



COVID-19 Mitigation Measures for Protection of Workers Plan



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REVISION NUMBER: 18

DATE: August 17, 2021

GUIDANCE

1. CURRENT MITIGATION MEASURES IN EFFECT:

a. Face Masks:

- Regardless of vaccination status, everyone is required to wear a mask indoors. The only time you can take off your mask is when you are actively eating or drinking or when you are working alone in a floor-to-ceiling office with a door that closes.
- Masks are required to be worn by all vehicle occupants when in shared vehicles.
- Masks can be removed when working or performing activities outdoors and maintaining 6 feet of physical distance from others.
- Employees who wish to request an accommodation for mask usage due to a medical condition or a sincerely-held religious belief should contact their organization's Human Resources department. Each request will be carefully assessed on a case-by-case basis.

b. Physical Distancing:

- Fully-Vaccinated Personnel — [Per the CDC's latest preventive guidelines](#), everyone should exercise an abundance of caution by physically distancing at least 6 feet from others who do not live in their household.
- Non-Fully-Vaccinated Personnel — Required to practice physical distancing.

c. Occupancy Limits:

- Any **DOE-hosted** in-person meeting, conference, or event that will be attended by more than 50 participants (regardless of whether participants include members of the public) must first be approved by the Secretary of Energy, in consultation with the DOE COVID-19 Coordination Team.
- Building occupancy limits remain at 25% of normal occupancy. For conference rooms and meetings, assume all attendees are unvaccinated and space attendees 6 feet from one another.
- Maximizing remote work remains a priority to reduce potential transmission of COVID-19.
- Nevada National Security Site (NNSS) Commuter Bus occupancy remains at 50%.

d. Daily Self-Health Checks:

- Daily self-health checks are required prior to working on site.
- Stay home when you are sick and reach out to Occupational Medicine if you have been exposed to or tested positive for COVID-19 at 702.295.1473.

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2. BACKGROUND:

- a. On February 11, 2020, the World Health Organization announced an official name for the disease that caused the 2019 novel coronavirus outbreak, first identified in Wuhan, China. Formerly, this disease was referred to as “2019 novel coronavirus” or “2019-nCoV.” The new name of this disease is coronavirus disease 2019, abbreviated as COVID-19. In COVID-19, ‘CO’ stands for ‘corona,’ ‘VI’ for ‘virus,’ and ‘D’ for disease.
- b. This plan incorporates the elements of [U.S. Department of Energy COVID-19 Workplace Safety Plan, May 20, 2021](#).
- c. This plan incorporates the elements of National Nuclear Security Administration COVID-19 Workplace Safety Plan, April 30, 2021.

3. TARGET AUDIENCE:

- a. All Nevada Enterprise (NvE) personnel engaged in recovery, restart, limited operations, and normal operations with maximized telework at the NNSS, North Las Vegas Facility (NLVF), and other outlying locations.
- b. Subcontractors, visitors, vendors, public, etc., shall be provided this plan and are expected to follow the requirements. It is the responsibility of the Subcontract Technical Representative (STR) or host to ensure receipt, understanding, and compliance. This plan should be included in all applicable subcontractor agreements and work documents. Any deviations or additional measures will be reviewed and approved by the Site Occupational Medical Director.
- c. Labor Relations will be notified of any updates to any COVID-19 protocols that impact bargaining unit personnel as soon as possible. Labor Relations will be responsible for communicating, as necessary, to the Unions, in conjunction with management.

4. OBJECTIVES:

- a. The health and safety of the workforce and public is the highest priority.
- b. Provide a set of consistent protocols to be initiated immediately that will enhance worker protection while minimizing exposure risk.
- c. Halt the spread of COVID-19 by relying on the best available data and science-based public health measures. Such measures include wearing masks when around others, physical distancing, and other related precautions recommended by the CDC. Masks and other public health measures reduce the spread of the disease, particularly when communities make widespread use of such measures.
- d. Maintain a healthy business operations and work environment.

5. KEY ASSUMPTIONS:

- a. The NvE will reassess the people, the supporting documentation, and the added controls to ensure the workplace is “COVID-19 safe” prior to releasing individuals back to work.
- b. Work activities will be reviewed to implement mitigation measures for the detailed work activities.
- c. These mitigation protocols will be updated regularly and will be implemented until the COVID-19 health status has been lifted.

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- d. During widespread community transmission, telework and remote work will be maximized for those whose work is conducive to telework/remote work or who have extenuating circumstances. Individuals currently working remotely or not regularly on site will remain in telework status. A minimum of 2 weeks advance notice will be provided to teleworkers before returning to the physical workplace. Nuclear Emergency Support Team personnel on telework must be able to report to their duty station within 4 hours of notice during duty hours, when not otherwise on leave or travel status.
- e. In general, for sites experiencing high community prevalence or transmission where the majority of the employees can effectively telework, the goal is to operate at 25% of normal building occupancy standards or lower. This is accomplished through additional controls at building entrance points, management monitoring, and other means. Occupancy limits and widespread community transmission are defined and discussed in the Secretary of Energy Memorandum, DOE COVID-19 Workplace Safety Plan Approach to Building Occupancy, March 2021. Reduced occupancy limits will be communicated.
- f. Managers/Supervisors are expected to ensure the elements of this plan are communicated and followed by employees.
- g. It is everyone's responsibility to ensure a safe and healthful work environment. The foundation of our safety culture is that we care about each other and this extends beyond the workplace. We must be vigilant and challenge one another when poor and noncompliant behaviors are observed.
- h. NvE personnel are expected to comply with the COVID-19 protocols while on the NNSC and in NNSC controlled facilities and buildings. Failure to comply may result in disciplinary action, up to and including unpaid suspension or termination, and/or denied access to the NNSC and NNSC controlled facilities and buildings.
- i. Non-NvE personnel (e.g., subcontractors, visitors, vendors, or public) are expected to comply with the COVID-19 protocols while on the NNSC and in NNSC controlled facilities and buildings. Failure to comply may result in denied access to the NNSC and NNSC controlled facilities and buildings.
- j. All personnel are expected to comply with their respective mandated state and local municipality COVID-19 safety requirements. Failure to do so may result in individual isolation/quarantine and denied access to the NNSC and NNSC-controlled facilities and buildings, as directed by Occupational Medicine.

6. MITIGATION MEASURE PROTOCOLS

- a. Mitigation measure protocols are intended to minimize risk of exposure to COVID-19 and are developed based on authoritative guidance (e.g., CDC, Occupational Safety and Health Administration [OSHA] and other World Health Organizations).
- b. **People at Increased Risk**
 - People at risk or who have medical or other concerns should contact their respective American with Disabilities Act (ADA) Coordinator for further guidance. All communications must be compliant with ADA confidentiality requirements, keeping information related to an individual's health as confidential as possible.
 - [Unvaccinated](#)
 - [Older Adults](#)
 - [People with Medical Conditions](#)

