Critical Infrastructure Workforce Protection Plans

Pennsylvania Department of Health Pennsylvania Department of Agriculture Pennsylvania Emergency Management Agency



COVID-19 Background

- Respiratory disease spread primarily through droplets from sneezes or coughs
- About 80% of people experience a mild case
- About 1/6 people become seriously ill
- Elderly and people with underlying medical conditions at higher risk for serious illness

COVID-19 and Community Transmission

- Some areas of Pennsylvania have higher rates of community transmission than others
- Some facilities have a higher number of impacted workers than others
- Rapid identification of employees with COVID-19 and quick interventions are necessary in early stages
- It is reasonable to expect that most facilities will experience widespread transmission at some point

Immediate Steps for All Facilities

- Daily temperature and symptom screening
- Review sick leave policies, permit paid sick leave
- Provide face coverings, gloves
- Increase cleaning frequency
- Space workers 6 feet apart
- Plexiglass partitions
- Enhance common area cleaning
- Mandatory hand hygiene

- Stagger breaks and shifts
- Engineering controls in break rooms
- Make clustering a safety violation
- Prohibit visitor/vendor close contact
- Contactless delivery
- Translate materials

COVID-19 in Facility with Few Cases

- Exclude positive case from work
- Identify close contacts of positive worker
 - Works within 6 feet for longer than 10 minutes
- Time period for close contact tracing includes any days the employee worked and the preceding 48 hours prior to illness onset
- Recommended: all close contacts sent home on self-quarantine beginning on last day they had contact to the ill employee (14 days)
 - Return to work criteria for ill workers: a minimum of 7 days since the employee developed symptoms, AND at least 3 days without a fever
- If above not possible: follow CDC guidance and allow asymptomatic workers to continue to work with additional precautions

COVID-19 in Facility with Many Cases

- Employees may not be able to isolate or quarantine at home
- May have family members that are at increased risk
- Reasonable to assume that, when social distancing is not possible, there could be ongoing exposure at home
- In those instances, best way to make sure workers are not infectious when they come to work is to sequester in a separate housing facility

Separate Housing

- Single rooms with separate bathrooms
- Wraparound services, including food, delivered
- Prohibited from having visitors
- Report temperature and symptoms daily
- Provided with medical care if they become ill

DOH Recommended Plans

- Plans are based on the 14 day incubation period
- Plans have varying levels of risk assumed by facility
- Some plans will result in positive cases working in the facility with varying degrees of regularity
- None of the plans rely on testing
 - If someone is tested on Tuesday, they could be infected on Wednesday, but test results don't come back until Thursday at the earliest
 - Current serologic tests are unreliable

Plan 1

- Close for 2 weeks
- Simultaneously, start sequestering the minimum number of staff needed to operate in housing A
- Cohort workers into 3 groups: green, yellow, orange
- Restrict visitors and vendors



After x weeks, workers in green group rotate to orange, yellow group moves to green, and orange moves to yellow



- If anyone becomes ill in the yellow group, remove them and provide them with medical care
- Can be reasonably assured that workers going from yellow to green are past the point where they could become ill or infect others if no new exposures or injects have occurred

Plan 2

- Close for 1 week
- Simultaneously, start sequestering the minimum number of staff needed to operate in housing A
- Cohort workers into 3 groups: yellow, orange, red



After x weeks, workers in yellow group rotate to red, orange group moves to yellow, and red moves to orange



- Clean facility before any new group comes in
- If anyone becomes ill in the orange group, remove them and provide them with medical care
- Orange group spends less time in hotel, but will likely have positive cases in facility, requiring more closure and cleaning

Plan 3

- Close for 2-3 days to clean
- Simultaneously, start sequestering the minimum number of staff needed to operate in housing A
- Cohort workers into 3 groups: orange, red, dark red



After x weeks, workers in orange group rotate to dark red, red group moves to orange, and dark red moves to red



- Deep clean facility before any new group comes in
- If anyone becomes ill in the red group, remove them and provide them with medical care
- Workers in orange group will have positive cases, facility will need to shut down to clean more often

Summary

- Not all facilities are in communities with widespread transmission, but it is reasonable to expect that most communities will have widespread transmission at some point
- Recognizes that facilities can prevent much of the spread through the universal recommended changes but not all
- Facilities in areas where there is widespread community transmission can expect workers to be exposed outside of work
- Plan 1 allows highest degree of confidence that workers entering facility do not have COVID-19
- Plans 2 and 3 will result in some cases working in the facility
- Plan 3 will have more positive workers than plan 2

