



United States Department of the Interior COVID-19 Workplace Safety Plan

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United States Department of the Interior COVID-19 Workplace Safety Plan 1

- I. Introduction 3
- II. Purpose 4
- III. Background 5
 - A. Scope & Applicability..... 5
- IV. DOI COVID-19 Coordination Team 5
 - A. Continuity of Operations (COOP) 6
 - B. Alternate Facilities..... 6
- V. Health & Safety Protocols 7
 - A. Definitions..... 7
 - B. Vaccination Requirement..... 13
 - C. Certification of Vaccination Status 15
 - D. Masks 16
 - E. Physical Distancing 20
 - F. COVID-19 Employee Testing..... 21
 - G. Contact Tracing 26
 - H. Reporting of COVID-19 Notifications..... 26
 - I. Health Monitoring, Self-Isolation, Close Contact Exposure, & Recordkeeping..... 27
 - J. Travel 33
 - K. COVID-19 Human Resource Flexibilities 36
 - L. Facilities and Safety..... 38
 - M. Collective Bargaining Obligations 41
 - N. Incident, Wildland Fire, and Disaster Response Operations..... 42
- APPENDIX A–DOI COVID-19 Coordination Team 43
- APPENDIX B–Summary of Document Version and Changes 45

I. Introduction

The health and safety of all federal employees, onsite contractors, and individuals interacting with the federal workforce is the Administration's highest priority. As set forth in the January 20, 2021, Executive Order 13991 on [Protecting the Federal Workforce and Requiring Mask-Wearing](#), the policy of the Administration is "to halt the spread of coronavirus disease 2019 (COVID-19) by relying on the best available data and science-based public health measures." To do this, the White House released the [National Strategy for the COVID-19 Response and Pandemic Preparedness](#) and the [COVID-19 Action Plan](#) and the [National COVID-19 Preparedness Plan](#). The National Strategy initiates a coordinated pandemic response that improves the effectiveness of the country's fight against the *coronavirus* disease 2019 (COVID-19) and the COVID-19 Action Plan lays out the roadmap to help the U.S. fight COVID-19 in the future.

The Department of the Interior (DOI) is committed to addressing essential public health and work requirements consistent with best public health practices. The principles presented align with the revised Safer Federal Workforce Task Force COVID-19 [Workplace Safety: Agency Model Safety Principles](#) (updated September 13, 2021) and are based on the latest guidance from the [Centers for Disease Control and Prevention \(CDC\)](#), the [Occupational Safety and Health Administration \(OSHA\)](#), and other Administration guidelines, including [FAQs](#) from the [Safer Federal Workforce Task Force](#). These principles will be reassessed over time, as conditions warrant and as guidance and principles are updated.

Primary guidance documents used for the *DOI Workplace Safety Plan*:

- Executive [Order 13991: Protecting the Federal Workforce and Requiring Mask-Wearing](#) (January 20, 2021)
- Office of Management and Budget (OMB) Memorandum M-21-15, titled [COVID-19 Safe Federal Workplace: Agency Model Safety Principles](#) (January 24, 2021)
- OMB Memorandum M-21-25 titled [Integrating Planning for a Safe Increased Return of Federal Employees and Contractors to Physical Workplaces with Post-Reentry Personnel Policies and Work Environment](#) (June 10, 2021)
- CDC [Interim Public Health Recommendations for Fully Vaccinated People/Stay up to Date on your Vaccines](#) (May 13, 2021; May 28, 2021; July 27, 2021; January 16, 2022; July 19 2022)

- Updated Safer Federal Workforce Task Force [COVID-19 Workplace Safety: Agency Model Principles](#) (updated September 13, 2021)
- Executive Order 14042: [Ensuring Adequate COVID-19 Safety Protocols for Federal Contractors](#) (September 9, 2021). In implementing Executive Order 14042, the Department will comply with all relevant court orders, including following relevant OMB and Safer Federal Workforce Task Force [guidance](#).
- Executive Order 14043: [Requiring Coronavirus Disease 2019 Vaccination for Federal Employees](#) (September 9, 2021). In implementing Executive Order 14043, the Department will comply with all relevant court orders, including following relevant OMB and Safer Federal Workforce Task Force [guidance](#).
- CDC's [Updated Quarantine and Isolation Guidance/Isolation and Precautions for People with COVID-19](#)/ CDC's Updates to [What to Do If You Were Exposed to COVID-19](#)
- CDC's Updates to [Your Guide to Masks](#) Guidance
- Safer Federal Workforce Task Force [FAQs, Model Safety Principles](#), and executive correspondence 28, March 11, May 27, June 3, and August 17, 2022)
- CDC's Updates to [Understanding COVID-19 Exposure Risk](#)
- CDC's Updates to [How to Protect Yourself and Others](#)
- CDC's Updates to [COVID-19 Community Levels](#)
- CDC's Updates to [Travel](#) Guidance

II. Purpose

The *DOI Workplace Safety Plan* serves as a framework for DOI implementation of the President's Executive Order 13991, [Protecting the Federal Workforce and Requiring Mask-Wearing](#), OMB Memorandum 21-15 [COVID-19 Safe Federal Workplace: Agency Model Safety Principles](#), and OMB Memorandum 21-25 [Integrating Planning for A Safe Increased Return of Federal Employees and Contractors to Physical Workplaces with Post-Reentry Personnel Policies and Work Environment](#).