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- **Other People Who Need Extra Precautions**
 - [Racial and Ethnic Minority Groups](#)
 - [Pregnancy and Breastfeeding](#)
 - [People with Disabilities](#)
 - [Developmental and Behavioral Disorders](#)
 - [Drug Use and Substance Use Disorder](#)
 - [People Living in Rural Communities](#)
 - [Others](#)
- c. **Guiding Principles for Fully Vaccinated People**
 - Outdoor activities pose minimal risk to fully vaccinated people.
 - Most indoor activities pose low risk to fully vaccinated people, especially in areas with low or moderate transmission.
 - Infections happen in only a small proportion of people who are fully vaccinated, even with the Delta variant.
 - Fully vaccinated people who become infected with the Delta variant can transmit it to others.
 - To reduce their risk of becoming infected with the Delta variant and potentially spreading it to others, CDC recommends that fully vaccinated people:
 - Wear a mask in public indoor settings if they are in an area of [substantial or high transmission](#).
 - Fully vaccinated people might choose to mask regardless of the level of transmission, particularly if they or someone in their household is immunocompromised or at [increased risk for severe disease](#), or if someone in their household is unvaccinated.
 - Get tested if experiencing [COVID-19 symptoms](#).
 - Isolate if they have tested positive for COVID-19 in the prior 10 days or are experiencing [COVID-19 symptoms](#).
 - Get tested 3–5 days after exposure to someone with suspected or confirmed COVID-19 and wear a mask in public indoor settings for 14 days after exposure or until they receive a negative test result.
 - Continue to follow any applicable federal, state, local, tribal, or territorial laws, rules, and regulations.
- d. **Travel:** Applies to international and domestic travel.
 - Please check the CDC travel webpage for additional information and any travel health notices (<https://www.cdc.gov/coronavirus/2019-ncov/travelers/index.html>)
 - Please review the Executive Order on Promoting COVID-19 Safety in Domestic and International Travel (<https://www.whitehouse.gov/briefing-room/presidential-actions/2021/01/21/executive-order-promoting-covid-19-safety-in-domestic-and-international-travel/>)

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- **Personal International Travel:**
 - Do not travel internationally until you are **fully vaccinated**. If you are not fully vaccinated and must travel, follow CDC's international travel recommendations for unvaccinated people.
 - Fully vaccinated travelers are less likely to get and spread COVID-19. However, international travel poses additional risks, and even fully vaccinated travelers might be at increased risk for getting and possibly spreading some COVID-19 variants.
 - The COVID-19 situation, including the spread of new or concerning variants, differs from country to country. All travelers need to pay close attention to the [conditions at their destination](#) before traveling.
 - Notify counterintelligence, your supervisor, and Occupational Medicine of your international travel route and dates.
 - COVID-19 risk in most countries is high, and travelers should avoid nonessential travel to high-risk destinations. Travelers at [increased risk for severe illness](#) should consider postponing all travel, including essential travel, to high-risk destinations. To check a destination's COVID-19 risk level see [COVID-19 Travel Recommendations by Destination](#).
 - If traveling internationally or across international borders, check with the destination's Office of Foreign Affairs or Ministry of Health or the United States ([U.S.](#)) [Department of State, Bureau of Consular Affairs, Country Information page](#) for details about entry requirements and restrictions for arriving travelers, such as mandatory testing or [quarantine](#).
 - Review the CDC COVID-19 Travel Recommendations by Country to understand the potential health risk (<https://www.cdc.gov/coronavirus/2019-ncov/travelers/map-and-travel-notice.html>).
 - Review the U.S. Department of State COVID-19 Traveler Information for the current information for travelers returning to the U.S. (<https://travel.state.gov/content/travel/en/traveladvisories/ea/covid-19-information.html>).
 - Enroll in the [Smart Traveler Enrollment Program \(STEP\)](#) to receive up-to-date safety and security information.
 - Make sure you understand and follow all airline and destination requirements related to travel, testing, or quarantine, which may differ from U.S. requirements. If you do not follow your destination's requirements, you may be denied entry and be required to return to the United States.
 - All air passengers coming to the U.S., **including U.S. citizens and fully vaccinated people, are required** to have a negative COVID-19 test result no more than 3 days before travel or documentation of recovery from COVID-19 in the past 3 months before they board a flight to the United States.
 - [CDC International Travel Recommendations for People Fully Vaccinated](#)
 - Before you travel
 - Make sure you understand and follow all airline and destination requirements related to travel, mask wearing, testing, or quarantine, which may differ from U.S. requirements. If you do not follow your destination's requirements, you may be denied entry and required to return to the United States.

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- Check the current [COVID-19 situation at your destination](#).
- During traveling:
 - [Wearing a mask over your nose and mouth is required](#) on planes, buses, trains, and other forms of public transportation traveling into, within, or out of the United States and while indoors at U.S. transportation hubs such as airports and stations. Travelers are not required to wear a mask in outdoor areas of a conveyance (like on open deck areas of a ferry or the uncovered top deck of a bus).
 - Follow all recommendations and requirements at your destination, including mask wearing and physical distancing.
- Before you arrive in the United States:
 - All air passengers coming to the United States, including U.S. citizens and fully vaccinated people, [are required](#) to have a negative COVID-19 test result no more than 3 days before travel or documentation of recovery from COVID-19 in the past 3 months before they board a flight to the United States.
- After travel:
 - Get tested with a [viral test](#) 3–5 days after travel.
 - Self-monitor for COVID-19 symptoms; isolate and get tested if you develop symptoms.
 - Follow all [state and local](#) recommendations or requirements after travel.
- [CDC International Travel Recommendations for People Not Fully Vaccinated](#)
 - Before you travel:
 - Get tested with a [viral test](#) 1–3 days before your trip.
 - Make sure you understand and follow all airline and destination requirements related to travel, testing, or quarantine, which may differ from U.S. requirements. If you do not follow your destination's requirements, you may be denied entry and be required to return to the United States.
 - Check the current [COVID-19 situation at your destination](#).
 - While you are traveling:
 - [Wearing a mask over your nose and mouth is required](#) on planes, buses, trains, and other forms of public transportation traveling into, within, or out of the United States and while indoors at U.S. transportation hubs such as airports and stations. Travelers are not required to wear a mask in outdoor areas of a conveyance (like on open deck areas of a ferry or the uncovered top deck of a bus). CDC recommends that travelers who are not [fully vaccinated](#) continue to wear a mask and maintain physical distance when traveling.
 - Avoid crowds and stay at least 6 feet (about 2 arm lengths) from anyone who is not traveling with you.
 - Wash your hands often or use hand sanitizer (with at least 60% alcohol).

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- Before you arrive in the U.S.:
 - All air passengers coming to the U.S., **including U.S. citizens and fully vaccinated people**, [are required](#) to have a negative COVID-19 test result no more than 3 days before travel or documentation of recovery from COVID-19 in the past 3 months before they board a flight to the United States.
- After travel:
 - Get tested with a [viral test](#) 3–5 days after travel AND stay home and self-quarantine for a full 7 days after travel.
 - Even if your test is negative, stay home and self-quarantine for the full 7 days.
 - If your test is positive, [isolate](#) yourself to protect others from getting infected.
 - If you don't get tested, stay home and self-quarantine for 10 days after travel.
 - Avoid being around people who are at [increased risk for severe illness](#) for 14 days, whether you get tested or not.
 - Self-monitor for COVID-19 symptoms; isolate and get tested if you develop symptoms.
 - Follow all [state and local](#) recommendations or requirements after travel.
- International Travel Infographic

CORONAVIRUS DISEASE 2019 (COVID-19)

