/2019-ncov/if-you-are-sick/steps-when-sick.html
• Place posters that encourage staying home when sick, cough and sneeze etiquette, and hand hygiene at the entrance to your workplace and in other workplace areas where they are likely to be seen.
Supervisors should ask the following questions to all employees prior to entering the jobsite. If they answer “yes” to any, they should be asked to leave the jobsite immediately. Anyone asked to leave should not return to work until 24-hours after they are free from a fever or signs of a fever without the use of fever-reducing medication.

- Have you, or anyone in your family, been in contact with a person that has tested positive for COVID-19?
- Have you, have you been in close contact with a person that is in the process of being tested for COVID-19?
- Have you traveled internationally, been on a cruise, or been to any domestic location categorized as Level 3/high risk by the CDC in the last 14 days?
- Have you been medically directed to self-quarantine due to possible exposure to COVID-19?
- Are you having trouble breathing or have you had flu-like symptoms within the past 48 hours, including: fever, cough, shortness of breath, sore throat, runny/stuffy nose, body aches, chills, or fatigue?

Instruct employees to clean their hands often with an alcohol-based hand sanitizer that contains at least 60-95% alcohol, or wash their hands with soap and water for at least 20 seconds. Soap and water should be used preferentially if hands are visibly dirty.

- Provide soap and water and alcohol-based hand rubs in the workplace. Ensure that adequate supplies are maintained. Place hand rubs in multiple locations or in conference rooms to encourage hand hygiene.
- Do not share tools or any multi-user devices and accessories such as iPads, laptops, hand-held radios, computer stations, etc.
- Limit the exchange/sharing of paper documents by encouraging use of electronic communication whenever possible.
- Do not share personal protection equipment (PPE).
- Sanitize reusable PPE per manufacturer’s recommendation prior to each use.
- Ensure used PPE is disposed of properly.
- Utilize disposable gloves where appropriate; instruct workers to wash hands after removing gloves. Disinfect reusable supplies and equipment.
- Identify specific locations and practices for daily trash such as: paper, hand towels, food containers, etc. Instruct workers responsible for trash removal in proper PPE/hand washing practices.
- Provide routine environmental cleaning (doorknobs, keyboards, counters, and other surfaces).
- Do not use a common water cooler. Provide individual water bottles or instruct workers to bring their own.
- Utilize shoe sanitation tubs (non-bleach sanitizer solution) prior to entering/leaving jobsite).
- Instruct workers to change work clothes prior to arriving home; and to wash clothes in hot water with laundry sanitizer.
- Instruct workers leaving the jobsite because of illness to collect their personal possessions before exiting the worksite.
- Utilize disposable hand towels and no-touch trash receptacles.
- Request additional/increased sanitation (disinfecting) of portable toilets.
• Avoid cleaning techniques, such as using pressurized air or water sprays that may result in the generation of bioaerosols.
• Clean surfaces of heavy equipment enclosed cabs including service/fleet vehicles, steering wheel, gear shift, instrument panels, etc.; use aerosol sanitizers inside closed cabs.
• Replace cabin air filters if you suspect they have been exposed or compromised by sick employee.
• In regard to shuttling employees, ensure distancing and encourage workers to provide their own transportation where possible.

Personal Protective Equipment (PPE)

• Gloves: Gloves should be worn at all times while on site. The type of glove worn should be appropriate to the task. If gloves are not typically required for the task, then any type of glove is acceptable, including latex gloves, nonsterile disposable.
• Eye protection: Eye protection should be worn all times while on site.
• The CDC is currently not recommending that healthy people wear face masks. On March 17, 2020, the government asked all construction companies to donate N95 face masks to local hospitals and forego future orders for the time being. Contractors should continue to provide and direct employees to wear face masks if required by the work.

Managing Sick Employees

• Actively encourage sick employees to stay home. Employees who have symptoms of acute respiratory illness are recommended to stay home and not return to work until they are free of fever (100.4°F [38.0°C] or greater using an oral thermometer), signs of a fever, and any other symptoms for at least 24 hours, without the use of fever-reducing or other symptom-altering medicines (e.g. cough suppressants). Employees should notify their supervisor and stay home if they are sick.

