


FACILITY RESPONSE PLAN CHECKLIST

Prepare | Prevent | Protect

This Facility Response Plan checklist is an itemized and consolidated list of the recommendations found in OSHA's Workplace Guidance and the CDC's Guidance for Cleaning and Disinfecting . City Wide of Boston is able to design a Facility Response Plan to compliment your company's policies and support the implementation of your plan.



PREPARE	In Place	Planning	N/A	Notes
Monitor public health communications and recommendations about COVID-19 and ensure that workers have access to that information	<input type="checkbox"/>	<input type="checkbox"/>	<input type="checkbox"/>	
Provide workers with up-to-date education and training on COVID-19 risk factors and protective behaviors (cough and sneeze protocol and care of PPE)	<input type="checkbox"/>	<input type="checkbox"/>	<input type="checkbox"/>	
Place posters that encourage hand hygiene and coughing/sneezing protocol to help stop the spread. Can be placed at the entrance to your workplace and in other workplace areas where they are likely to be seen	<input type="checkbox"/>	<input type="checkbox"/>	<input type="checkbox"/>	
Configure the workplace to increase physical distance amongst employees & amongst employees and visitors	<input type="checkbox"/>	<input type="checkbox"/>	<input type="checkbox"/>	
Have options available in the event you need to immediately isolate people who are potentially infectious	<input type="checkbox"/>	<input type="checkbox"/>	<input type="checkbox"/>	
Add touchless dispensers, door openers, faucets and trash cans	<input type="checkbox"/>	<input type="checkbox"/>	<input type="checkbox"/>	
Install physical barriers, such as clear plastic sneeze guards	<input type="checkbox"/>	<input type="checkbox"/>	<input type="checkbox"/>	
PREVENT	In Place	Planning	N/A	Notes
Provide resources for a safe work environment that promote personal hygiene. This includes providing tissues, anti-bacterial hand soap and alcohol based hand rubs containing at least 60 percent alcohol	<input type="checkbox"/>	<input type="checkbox"/>	<input type="checkbox"/>	
Provide disinfectant sprays and disposable towels or disinfecting wipes for employees to clean their devices and work surfaces	<input type="checkbox"/>	<input type="checkbox"/>	<input type="checkbox"/>	
Consider additional high visibility daytime high touch cleaning for increased employee safety and peace of mind	<input type="checkbox"/>	<input type="checkbox"/>	<input type="checkbox"/>	
Develop an ongoing plan for disinfecting on a scheduled basis	<input type="checkbox"/>	<input type="checkbox"/>	<input type="checkbox"/>	
Place hand sanitizers in multiple locations to encourage hand hygiene	<input type="checkbox"/>	<input type="checkbox"/>	<input type="checkbox"/>	
PROTECT	In Place	Planning	N/A	Notes
Discourage workers from using other worker's phones, desks, offices, tools and equipment when possible	<input type="checkbox"/>	<input type="checkbox"/>	<input type="checkbox"/>	
When appropriate, limit visitor's access to the workplace or restrict access to certain workplace areas	<input type="checkbox"/>	<input type="checkbox"/>	<input type="checkbox"/>	

Encourage workers to stay home if they are sick and encourage respiratory etiquette, including covering coughs and sneezes	<input type="checkbox"/>	<input type="checkbox"/>	<input type="checkbox"/>	
If an employee shows symptoms of COVID-19, provide the employee a face masks and have them go to an isolated area. Once the employee leaves the building, disinfecting services should be performed	<input type="checkbox"/>	<input type="checkbox"/>	<input type="checkbox"/>	
Promote frequent and thorough hand washing, including providing workers, customers and worksite visitors with a place to wash their hands. If soap and running water are not immediately available, provide alcohol-based hand rubs containing at least 60% alcohol	<input type="checkbox"/>	<input type="checkbox"/>	<input type="checkbox"/>	
Make hand sanitizer available in high traffic lobbies, restrooms, breakrooms, cafeterias, stairwells, elevators, conference/meeting rooms and office areas	<input type="checkbox"/>	<input type="checkbox"/>	<input type="checkbox"/>	
Maintain regular housekeeping practices including routine cleaning and disinfecting of surfaces, equipment and other elements in the workplace. Use EPA registered products and follow manufacturers instructions for use	<input type="checkbox"/>	<input type="checkbox"/>	<input type="checkbox"/>	
Provide disposable disinfectant wipes so that commonly used surfaces (e.g. doorknobs, keyboards, remote controls, desks, and other work tools and equipment) can be wiped down by employees before and after each use	<input type="checkbox"/>	<input type="checkbox"/>	<input type="checkbox"/>	
Additional Recommendations	In Place	Planning	N/A	Notes
Single serve wrapped utensils	<input type="checkbox"/>	<input type="checkbox"/>	<input type="checkbox"/>	
Desk mats and or keyboard covers	<input type="checkbox"/>	<input type="checkbox"/>	<input type="checkbox"/>	
Social distance signage and workflow matting	<input type="checkbox"/>	<input type="checkbox"/>	<input type="checkbox"/>	
High efficiency air filters	<input type="checkbox"/>	<input type="checkbox"/>	<input type="checkbox"/>	
References				
OSHA: https://www.osha.gov/Publications/OSHA3990.pdf				
CDC: https://www.cdc.gov/coronavirus/2019-ncov/community/guidance-business-response.html?CDC_AA_refVal=https%3A%2F%2Fwww.cdc.gov%2Fcoronavirus%2F2019-ncov%2Fspecific-groups%2Fguidance-business-response.html				
City Wide of Boston: gocitywideboston.com				
Facility Response Plan Prepared For:				
				