International Travel <small>RECOMMENDATIONS AND REQUIREMENTS</small>	Not Vaccinated	Fully Vaccinated
Get tested 1-3 days before traveling out of the US	✓	
Mandatory test required before flying to US	✓	✓
Get tested 3-5 days after travel	✓	✓
Self-quarantine after travel for 7 days with a negative test or 10 days without test	✓	
Self-monitor for symptoms	✓	✓
Wear a mask and take other precautions during travel	✓	✓



cdc.gov/coronavirus

CS323515-A 04/02/2021

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- **Personal Domestic Travel:**
 - Delay travel until you are fully vaccinated. If you are not fully vaccinated and must travel, follow CDC's recommendations for unvaccinated people.
 - People who are fully vaccinated with an FDA-authorized vaccine or a vaccine authorized for emergency use by the World Health Organization can travel safely within the United States.
 - Notify manager/supervisor of any personal domestic travel and provide travel route and dates.
 - Follow state, local, and territorial governments travel restrictions, including testing requirements, stay-at-home orders, and [quarantine](#) requirements upon arrival.
 - For up-to-date information and travel guidance, check the [state, territorial, tribal](#) and local health department where you are, along your route, and where you are going.
 - Prepare to be flexible during your trip as restrictions and policies may change during your travel.
 - Review the CDC Considerations for domestic travel (<https://www.cdc.gov/coronavirus/2019-ncov/travelers/travel-in-the-us.html>).
 - Review the CDC COVID Data Tracker and select the "Cases in Last 7 Days" view to identify states and territories with high new cases (Darker Color) to understand your potential personal health risk with the planned travel (<https://www.cdc.gov/covid-data-tracker/index.html#cases>).
 - Review the health department websites for each state and territory that you will be traveling through to understand specific protocols and restrictions (<https://www.cdc.gov/publichealthgateway/healthdirectories/healthdepartments.html>).
 - Follow [all state and local recommendations](#) or requirements.
 - [CDC Domestic Travel Recommendations for Fully Vaccinated People](#)
 - During Travel:
 - [Wearing a mask over your nose and mouth is required](#) on planes, buses, trains, and other forms of public transportation traveling into, within, or out of the United States and in U.S. transportation hubs such as airports and stations. Travelers are not required to wear a mask in outdoor areas of a conveyance (like on open deck areas of a ferry or the uncovered top deck of a bus).
 - Follow all [state and local](#) recommendations and requirements, including mask wearing and social distancing.
 - After Travel:
 - Self-monitor for COVID-19 symptoms; isolate and get tested if you develop symptoms.
 - Follow all [state and local](#) recommendations or requirements.
 - You do **NOT** need to get tested or self-quarantine if you are fully vaccinated or have recovered from COVID-19 in the past 3 months. You should still follow all other travel recommendations.

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- [CDC Domestic Travel Recommendations for People Not Fully Vaccinated](#)
 - If you are not fully vaccinated and must travel, take the following steps to protect yourself and others from COVID-19:
 - Before you travel:
 - Get tested with a [viral test](#) 1–3 days before your trip.
 - While you are traveling:
 - [Wearing a mask over your nose and mouth is required](#) on planes, buses, trains, and other forms of public transportation traveling into, within, or out of the United States and while indoors at U.S. transportation hubs such as airports and stations. Travelers are not required to wear a mask in outdoor areas of a conveyance (like on open deck areas of a ferry or the uncovered top deck of a bus). CDC recommends that travelers who are not [fully vaccinated](#) continue to wear a mask and maintain physical distance when traveling.
 - Avoid crowds and stay at least 6 feet (about 2 arm lengths) from anyone who is not traveling with you.
 - Wash your hands often or use hand sanitizer (with at least 60% alcohol).
 - After Travel:
 - Get tested with a [viral test](#) 3–5 days after travel **AND** stay home and self-quarantine for a full 7 days after travel.
 - Even if your test is negative, stay home and self-quarantine for the full 7 days.
 - If your test is positive, [isolate](#) yourself to protect others from getting infected.
 - If you don't get tested, stay home and self-quarantine for 10 days after travel.
 - Avoid being around people who are at [increased risk for severe illness](#) for 14 days, whether you get tested or not.
 - Self-monitor for COVID-19 symptoms; isolate and get tested if you develop symptoms.
 - Personnel may contact NNS Occupational Medicine, Matt Miele, at 702.295.0917 or MIELEMA@NV.DOE.GOV for quarantine determinations.
 - Follow [all state and local municipality recommendations](#) or requirements.

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- Domestic Travel Infographic

Domestic Travel <small>RECOMMENDATIONS AND REQUIREMENTS</small>	Not Vaccinated	Fully Vaccinated
Get tested 1-3 days before travel	✓	
Get tested 3-5 days after travel and self-quarantine for 7 days. Self-quarantine for 10 days if you don't get tested.	✓	
Self-monitor for symptoms	✓	✓
Wear a mask and take other precautions during travel	✓	✓

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- **Official Domestic and International Travel:**

- Official domestic and international travel is limited to mission critical travel and will be conducted in accordance with applicable CDC guidance, state, and local guidelines, as possible, and the January 21, 2021, [Executive Order Promoting COVID-19 Safety in Domestic and International Travel](#).
- The foundation for travel is based on a clear need, an understanding of risk and an associated plan to mitigate these risks, and the willingness of the traveler. Travel is limited based on the mission needs of the organization and local conditions at the point of origin, destination, and intermediate stops.
- **All mission essential travel must be approved by NNSC Senior Site Leadership**
 - Official Federal (NNSC) international/domestic travel is approved by the Head of the NNSC Element (e.g., NNSC/NFO Site Manager or delegate).
 - Official Federal (other than NNSC) international travel requires Under Secretary (or equivalent) approval or their designee.
 - Official NNSC/NFO M&O contractor international/domestic travel is approved by M&O contractor leadership (e.g., M&O President or delegate).
 - Other contractors should work through the cognizant contracting officer representative to receive appropriate approvals for official travel.
 - Concur should be used to document the travel approvals.
- Mission essential travel is defined in consideration and not limited to the following:
 - Travel is to perform critical duties that cannot be postponed.
 - Travel is required by statute or contract.
 - Travel is for systems or equipment inspections if those systems or equipment are integral to security, safety, or proper functioning of the mission.
 - Travel is for meetings/trainings required by a grant or to maintain grant funding.

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- Travel is for training to meet certification or licensing requirements or to maintain critical functional or occupational competencies.
 - Travel is for activities essential to national security.
- e. **Daily Health Self-Assessment:** Implement the following daily screening protocol for all personnel and visitors.
 - **Daily** prior to leaving their residence and throughout the work day personnel shall assess their health through the following questions:
 - Am **experiencing** any of these symptoms?
 - Fever or Chills
 - Cough
 - Shortness of Breath or Difficulty Breathing
 - Fatigue
 - Muscle, Body, or Joint Aches
 - Headache
 - New Loss of Taste or Smell
 - Sore Throat
 - Congestion or Runny Nose
 - Nausea or Vomiting
 - Diarrhea
 - Have **I had close contact (within 6 feet of an infected person for a cumulative total of 15 minutes or more over a 24-hour period starting 2 days before illness onset or for asymptomatic individuals, 2 days prior to test specimen collection).**
 - If personnel are experiencing any of the above symptoms (not all inclusive), any other symptoms that are severe or concerning, have had close contact exposure, or **unsure** they shall:
 - Notify their supervisor/manager of need to leave/stay home.
 - Separate themselves from others.
 - Stay home or go home safely if at work.
 - Contact Occupational Medicine (702.295.1473).
 - Personnel should also:
 - Consult the [CDC Self-Checker](#) to assist in determining potential COVID-19 infection and appropriate medical care.
 - Contact their Primary Health Care Provider.
 - If personnel are experiencing side effects from a recent COVID-19 vaccination and do not have an associated fever and do not have other COVID-19 symptoms, they may return to work when they feel well enough. If symptoms worsen or persist for more than several days, they need to follow the above steps for personnel experiencing symptoms.
 - If it is a medical emergency, call 911.
 - The **supervisor/manager** shall also contact Occupational Medicine (702.295.1473) and provide the name and contact information for the individual.