III. Background

The [DOI Pandemic Plan](#) was updated in January 2021 based on lessons learned from the coronavirus disease 2019 (COVID-19) experience and other biological incidents, such as SARS, MERS, Zika, H1N1, and Ebola. The revised [DOI Pandemic Plan](#) serves as a non-disease-specific response and recovery framework that is used as a foundational plan to formulate the DOI *COVID-19 Workplace Safety Plan* and other DOI COVID-19 response and recovery plans. The overarching goals of the *DOI COVID-19 Workplace Safety Plan* are to:

- A. Halt the spread of COVID-19 by relying on the best available data and science-based public health measures;
- B. Prioritize the health and safety of the federal workforce, contractors, and visitors; and
- C. Sustain the mission of the Department and mitigate impact to the environment, natural resources, economy, and the functioning of society.

A. Scope & Applicability

DOI Bureaus and Offices are expected to adhere to the principles set forth in this *Plan* in all DOI workplaces, as defined below, and at any DOI hosted in-person event at a location other than a DOI workplace, DOI-controlled facility, or DOI-controlled land, to the extent authorized by law and in accordance with applicable law. Bureaus and Offices, as appropriate, should develop Bureau, Office, or location-specific plans to implement the principles set forth in this *Plan*. It is important to note, consistent with the revised Safer Federal Workforce Task Force Agency [Model Safety Principles](#) and [FAQs](#), where a locality has imposed additional pandemic-related requirements more protective than those set forth in this *Plan*, those requirements should be followed in all DOI workplaces in that locality. All DOI stakeholders, including employees, official visitors, members of the public, contractors, and other partners, must follow these COVID-19 safety measures.

IV. DOI COVID-19 Coordination Team

DOI maintains a robust response and recovery coordination system that has been institutionalized and used for over 15 years to manage and coordinate disaster response and recovery efforts across multiple different disasters and pandemics. The [DOI Pandemic Plan](#) provides functional descriptions of each element of the DOI Departmental Response Coordination. DOI Departmental Response Coordination efforts include convening various Councils and Task Force components when a pandemic threatens or impacts multiple Bureaus and Offices or requires significant Departmental involvement.

The *DOI COVID-19 Workplace Safety Plan* uses the standing Departmental Response Coordination Systems outlined in the [900 DM Series](#) and the [DOI Baseline Operational Plan](#). For the purposes of the COVID-19 response, the DOI COVID-19 Coordination Team (APPENDIX A–DOI COVID-19 COORDINATION TEAM), as defined by the [OMB Memorandum M-21-15](#), is also considered the Secretary’s Leadership Team. The COVID-19 Coordination Team is responsible for conducting assessments to establish, implement, and monitor compliance with: (a) safety protocols for physical distancing, travel, testing, space, building entry, and masking; and (b) determinations of onsite, telework, and remote work flexibilities. The Team meets regularly to review compliance with the *DOI COVID-19 Workplace Safety Plan* and protocols, consider potential revisions to the *DOI COVID-19 Workplace Safety Plan* and protocols, and address any other operational needs. The Team reviews draft *DOI COVID-19 Workplace Safety Plans* and protocols for DOI, makes any necessary changes, and submits plans to the Safer Federal Workforce Task Force for review and comment when necessary. To ensure consistency across the Department, the Team ensures Facility Security Leadership, the General Services Administration (GSA), and, when necessary, a lessor’s designated representative are engaged and involved with protocols and policies that directly impact their facilities and their employees. The Team also coordinates with DOI’s Office of Acquisition and Property Management to ensure safety protocols are applied to onsite contractor employees.

The DOI COVID-19 Coordination Team has met regularly since February 2020 and plans to continue meeting until the Department has moved out of the pandemic phase of the COVID-19 response.

A. Continuity of Operations (COOP)

Detailed guidance on DOI’s COOP program is found in the *900 DM 4*. The Secretary and Assistant Secretary Policy, Management, and Budget (AS-PMB) retain the authority to activate the *DOI COOP Plan* to ensure continuation of essential functions during any disruption of normal operations. Bureau or Office directors may also activate their respective COOP plans independently of the *DOI COOP Plan*. The decision to activate a COOP plan should be based on ensuring the continued performance of essential functions, regardless of the cause of the disruption.