Important



In order to reopen your business, please complete and sign the following checklist once you have completed your COVID-19 Control Plan template

The following poster should be displayed in an area within the business premises that is visible to employees and visitors. Thank you for your efforts to get back to business while keeping Massachusetts safe

Welcome



Please know that we take our responsibility to keep Massachusetts safe very seriously. Be assured we have taken the following steps to comply with state mandatory safety standards for workplaces:

Workers are wearing face coverings and we've put social distancing measures in place



We provide hand washing capabilities and we are regularly sanitizing high-touch areas



Our staff has received training regarding social distancing and hygiene protocols



We have established thorough cleaning and disinfecting protocols



We ask you to do your part as well by wearing your face mask and maintaining social distance. Thanks—and we hope to see you again soon.

Signature



TEMPLATE (I/II)

COVID-19 Control plan

All businesses in the state of MA must develop a written control plan outlining how its workplace will comply with the mandatory safety standards for operation in the COVID-19 reopening period. This template may be filled out to meet that requirement. Control plans **do not** need to be submitted for approval but must be kept on premise and made available in the case of an inspection or outbreak.

All individually listed businesses must complete a control plan, even if the business is part of a larger corporation or entity.

BUSINESS INFORMATION | please provide the following information

Business name: _____ Check if part of a larger corporation

Address: _____

Contact information (Owner/Manager): _____

Contact information (HR representative), if applicable: _____

Number of workers on-site: _____

SOCIAL DISTANCING | check the boxes to certify that you have:

Ensured that all persons, including employees, customers, and vendors remain at least six feet apart to the greatest extent possible, both inside and outside workplaces

Established protocols to ensure that employees can practice adequate social distancing

Posted signage for safe social distancing

Required face coverings or masks for all employees

Implemented additional procedures. Please describe them here: _____

HYGIENE PROTOCOLS | check the boxes to certify that you have:

Provided hand washing capabilities throughout the workplace

Ensured frequent hand washing by employees and provided adequate supplies to do so

Provided regular sanitization of high touch areas, such as workstations, equipment, screens, doorknobs, restrooms throughout work site

Implemented additional procedures. Please describe them here: _____



TEMPLATE (II/II)

COVID-19 Control plan

All businesses in the state of MA must develop a written control plan outlining how its workplace will comply with the mandatory safety standards for operation in the COVID-19 reopening period. This template may be filled out to meet that requirement. Control plans **do not** need to be submitted for approval but must be kept on premise and made available in the case of an inspection or outbreak.

All individually listed businesses must complete a control plan, even if the business is part of a larger corporation or entity.

STAFFING & OPERATIONS check the boxes to certify that you have: _____

Provided training for employees regarding the social distancing and hygiene protocols

Ensured employees who are displaying COVID-19-like symptoms do not report to work

Established a plan for employees getting ill from COVID-19 at work, and a return-to-work plan

Implemented additional procedures. Please describe them here: _____

CLEANING & DISINFECTING check the boxes to certify that you have: _____

Established and maintained cleaning protocols specific to the business

Ensured that when an active employee is diagnosed with COVID-19, cleaning and disinfecting is performed

Prepared to disinfect all common surfaces at intervals appropriate to said workplace

Implemented additional procedures. Please describe them here: _____