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- **Occupational Medicine** will conduct contact tracing as deemed necessary in context of local exposure circumstances in accordance with CDC and state guidance. For example, if an ill individual was in the workplace 48 hours prior to the onset of symptoms, Occupational Medicine will request the names and contact information for all individuals in the work place who had close contact during the preceding 48 hours to assist with contact tracing.
- **Occupational Medicine** will use the DOE COVID-19 Hotline case tracking application for new cases and case updates.
- **Occupational Medicine** will provide isolation instructions to personnel who are symptomatic (probable) and/or confirmed for COVID-19 and quarantine instructions to personnel who may have been exposed (close contact).
- **Probable COVID-19 Case** — Report of person meeting clinical **AND** epidemiological symptoms of COVID-19 but without confirmatory laboratory test results.
 - **Clinical Criteria**
 - At least two of the following symptoms: fever (measured or subjective), chills, rigors, myalgia, headache, sore throat, new olfactory and taste disorders
 - **OR** at least one of the following symptoms: cough, shortness of breath, or difficulty breathing
 - **OR** Severe respiratory illness with at least one of the following:
 - Clinical or radiographic evidence of pneumonia, or
 - Acute Respiratory Distress Syndrome (ARDS)
 - **AND** no alternative more likely diagnosis
 - **Epidemiological Criteria**
 - In a person with clinically compatible symptoms with one or more of the following exposures in the 14 days before onset of symptoms:
 - Travel to or residence in an area with sustained, ongoing community transmission of COVID-19
 - **OR** close contact with a person diagnosed with COVID-19
 - **OR** member of a risk cohort as defined by public health authorities
- **Confirmed COVID-19 Case** — Report of a person with COVID-19 meeting confirmatory laboratory evidence.
 - **Laboratory Criteria** — Laboratory evidence using a method approved or authorized by the U.S. Food and Drug Administration (FDA) or designated authority:
 - Confirmatory laboratory evidence:
 - Detection of severe acute respiratory syndrome coronavirus 2 ribonucleic acid (SARS-CoV-2 RNA) in a clinical specimen using a molecular amplification detection test
 - Presumptive laboratory evidence:
 - Detection of specific antigen in a clinical specimen
 - Detection of specific antibody in serum, plasma, or whole blood indicative of a new or recent infection

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- [Isolation](#) is used to separate people infected with COVID-19 from those who are not infected.
- People who are in isolation should stay home until it's safe for them to be around others. At home, anyone sick or infected should separate from others, stay in a specific "sick room" or area, and use a separate bathroom (if available).
 - **What to do**
 - Monitor your symptoms. If you have an [emergency warning sign](#) (including trouble breathing), seek emergency medical care immediately.
 - Stay in a separate room from other household members, if possible.
 - Use a separate bathroom, if possible.
 - Avoid contact with other members of the household and pets.
 - Don't share personal household items, like cups, towels, and utensils.
 - [Wear a mask](#) when around other people if able.
 - **When You Can Be Around Others After You Had or Likely Had COVID-19**
 - Most people do not require testing to decide when they can be around others; however, if your healthcare provider recommends testing, they will let you know when you can resume being around others based on your test results.
 - **For Anyone Who Has Been Around a Person with COVID-19**
 - Anyone who has had [close contact](#) with someone with COVID-19 should stay home for 14 days **after their last exposure** to that person.
 - However, anyone who has had close contact with someone with COVID-19 and who meets the following criteria does NOT need to stay home.
 - Someone who has been fully vaccinated and shows no symptoms of COVID-19. However, fully vaccinated people should get tested 3–5 days after their exposure even if they don't have symptoms and wear a mask indoors in public for 14 days following exposure or until their test result is negative.
 - **Or**
 - Someone who has COVID-19 illness within the previous 3 months **and**
 - Has recovered **and**
 - Remains without COVID-19 symptoms (for example, cough, shortness of breath).
 - **I think, or know, I had COVID-19 and I had symptoms**
 - You can be around others after:
 - 10 days since symptoms first appeared **and**
 - 24 hours with no fever without the use of fever-reducing medications **and**
 - Other symptoms of COVID-19 are improving.
 - *Loss of taste and smell may persist for weeks or months after recovery and need not delay the end of isolation.*

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- ***I tested positive for COVID-19 but had no symptoms***
 - If you continue to have no symptoms, you can be with others after 10 days have passed since you had a positive viral test for COVID-19.
 - If you develop symptoms after testing positive, follow the guidance above for “I think, or know, I had COVID-19 and I had symptoms.”
- ***I was severely ill with COVID-19 or have a weakened immune system (immunocompromised) caused by a health condition or medication***
 - People who are severely ill with COVID-19 might need to stay home longer than 10 days and up to 20 days after symptoms first appeared. [People with weakened immune systems](#) may require testing to determine when they can be around others. Talk to your healthcare provider for more information. Your healthcare provider will let you know if you can resume being around other people based on the results of your testing.
 - People who are immunocompromised should be counseled about the potential for reduced immune responses to COVID-19 vaccines and the need to continue to follow [current prevention measures](#) (including wearing [a mask](#), [staying 6 feet apart from others](#) they don't live with, and avoiding crowds and poorly ventilated indoor spaces) to protect themselves against COVID-19 until advised otherwise by their healthcare provider. Close contacts of immunocompromised people should also be encouraged to be vaccinated against COVID-19.
- **Quarantine** if you have been in [close contact](#) (within 6 feet of someone for a cumulative total of 15 minutes or more over a 24-hour period) with someone who has COVID-19, unless you have been [fully vaccinated](#). People who are fully vaccinated do NOT need to quarantine after contact with someone who had COVID-19 unless they have [symptoms](#). However, fully vaccinated people should get tested 3–5 days after their exposure, even if they don't have symptoms and wear a mask indoors in public for 14 days following exposure or until their test result is negative.
 - ***What to do***
 - Stay home for 14 days after your last contact with a person who has COVID-19.
 - Watch for fever (100.4°F), cough, shortness of breath, or [other symptoms](#) of COVID-19.
 - If possible, stay away from people you live with, especially people who are at [higher risk](#) for getting very sick from COVID-19.
 - ***After quarantine***
 - Watch for symptoms until 14 days after exposure.
 - If you have symptoms, immediately self-isolate and contact your local public health authority or healthcare provider.
 - ***You may be able to shorten your quarantine***
 - Local public health authorities and Occupational Medicine determine how long quarantine should last based on local conditions and needs. Follow the recommendations of your local public health department if you need to quarantine. Options they will consider include stopping quarantine:
 - After day 10 without testing

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- After day 7 after receiving a negative test result (test must occur on day 5 or later)
- All personnel who have any COVID-19 related symptoms or have been confirmed with COVID-19 will process through Occupational Medicine prior to returning to work.
- Personnel will return to work based on Occupational Medicine discretion, CDC guidance on discontinuance of home isolation, and coordination with the applicable supervisor/manager.
 - Once approved, these individuals may return to work if they remain asymptomatic and follow the requirements of this plan.
- Visible reminders identifying the list of symptoms shall be posted in work areas, facility access points, busses, and other high traffic areas.

