COVID-19 OPERATIONS PROTOCOL

Business/Organization:

Address:

Business/Organization must implement all applicable measures listed below and be prepared to explain why any measure that is not implemented is inapplicable to the business/organization.

SIGNAGE

☐ Signage at each entrance of the facility or jobsite to inform all employees and customers that they shall:
  ➔ Avoid entering the facility if they have a cough or fever
  ➔ maintain a minimum six-foot distance from non-household members
  ➔ wear a facial covering
  ➔ not shake hands or engage in any unnecessary physical contact

MEASURES TO PROTECT STAFF HEALTH (Check all that apply)

☐ Everyone who can carry out their work duties from home has been directed to do so
☐ All staff have been told not to come to work if sick or a member of the household is sick
☐ Symptom checks are being conducted before staff may enter the work space
☐ All employee work spaces are separated by at least six feet when practical and if unable to meet the six-foot requirement facility must implement Best Available Practices
☐ Break rooms, bathrooms, and other common areas are being disinfected regularly, on the following schedule:
  ☐ Break rooms: ________________________________
  ☐ Restrooms: ________________________________
  ☐ Other: ________________________________

☐ Disinfectant and related supplies to clean surfaces are available to staff.
☐ Soap and water, or hand sanitizer effective against COVID-19, are available to staff at the following location(s):____________________________
☐ Copies of this Protocol have been distributed to all staff.
☐ Optional—Describe additional measures: ________________________________

MEASURES TO ENSURE PHYSICAL DISTANCING (Check all that apply)

☐ Limit the number of patrons in the facility at any one time to_____, which allows for patrons and staff to easily maintain at least six-foot distance from one another at all practicable times.

☐ Post staff at the entrances to ensure that the maximum number of patrons in the facility set forth above is not exceeded.

☐ Placing signs outside the facility reminding people to be at least six feet apart, including when in line.
Placing tape or other markings at least six feet apart in patron line areas inside the facility and on sidewalks at public entrances with signs directing patrons to use the markings to maintain distance.

Provide directional signage for foot traffic to allow safe distancing in narrow aisles and walkways.

All staff have been instructed to maintain at least six feet distance from patrons and from each other, except staff may momentarily come closer when necessary to accept payment, deliver goods or services, or as otherwise necessary.

Optional—Describe other measures: ______________________________________________________
_____________________________________________________________________________________

MEASURES TO PREVENT UNNECESSARY CONTACT  (Check all that apply)

☐ For food and beverage handling; measures preventing people from self-serving any items including lids for cups, and bulk-item food bins. Reusable items from home not permitted.

☐ Providing for contactless payment systems or, if not feasible, sanitizing payment systems regularly.

   Describe:______________________________________________________________________
_____________________________________________________________________________________

☐ Optional—Describe other measures to limit contact (e.g. providing senior-only hours):

MEASURES TO INCREASE SANITIZATION  (Check all that apply)

☐ For food and beverage handling; measures preventing people from self-serving any items including lids for cups, and bulk-item food bins. Reusable items from home not permitted.

☐ Hand sanitizer, soap and water, or effective disinfectant is available to the public at or near the entrance of the facility, at high contact areas, and anywhere else inside the facility or immediately outside where people have direct interactions.

☐ Disinfecting all payment portals, pens, and styluses regularly.

☐ Disinfecting all high-contact surfaces regularly.

☐ Additional food handling processes:  ________________________________________________
_________________________________________________________________________________

☐ Optional—Describe other measures:  _________________________________________________
_________________________________________________________________________________

* Any additional measures not included here should be listed on separate pages, which the business should attach to this document.

You may contact the following operator of this facility with any questions or comments about this protocol:

Name:______________________________________________________
Phone number:___________________  Email: _____________________