• Separate sick employees. CDC recommends that employees who appear to have acute respiratory illness symptoms (i.e. cough, shortness of breath) upon arrival to work or become sick during the day should be separated from other employees and be sent home immediately.
• (Best Practice) Have a jobsite specific COVID-19 Response Plan for if a worker become sick at work and needs to leave the worksite. Document location on site where employee was performing task, travel route taken by employee exiting the worksite, was the employee wearing a filtering-facepiece respirator? Did the employee take their personal items with them?

• (Best Practice) Supervisor should identify all possibly affected workers in the area.

• (Best Practice) Develop a “Infection Control Plan”
  • A successful infection control program for pandemic influenza utilizes the same strategies implemented for any infectious agent,
  • Including facility and environmental controls (i.e., engineering controls), standard operating procedures (i.e., administrative controls),
• Personal protective clothing and equipment, and safe work practices.
• These strategies form the basis of standard precautions and transmission-based precautions.

• Given that the exact transmission pattern or patterns will not be known until after the pandemic influenza virus emerges, transmission-based infection control strategies may have to be modified to include additional selections of engineering controls, personal protective equipment (PPE), administrative controls, and/or safe work practices.
• [Website Link]

Communicate your company’s Human Resources practices for managing sick time related to COVID-19.
Very High Exposure Risk

*Very high exposure risk* jobs are those with high potential for exposure to known or suspected sources of COVID-19 during specific medical, postmortem, or laboratory procedures. Workers in this category include:

**High Exposure Risk**

High exposure risk jobs are those with high potential for exposure to known or suspected sources of COVID-19. Workers in this category include:

Healthcare delivery and support staff (e.g., doctors, nurses, and other hospital staff who must enter patients’ rooms) exposed to known or suspected COVID-19 patients. (Note: when such workers perform aerosol-generating procedures, their exposure risk level becomes *very high.*)

Medical transport workers (e.g., ambulance vehicle operators) moving known or suspected COVID-19 patients in enclosed vehicles.

Mortuary workers involved in preparing (e.g., for burial or cremation) the bodies of people who are known to have, or suspected of having, COVID-19 at the time of their death.

Medium Exposure Risk

*Medium exposure risk* jobs include those that require frequent and/or close contact with (i.e., within 6 feet of) people who may be infected with SARS-CoV-2, but who are not known or suspected COVID-19 patients. In areas without ongoing community transmission, workers in this risk group may have frequent contact with travelers who may return from international locations with widespread COVID-19 transmission. In areas where there is ongoing community transmission, workers in this category may have contact be with the general public (e.g., in schools, high-population-density work environments, and some high-volume retail settings).
Lower Exposure Risk (Caution)

*Lower exposure risk (caution)* jobs are those that do not require contact with people known to be, or suspected of being, infected with SARS-CoV-2 nor frequent close contact with (i.e., within 6 feet of) the general public. Workers in this category have minimal occupational contact with the public and other coworkers.

**Jobs Classified at Lower Exposure Risk (Caution): What to Do to Protect Workers**

For workers who do not have frequent contact with the general public, employers should follow the guidance for “Steps All Employers Can Take to Reduce Workers’ Risk of Exposure to SARS-CoV-2,”

**Engineering Controls**

Additional engineering controls are not recommended for workers in the lower exposure risk group. Employers should ensure that engineering controls, if any, used to protect workers from other job hazards continue to function as intended.

**Administrative Controls**


Collaborate with workers to designate effective means of communicating important COVID-19 information.

**Personal Protective Equipment**

Additional PPE is not recommended for workers in the lower exposure risk group. Workers should continue to use the PPE, if any, that they would ordinarily use for other job tasks.

**AGC & Government Resources**

- AGC of Minnesota is committed to serving our members as Your Trusted Resource throughout this public health crisis. [https://www.agcmn.org/safety/covid-19](https://www.agcmn.org/safety/covid-19)

- AGC of America has assembled general guidance and links to information from our federal agency partners and health organizations. [https://www.agc.org/coronavirus-covid-19](https://www.agc.org/coronavirus-covid-19)

**Proactive Measures for Addressing COVID-19**

- Pre-screening Questionnaire
- Preventing and Responding to a Suspected or Confirmed Positive Case of COVID-19

- For OSHA standards and directives and other related information that may apply to worker exposure to COVID-19, visit their website: [https://www.osha.gov/SLTC/covid-19/standards.html](https://www.osha.gov/SLTC/covid-19/standards.html)