Contact Scenario Guidance Table

CONTACT with a COVID-19 Positive Case and Not Fully Vaccinated			
Contact Scenario	Can I come to work?	Do I need to be tested?	Where do I go for care?
<p><u>You tested COVID-19 positive or were told by your doctor you have COVID</u></p> <p>You tested positive or have been told by your doctor or the local public health department that you have COVID.</p>	<p><u>NO!</u> you must remain self-isolated or quarantined until you meet the conditions, below:</p> <p><u>Obtain a clearance note from your doctor or</u></p> <p>Requires:</p> <ol style="list-style-type: none"> 1. At least 10 days since symptoms first appeared 2. AND at least 24 hours with no fever without fever-reducing medication 3. AND other symptoms of COVID-19 are improving 	<p>If your doctor orders it, yes.</p> <p>Inform your close contacts to quarantine</p> <ol style="list-style-type: none"> 1. Intimate or household contacts 2. Close contact with direct contact (< 6 feet, more than 15 minutes) 	<p>If your symptoms worsen, contact your care provider immediately.</p> <p><u>Notify Occupational Medicine 702.295.1473.</u></p>
<p><u>An intimate partner or household contact tests positive/told they have COVID-19</u></p> <p>(Highest Risk—if the positive contact had symptoms)</p> <ul style="list-style-type: none"> • Someone you live with: roommate, significant other, or intimate 	<p><u>NO!</u></p> <p>Quarantine:</p> <p>If symptomatic —</p> <ul style="list-style-type: none"> • 14 days <p>If not symptomatic —</p> <ul style="list-style-type: none"> • 10 days without testing 	<p><u>YES!</u></p> <p>Symptoms include: Fever, Chills, Cough, Shortness of Breath, Fatigue, Body Aches, Headache, Loss of Taste or Smell, Sore Throat, Congestion, Nausea, Vomiting or Diarrhea</p>	<p>Self-monitor symptoms every day for 14 days since last exposure. If you develop symptoms, contact your care provider.</p> <p><u>Notify Occupational Medicine 702.295.1473.</u></p> <p>Maintain precautions of physical distancing, mask</p>

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CONTACT with a COVID-19 Positive Case and Not Fully Vaccinated			
Contact Scenario	Can I come to work?	Do I need to be tested?	Where do I go for care?
partner (includes kissing)	<ul style="list-style-type: none"> 7 days with negative test 		usage, hand washing, and monitoring symptoms.
<p><u>A close contact has COVID-19</u> (Higher Risk- if the contact had symptoms)</p> <ul style="list-style-type: none"> Someone you had direct physical and frequent contact with (e.g., teammate, close friend, co-worker, car pool, etc.). You were within 6 feet of an infected person for a cumulative total of 15 minutes or more over a 24-hour period starting 2 days before illness onset or, for asymptomatic individuals, 2 days prior to test specimen collection. 	<p><u>NO!</u></p> <p>Quarantine:</p> <p>If symptomatic —</p> <ul style="list-style-type: none"> 14 days <p>If not symptomatic —</p> <ul style="list-style-type: none"> 10 days without testing 7 days with negative test 	<p><u>YES!</u></p> <p>Symptoms include: Fever, Chills, Cough, Shortness of Breath, Fatigue, Body Aches, Headache, Loss of Taste or Smell, Sore Throat, Congestion, Nausea, Vomiting or Diarrhea</p>	<p>Self-monitor symptoms every day for 14 days since last exposure. If you develop symptoms, contact your care provider.</p> <p><u>Notify Occupational Medicine 702.295.1473.</u></p> <p>Maintain precautions of physical distancing, mask usage, hand washing, and monitoring symptoms.</p>
<p><u>Coworker or friend has COVID-19 (no close contact)</u> (Low-Medium Risk—if the contact had symptoms)</p> <ul style="list-style-type: none"> Someone who you walked by or were around (worked in same office/facility/shop, near cubicle, etc.), but more than 6 feet away. Someone you were in the same room with, but not within 6 feet for less than a cumulative total 	<p><u>YES!</u></p> <p>You can work if you do NOT have symptoms</p> <p>AND you were not in CLOSE CONTACT (see row above)</p>	<p><u>NO!</u></p> <p>Unless you have symptoms</p> <p>Symptoms include: Fever, Chills, Cough, Shortness of Breath, Fatigue, Body Aches, Headache, Loss of Taste or Smell, Sore Throat, Congestion, Nausea, Vomiting or Diarrhea</p>	<p>No care needed if you do not have symptoms.</p> <p>You should self-monitor your symptoms every day for 14 days. If symptoms develop, contact your care provider.</p> <p><u>Notify Occupational Medicine 702.295.1473.</u></p>

COVID-19 Mitigation Measures for Protection of Workers Plan

CONTACT with a COVID-19 Positive Case and Not Fully Vaccinated			
Contact Scenario	Can I come to work?	Do I need to be tested?	Where do I go for care?
of 15 minutes.			
<p><u>Friend of a friend has COVID-19</u></p> <p>(Minimal Risk)</p> <ul style="list-style-type: none"> Your best friend's mother, your spouse's co-worker, etc. 	<p><u>YES!</u></p> <p>You can work if you do NOT have symptoms</p>	<p><u>NO!</u></p> <p>Unless you have symptoms</p>	<p>Maintain precautions of physical distancing, mask usage, hand washing, and monitoring symptoms.</p> <p>If symptoms develop, contact your care provider.</p> <p><u>Notify Occupational Medicine 702.295.1473.</u></p>

f. **When to Clean and When to Disinfect**

- Cleaning with products containing soap or detergent reduces germs on surfaces by removing contaminants and may also weaken or damage some of the virus particles, which decreases risk of infection from surfaces.
- When no people with confirmed or suspected COVID-19 are known to have been in a space, [cleaning once a day is usually enough](#) to sufficiently remove virus that may be on surfaces and help maintain a healthy facility.
- Disinfecting (using [U.S. Environmental Protection Agency \(EPA\)'s List N](#)) kills any remaining germs on surfaces, which further reduces any risk of spreading infection.

g. **Routine Cleaning:**

- High-touch surfaces should be cleaned at least once a day. Examples of high-touch surfaces include: pens, counters, shopping carts, tables, doorknobs, light switches, handles, stair rails, elevator buttons, desks, keyboards, phones, toilets, faucets, and sinks.
- Common high traffic frequently touched surfaces (e.g., handrails, horizontal desktops/countertops, door knobs, turn-styles, badge readers, vehicle steering wheels, equipment buttons, common phones, and keyboards) shall be cleaned at a minimum of once per day/shift to the greatest extent possible.
- Tools (electrical, mechanical, or manual) shared between personnel that are not wearing gloves, shall be cleaned each time they are shared to the greatest extent possible.