B. Alternate Facilities

DOI has identified and prepared alternate facilities to support the continued performance of essential functions, including facilities geographically distanced from the National Capital Region.

OEM has adapted continuity operations to address the movement, protection, and lodging of staff if deployment to DOI’s alternate sites is required during the COVID-19 pandemic. Additionally, these

plans incorporate appropriate COVID-19 safety protocols in accordance with CDC guidelines to prioritize the health and safety of all personnel at the alternate sites.

V. Health & Safety Protocols

[Executive No. Order 13991](#) directs all federal agencies to, as appropriate and consistent with applicable law, require compliance with CDC guidance with respect to wearing masks, maintaining physical distance, and other public health measures in federal buildings and on federal lands. Executive Order No. 13991 also created the Safer Federal Workforce Task Force to provide guidance to federal agencies to apply CDC COVID-19 health and safety guidance to protect federal workplaces. The COVID-19 health and safety protocols described below follow guidance from the CDC and government-wide guidance provided by the Safer Federal Workforce Task Force. These health and safety protocols represent DOI-wide health and safety policy establishing minimum health and safety requirements.

Executive Order 13991 also provides that heads of agencies may make categorical or case-by-case exceptions to these safety protocols to the extent that doing so is necessary or required by law and consistent with applicable law. Bureaus or Offices that seek an exception because doing so is necessary or required by law may submit a [COVID-19 Model Safety Principles Deviation Request](#) to the DOI COVID-19 Coordination Team to seek approval prior to implementing any other or additional measures outside of the requirement in this document. The DOI COVID-19 Coordination Team may consult the Safer Federal Workforce Task Force regarding exceptions. DOI is committed to addressing essential work requirements consistent with public health best practices. DOI's paramount concern is the health and safety of all federal employees, onsite contractors, official visitors, members of the public, and individuals interacting with the federal workforce. The policies presented are based on the latest public health guidance and will be reassessed and modified over time as conditions warrant and as guidance is updated.

A. Definitions

1. Individual

For the purposes of these COVID-19 safety protocols, the term "individual" refers to any person, which may include any employee, contractor, official visitor, or member of the public.

2. Employee

For the purposes of these COVID-19 safety protocols, the term "employee" follows the definition provided at 5 U.S.C. § 2105 and refers to any federal civil service employee who is employed by the Department of the Interior.

3. Contractor

For the purposes of these COVID-19 safety protocols, the term “contractor” refers to any individual who performs work for the Department pursuant to a contract.

4. Official Visitor

For the purposes of these COVID-19 safety protocols, the term “official visitor” refers to any individual who is not a DOI employee or a DOI contractor who visits a DOI workplace (DOI-controlled facility or DOI-controlled land) for business purposes. DOI volunteers, partners, concessionaires, interns, Youth Conservation Corps, and any other non-employees, non-contractor groups/individuals who enter DOI for business purposes are considered official visitors, unless otherwise noted. Individuals who visit a DOI workplace to obtain a public service or benefit, such as recreational visitors to a national park or tribal members obtaining a public service or benefit, are not official visitors, but rather members of the public.

5. Member of the Public Seeking a Public Benefit or Service or Members of the Public

For the purposes of these COVID-19 safety protocols, the term “members of the public seeking a public benefit or service” refers to any individual who is not a DOI employee, or a DOI contractor, or an official visitor who visits a DOI workplace (DOI-controlled facility or DOI-controlled land) in order to obtain a public service or benefit, such as recreational visitors to a national park or tribal members obtaining a public service or benefit.

6. Fully Vaccinated

For the purposes of these COVID-19 safety protocols, an individual is considered “fully vaccinated” against COVID-19 after at least two weeks have elapsed from the date the individual has received all requisite primary series doses of a COVID-19 vaccine that has been approved or authorized for emergency use by the U.S. Food and Drug Administration or listed for emergency use by the World Health Organization. The number of doses considered necessary to be fully vaccinated is based on the number of primary series doses specified in the approval or authorization documents. For Pfizer-BioNTech, Moderna, or AstraZeneca/Oxford, an individual is fully vaccinated two weeks after that person has received the second dose in the two-dose series. For Johnson and Johnson (J&J)/Janssen, an individual is fully vaccinated two weeks after that person has received a single dose. For the purposes of these safety protocols, clinical trial participants from a U.S. site who are documented to have received the full series of an “active” (not placebo) COVID-19 vaccine candidate, for which vaccine efficacy has been independently confirmed (e.g., by a data and safety monitoring board), are

considered fully vaccinated two weeks after they have completed the vaccine series. Currently, the U.S.-based AstraZeneca and Novavax COVID-19 vaccines meet these criteria.