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- Mobile equipment that is shared between personnel shall be cleaned each time they are used.
- Vehicles that are shared between workers or have more than one occupant (e.g., vans, work vehicles) shall be cleaned, at a minimum, once per day/shift.
- More frequent cleaning might be needed when:
 - High transmission of COVID-19 is in the community
 - Space is occupied by people at [increased risk for severe illness from COVID-19](#)
- h. **Facility/Building Disinfection:** Disinfection protocols for a suspected/confirmed ill individual in the workplace.
 - Supervision and Facility Manager ensures that personnel are removed from the affected areas and the areas are closed off.
 - Adjacent operations greater than a 6 feet distance to affected areas do not need to be suspended.
 - Prior to disinfection, post signage or use Yellow (Caution) tape at the entrances to the affected areas that state, “Do Not Enter.”
 - If the area is lockable, then close and lock doors and post “Do Not Enter” signage.
 - Coordinate a cleaning/disinfection request through Facility Management or if in leased spaces, through the custodial service provider. Regular cleaning staff can clean and disinfect affected areas.
 - The building, room, office, cubicle, etc., location and identification information of the affected area will be provided to the COVID-19 Monitoring Team.
 - Increase air circulation in the affected area as reasonable (e.g., increase fresh air exchange rate, use localized fans).
 - If possible to wait 72 hours, then disinfection is not necessary. A wipe down of hard surfaces with soap and water should occur prior to releasing the affected area.
 - Hard Surfaces:
 - If visibly dirty, clean using soap and water or commercial cleaner. Focus should be placed on high touch surfaces (e.g., tables, countertops, doorknobs, light switches, handles, phones, toilets, faucets, sinks).
 - Disinfect using an EPA-registered disinfectant (<https://www.epa.gov/pesticide-registration/list-n-disinfectants-use-against-sars-cov-2>) per manufacturer’s instructions with focus on high touch surfaces. The NNSS Mercury warehouse has approved disinfectants.
 - Do not wipe dry, allow to air dry.
 - Soft Surfaces:
 - Such as carpets, rugs, cubicle walls, chairs, etc.
 - Items can be removed or segregated (e.g., covered in plastic sheeting) for a minimum of 72 hours to eliminate the need for disinfection.
 - Launder items (if possible) according to the manufacturer’s instructions. Use the warmest water setting and dry completely. Additional disinfection is not necessary.

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- If visibly dirty, clean using soap and water or commercial cleaner appropriate for these surfaces.
- Disinfect using an EPA-registered disinfectant per manufacturer's instructions. The NNSS Mercury warehouse has approved disinfectants.
- Electronics:
 - Such as tablets, monitors, touch screens, keyboards, mice, remote controls, etc.
 - Consider the use of a wipeable or disposable cover on electronics.
 - Follow manufacturer's instructions for cleaning and disinfecting.
 - If no guidance, then disinfecting wipes or a 70% alcohol solution may be used. Use caution when using on LCD displays.
- Laundry:
 - Such as towels, linens, and other items.
 - Do not shake laundry.
 - Launder items according to the manufacturer's instructions. Use the warmest water setting and dry completely.
 - Clean and disinfect laundry bins and laundry collection areas.
- Outdoor Surfaces:
 - Such as, railings, benches, grab bars, etc., do not require disinfection.
 - High touch surfaces should be cleaned routinely with soap and water or commercial cleaner and allowed to air dry.
- Precautions
 - Wear a face covering.
 - Wear disposable gloves.
 - Wear a disposable outer garment such as a gown, smock, lab coat, Tyvek like suit, etc.
 - Provide users instructions on how to safely remove gloves and disposable outer garment.
 - Dispose of items in regular trash.
 - Wash or sanitize hands after glove and/or disposable outer garment removal.
- Return to Use
 - Affected areas can be returned to use if unoccupied and unused for greater than 72 hours.
 - Affected areas can be returned to use post disinfection and all surfaces are dry.
 - All signage and access controls will be removed prior to return to use.

COVID-19 Mitigation Measures for Protection of Workers Plan

- i. **Physical Distancing:** In accordance with the CDC's [Interim Public Health Recommendations for Fully Vaccinated People](#), and consistent with guidance from the Safer Federal Workforce Task Force, fully vaccinated Federal employees, contractors, and visitors entering or working inside or on the grounds of a DOE site/facility are not required to physically distance in DOE buildings or in DOE leased spaces, except where called for by Federal, state, local, tribal, or territorial laws, rules, and regulations. Federal employees, contractors, and visitors entering or working at a DOE site/facility who are not fully vaccinated are required to maintain a distance of at least 6 feet from others, including in offices, conference rooms, and all other indoor communal areas and workspaces. This is in addition to wearing a mask, where required.
- In accordance with the U.S. Department of Energy COVID-19 Workplace Safety Plan (May 20, 2021) Federal employees, contractors, and visitors entering or working at a DOE site/facility who are not fully vaccinated are required to maintain a distance of at least 6 feet from others, including in offices, conference rooms, and all other indoor communal areas and workspaces.
 - Contact among workers should be minimized by physical distancing, physical barriers (e.g., mobile white boards, hard walled offices, sneeze guards), use of open air/large rooms, replacing face-to-face meetings with virtual and telework options, and staggering use of shared spaces.
 - Restrooms
 - Maintain a minimum of 6 feet physical separation when entering/exiting and using restroom facilities. This may require limiting the number of people that can be in a restroom at a given time to allow for physical distancing.
 - Elevators
 - Building/Office elevators limit occupancy to a maximum of 4 personnel at a time.
 - Place signage outside of the elevator on the occupancy limit.
 - Non-Building/Office elevators shall establish occupancy limits in coordination with their local Safety and Industrial Hygiene SMEs.
 - Shared Kitchen Areas and Dining Areas
 - Restrict the number of people allowed in kitchen and dining room at one time to ensure 6 feet of physical distancing.
 - Do not share dishes, drinking glasses, cups, or eating utensils.
 - Non-disposable food service items used should be handled with gloves and washed with dish soap and hot water in a dishwasher.
 - Use gloves when removing garbage bags and handling and disposing of trash.
 - Wash hands.
 - Kitchens and dining areas operated under oversight from a local health agency shall operate per local health agency guidance.
 - Laundry Rooms
 - Restrict the number of people allowed in laundry rooms at one time to ensure physical distancing.

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- Exercise Rooms and Recreational Rooms
 - Restrict the number of people allowed in at one time to ensure physical distancing.
 - Ensure cleaning and disinfection supplies are provided with instructions to clean and disinfect equipment surfaces after each use.
 - Discourage close contact activities (e.g., pool, card games).
- Practice physical distancing when eating meals.
- In areas of high-volume traffic, use spacing tools for checks and lines. For example, put tape on the floor as a visual marker to keep people adequately spaced.
- Meetings and Auditoriums
 - Occupancy is limited to room occupancy number based on 6 feet physical distancing requirement.
 - Seating/standing arrangements will be implemented to ensure the minimum 6 feet physical distance measure during entry, meeting duration, and exit. Use of visible markings (e.g., tape and signage) is encouraged.
 - No eating or drinking during meetings.
 - Do not allow congregating of meeting attendees during breaks.
 - Meeting host is responsible for ensuring hard surfaces and shared electronics are cleaned upon completion of the meeting.
- Definition and examples of controls:
 - *Engineering Controls* — Isolate personnel from the hazard. Examples, not limited to:
 - [Modify or adjust seats, furniture, and workstations](#) to maintain physical distancing of 6 feet between employees, where possible.
 - Install transparent shields or other physical barriers where possible to separate employees and visitors where physical distancing is not an option.
 - Arrange chairs in reception or other communal seating areas by turning, draping (covering chair with tape or fabric so seats cannot be used), spacing, or removing chairs to maintain physical distancing.
 - Use methods to physically separate employees in all areas of the building, including work areas and other areas such as meeting rooms, break rooms, parking lots, entrance and exit areas, and locker rooms.
 - Use signs, tape marks, or other visual cues such as decals or colored tape on the floor, placed 6 feet apart, to show where to stand when physical barriers are not possible.
 - Replace high-touch communal items, such as coffee pots and bulk snacks, with alternatives such as pre-packaged, single-serving items. Encourage employees to bring their own water to minimize use and touching of water fountains or consider installing no-touch activation methods for water fountains.

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- Consider taking steps to improve ventilation in the building, in consultation with an HVAC professional, based on local environmental conditions (temperature/humidity) and ongoing community transmission in the area:
 - Increase the percentage of outdoor air, (e.g., using economizer modes of HVAC operations) potentially as high as 100% (first verify compatibility with HVAC system capabilities for both temperature and humidity control as well as compatibility with outdoor/indoor air quality considerations).
 - Increase total airflow supply to occupied spaces, if possible.
 - Disable demand-control ventilation (DCV) controls that reduce air supply based on temperature or occupancy.
 - Consider using natural ventilation (e.g., opening windows if possible and safe to do so) to increase outdoor air dilution of indoor air when environmental conditions and building requirements allow.
 - Improve central air filtration:
 - [Increase air filtration](#) to as high as possible without significantly diminishing design airflow.
 - Inspect filter housing and racks to ensure appropriate filter fit and check for ways to minimize filter bypass.
 - Consider running the HVAC system at maximum outside airflow for 2 hours before and after occupied times, in accordance with [industry standards](#).
 - [Generate clean-to-less-clean air movements](#) by re-evaluating the positioning of supply and exhaust air diffusers and/or dampers and adjusting zone supply and exhaust flow rates to establish measurable pressure differentials. Have staff work in “clean” ventilation zones that do not include higher-risk areas such as visitor reception or exercise facilities (if open).
- Consider using portable high-efficiency particulate air (HEPA) fan/filtration systems to help [enhance air cleaning](#) (especially in higher-risk areas). Please contact an Industrial Hygiene or Safety SME for evaluation.
- Ensure exhaust fans in restroom facilities are functional and operating at full capacity when the building is occupied.
- Consider using [ultraviolet germicidal irradiation \(UVGI\)](#) as a supplemental technique to inactivate potential airborne virus in the upper-room air of common occupied spaces, in accordance with industry guidelines. Please contact an Industrial Hygiene or Safety SME.
- *Administrative Controls* (Change the way people work) Examples, not limited to:
 - Require daily health checks.
 - Perform regular symptom monitoring.
 - Stagger shifts, start times, and break times as feasible to reduce the number of employees in common areas such as screening areas, break rooms, and locker rooms.

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- Consider posting signs in parking areas and entrances that ask guests and visitors to phone from their cars to inform the administration or security when they reach the facility.
- Consider posting signs in parking areas and entrances that inform guests and visitors of the current entrance requirements (e.g., masks), to not enter the building if they are sick, and to stay 6 feet away from others.
- Provide directions for visitors to enter the building at staggered times.
- Follow polices on cleaning and disinfection.
- Limit personnel occupancy in building areas with low air flow and undiluted air exchange zones.
- Post instructions and reminders at entrances and in strategic places on hand hygiene, COVID-19 symptoms, wearing cloth face coverings if not fully vaccinated, and cough and sneeze etiquette. This should include signs for non-English speakers.
- Personal Protective Equipment — Protection of personnel with worn equipment. Examples, not limited to:
 - Face Shields
 - Filtering Face Masks
 - Respirators
 - Gloves
- **Occupancy**
 - DOE will continue to maximize the use of telework, remote work, and staggered scheduling during widespread community transmission. In general, for sites experiencing high community prevalence or transmission where the majority of the employees can effectively telework, the goal is to operate at 25% of normal building occupancy standards or lower.
 - The CDC [COVID-19 Integrated County View](#) will be evaluated to ensure compliant requirements are communicated to NNSS locations.
 - This will be accomplished through additional controls at building entrance points, management monitoring, and other means.
 - Alternative approaches or exceptions to the 25% goal must be approved by the Secretary of Energy as advised by the DOE COVID-19 Coordination Team.
- **[Face Coverings](#) (e.g., masks):**
 - In accordance with the CDC's [Interim Public Health Recommendations for Fully Vaccinated People](#), and consistent with guidance from the Safer Federal Workforce Task Force and Executive Order 13991, "[Protecting the Federal Workforce and Requiring Mask-Wearing.](#)"
 - All Federal employees, contractors, and visitors regardless of vaccination status entering or working inside or on the grounds of a DOE site/facility that are in areas of substantial or high community transmission are required to wear masks while in DOE buildings or in DOE leased spaces.
 - The CDC [COVID-19 Integrated County View](#) will be evaluated to ensure compliant requirements are communicated to NNSS locations.

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- Personnel are encouraged to use face coverings they have made or purchased. If personnel cannot provide their own face covering, then one will be provided as available. Contact your supervisor/manager to request one.
- Personnel who have medical concerns with the use of a face covering such as claustrophobia, asthma, COPD, hearing impaired, sensory sensitivities, etc., or religious reasons should contact their respective ADA Coordinator for further guidance on requesting accommodations.
- Individuals who work in a setting where face coverings may increase the risk of heat-related illness or cause safety concerns due to introduction of a hazard (for instance, straps getting caught in machinery) may consult with an industrial hygiene or occupational safety professional to determine the appropriate face covering or respiratory protection use for their setting.
- Acceptable Face Coverings:
 - Novelty/non-protective masks, masks with ventilation valves, or face shields are not considered an acceptable substitute for masks. For additional information please refer to the CDC “Your Guide to Masks.”
 - Have two or more layers of washable, breathable fabric (gaiters and bandanas shall have two or more layers, simply fold them to create additional layers).
 - Completely cover your nose and mouth.
 - Fit snugly against the sides of your face, nose, and chin with no large gaps.
 - Not interfere with eyewear.
 - Allow for breathing without restriction.
 - Be laundered and machine dried without damage or change to shape.
 - Be put on/removed by handling straps/loops only and without touching eyes, nose, and mouth and wash hands immediately after putting on and removal if possible.
 - Not be shared.
 - Not create additional hazards.
 - Not be worn under your nose.
 - Not be worn only on your chin.
 - Not be worn dangling from one ear.
 - Filtering Facepiece Respirator (FFR)
- Is a negative pressure particulate respirator with a filter as an integral part of the facepiece or with the entire facepiece composed of the filtering medium (29 CFR 1910.134(b)). Examples include, elastomeric half-mask respirators such as an N-95 and KN-95.
- Per DOE policy, N-95 respirators should not be issued as a face covering. N-95 respirators can be worn as a face covering in areas that have no identified respiratory hazards when the employer allows employees to voluntarily use an N-95.
 - Voluntary use of an N-95 — 29 CFR 1910.134, “Respiratory Protection, Appendix D, “(Mandatory) Information for Employees Using Respirators When Not Required Under the Standard”

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- Respirators are an effective method of protection against designated hazards when properly selected and worn. Respirator use is encouraged, even when exposures are below the exposure limit, to provide an additional level of comfort and protection for workers. However, if a respirator is used improperly or not kept clean, the respirator itself can become a hazard to the worker. Sometimes, workers may wear respirators to avoid exposures to hazards, even if the amount of hazardous substance does not exceed the limits set by OSHA standards. If your employer provides respirators for your voluntary use, or if you provide your own respirator, you need to take certain precautions to be sure that the respirator itself does not present a hazard.
- Read and heed all instructions provided by the manufacturer on use, maintenance, cleaning and care, and warnings regarding the respirator's limitations. Please note that OSHA has interim guidance that allows use of an N-95 respirator beyond the manufacturer shelf life ("expiration date") and allows extended use or reuse.
- Choose respirators certified for use to protect against the contaminant of concern. The National Institute for Occupational Safety and Health of the U.S. Department of Health and Human Services (NIOSH) certifies respirators. A label or statement of certification should appear on the respirator or respirator packaging. It will tell you what the respirator is designed for and how much it will protect you.
- Do not wear a respirator into atmospheres containing contaminants for which the respirator is not designed to protect against. For example, a respirator designed to filter dust particles will not protect you against gases, vapors, or very small solid particles of fumes or smoke.
- Keep track of your respirator so that you do not mistakenly use someone else's respirator.
- KN-95 respirators are FFRs certified to the People's Republic of China: GB 2626-2006; and GB 2626-2019 standards. In a good-faith effort these can be used as a face covering per OSHA enforcement guidance. These are currently available in the NNSS Mercury warehouse.
- **Face Covering Use:** Review and comply with the face covering requirements for your work location. Requirements will be communicated via an NvE Alert, supervisors, and will be posted at building entrances.
 - Face coverings as required are to be worn in all NNSS-controlled facilities and buildings, including all public and work areas within a building (e.g., garages, hallways, snack bars, cafeterias, elevators, and restrooms).
 - Worn in all face-to face meetings.
 - Required at all security checkpoints.
 - Worn when the minimum physical distancing measure of 6 feet cannot be maintained and when in outdoor shared spaces.
 - Worn when entering/exiting buildings.
 - Worn in hallways, stairwells, and elevators.
 - Worn in all common areas or shared workspaces (e.g., open floor plan office space, restrooms, break rooms, conference rooms, parking lots, common printer areas, cubicles, hallways, and other workspaces) even when physically distant.

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- Worn when dealing with the public.
- Worn while sharing a vehicle; both private (when engaged in work activities) and government owned.
- Not worn while eating as long as maintaining 6 feet or more of separation from others is possible.
- Not worn when working or performing activities outdoors and maintaining 6 feet of physical distancing.
- Face coverings may be removed when alone in an office with floor-to-ceiling walls and the door shut.
- Limit how often you touch and adjust your face covering.
- Discarded in the regular trash if disposable or non-functional.
- Wash or sanitize your hands after handling the face covering.
- Distribution Control:
 - Distribution of face covers is controlled to ensure an adequate supply is available.
 - M&O supervisors/managers and NvE partners with M&O cost codes can request face coverings for their teams pending availability by ordering through the M&O NNSS Warehouse catalog system or contacting the NNSS Material Planning and Control Center (702.295.7138 or 702.295.0568).
- NNSS warehouse operations will process approved orders and will contact you for pickup/delivery or shipment to satellite locations.
 - Non-M&O face covering requests will be coordinated through their respective organization and approved by NvE local management.
 - Purchase of these items through a P-card is not allowed.
- NNSS Workforce at Main Entrances (NNSS and NLVF):
 - Inbound checks: Face coverings when worn briefly raised and lowered for confirmation.
 - Outbound Checks: Face coverings when worn briefly raised and lowered for confirmation.
- NNSS Workforce at Device Assembly Facility (DAF) Entry Guard Station and Argus Portal:
 - Individuals will sanitize hands prior to entering portal.
 - Individuals will use wipes to clean hand geometry unit prior to use.
 - Inbound checks: Face coverings when worn briefly raised and lowered for confirmation.
 - Outbound Checks: Face coverings when worn briefly raised and lowered for confirmation.

j. **Vehicles**

- Wipe down high-touch surfaces prior to and after use.
- Turn off the air recirculation, open the fresh air vent, and crack a window to increase ventilation.

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- Wash or sanitize hands after vehicle use.
- Do not leave cleaning supplies in the vehicle.
- Do not leave alcohol-based sanitizer in the vehicle.

k. Instruction and Classroom Protocols

- Should comply with the CDC [Considerations for Institutions of Higher Education](#) guidance.

l. BeyondZero General Considerations

- Assume you are infected and want to protect others.
- Assume others are infected and you want to protect yourself.
- Assume any surface or environment that you don't control is contaminated and take additional precautions.
- Personnel are discouraged from using phones, desks, offices, work tools, equipment, etc., from other personnel to minimize exposure potential. If used, it is the responsibility of the user to clean/disinfect or use a physical barrier such as a clean glove, towel, napkin, etc.
- Fans such as pedestal fans or hard-mounted fans shall be set up to ensure that air is not blown from one worker directly at another worker. If this cannot be maintained, then the fans shall be removed from use. If you have questions contact Industrial Hygiene or Safety personnel for guidance.
- To reduce the potential spread of any airborne or aerosolized viruses, personal cooling/heating fans shall be removed from the workplace and shall not be used.
- Hand wash stations or hand sanitizer stations shall be placed in locations near high contact surfaces as reasonable.
- Paper tissues (e.g., Kimwipes) should be made available for use as a single use hand barrier when accessing high contact surfaces such as doors, turn-styles, etc.
- Disposable wipes should be available so that commonly used surfaces (e.g., doorknobs, keyboards, remote controls, desks, phones, and other work tools and equipment) can be wiped down by individuals before each use.
- Wall mounted hand sanitizer stations will be placed at strategic facility locations (e.g., major entrances to buildings, laboratories, outside bathrooms, as determined by Facilities Management).
- Individuals are responsible for the cleanliness and protection of spaces they interact in. When using common areas, clean surfaces you will access before and after using. In a conference room wipe down surfaces when entering and exiting.
- Liquid soap and paper towels will be available in breakrooms containing a sink.

m. Emergencies

- Follow normal emergency protocols, practice physical distancing, wear a face covering as required.

7. References:

- Considerations for Institutes of Higher Education, <https://www.cdc.gov/coronavirus/2019-ncov/community/colleges-universities/considerations.html>

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- Considerations on Wearing Cloth Face Coverings, <https://www.cdc.gov/coronavirus/2019-ncov/prevent-getting-sick/cloth-face-cover-guidance.html>, 9/10/2020
- Contact Tracing for COVID-19, <https://www.cdc.gov/coronavirus/2019-ncov/php/contact-tracing/contact-tracing-plan/contact-tracing.html>
- Contact Tracing, <https://www.cdc.gov/coronavirus/2019-ncov/daily-life-coping/contact-tracing.html>, 11/5/2020
- Department of Energy COVID-19 Workplace Safety Plan
https://www.energy.gov/sites/default/files/2021-05/Revised%20DOE%20COVID-19%20Workplace%20Safety%20Plan_5.20.21-revised.pdf, 5/20/2021
- Department of Energy DOE Travel Guidance, 3/10/2020,
<https://www.energy.gov/articles/doe-travel-guidance>
- Department of Energy Guidance on Use of Cloth Face Coverings, 4/10/2020,
<https://www.energy.gov/articles/department-energy-guidance-use-cloth-face-coverings>
- Discontinuation of Isolation for Persons with COVID -19 Not in Healthcare Settings,
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