7. Unvaccinated or Not Fully Vaccinated

For the purposes of these COVID-19 safety protocols, an individual is considered “unvaccinated” or “not fully vaccinated” if that individual does not meet the criteria to be considered “fully vaccinated,” as defined above.

8. Up to Date

For the purposes of these COVID-19 safety protocols, an individual is considered *up to date* with regard to COVID-19 vaccines if that person has received all recommended COVID-19 vaccines, including any booster dose(s) when eligible. As of July 2022, [CDC](#) guidance indicates that individuals become eligible for booster doses at 5 months after receiving the final primary series dose for the Pfizer-BioNtech (Comirnaty) and Moderna vaccines and at 2 months after receiving the final primary series (and only) dose for the Johnson & Johnson vaccine.

For example, as of July 2022, an individual is considered *up to date* for the purposes of these COVID-19 safety protocols once that individual meets the definition of “fully vaccinated” and continues to be considered *up to date* for 5 months after receiving the final primary series dose of a Pfizer-BioNtech (Comirnaty) or Moderna vaccine or for 2 months after receiving the final primary series (and only) dose for the Johnson & Johnson vaccine. After this, an individual is no longer considered *up to date* until that individual receives at least one booster dose. For the purposes of these COVID-19 safety protocols, once an individual has become fully vaccinated and becomes eligible to receive a booster dose, that individual is considered *up to date* after receiving a booster dose.

9. Not Up to Date

For the purposes of these COVID-19 safety protocols, an individual is considered “not *up to date*” if that individual does not meet the criteria to be considered “*up to date*,” as defined above.

10. COVID-19 Test

For the purposes of this policy, the term “COVID-19 Test” refers to a viral test that has been approved or authorized by the Food and Drug Administration (FDA) to detect current infection with SARS-CoV-2, the virus that causes COVID-19 disease.

11. COVID-19 Testing

For the purposes of this policy, the term “COVID-19 Testing” refers to the administration of a COVID-19 test or tests, consistent with the instructions prescribed by the FDA in its approval or authorization documents.

12. Screening Testing

For the purposes of this policy, “screening testing” or “COVID-19 screening testing” refers to the use of COVID-19 testing to detect current infection with SARS-CoV-2 among asymptomatic employees so that appropriate COVID-19 safety protocols may be followed to mitigate the risk of COVID-19 transmission.

13. Asymptomatic

For the purposes of this policy, an employee is considered “asymptomatic” if the employee does not exhibit any [symptoms consistent with a current COVID-19](#) infection or symptoms consistent with other infectious disease (such as fever, sore throat, and coughing). Any individual who exhibits symptoms consistent with current infectious disease, including COVID-19 or other infectious illnesses, MUST NOT physically report to a DOI workplace and MUST follow applicable COVID-19 safety protocols in this *Plan* for [self-isolation](#). As defined above, COVID-19 screening testing is only available under this policy for asymptomatic employees because the purpose of COVID-19 screening is to detect asymptomatic COVID-19 infections. Employees who exhibit symptoms consistent with COVID-19 or other infectious illnesses do not need COVID-19 testing because the presence of symptoms consistent with infectious disease already supply evidence that the employee should not be physically present in the workplace.

14. DOI Workplace

For the purposes of these COVID-19 safety protocols, the term "DOI workplace" includes DOI-controlled facilities and DOI-controlled lands. It does not include private residences in which DOI employees telework or remote work. Please note that some COVID-19 safety protocols, as described further below, may apply to DOI employees outside of DOI workplaces, such as when DOI employees interact in person with members of the public in the performance of official duties (e.g., when oil rig safety inspectors conduct inspections on oil platforms).

15. Local CDC COVID-19 Community Level

For the purposes of these COVID-19 safety protocols, the term “CDC COVID-19 Community Level” refers to the [CDC’s COVID-19 Community Levels tool](#), an indicator assessing COVID-19 transmission risk levels for every county in the United States based upon local COVID-19 transmission levels and hospitalization capacity. The [CDC COVID-19 Community Levels](#) of LOW, MEDIUM, or HIGH referenced in this guidance refer to the [CDC’s COVID-19 Community Levels data](#).¹

In order to assess the [COVID-19 Community Level](#), on at least a weekly basis, for every DOI workplace, Bureaus or Offices are required to review CDC’s [COVID-19 Community Level](#) for the county in which the workplace is physically located to determine COVID-19 workplace safety protocols for the upcoming week. Bureaus or Offices may delegate this responsibility to facility managers or other personnel as appropriate. Based on the [COVID-19 Community Level](#), Bureaus or Offices are expected to implement COVID-19 safety protocols as outlined in the [Masks](#), and [Meetings Conferences, Events, Trainings and Social Gatherings](#) sections of this *Plan*. For DOI workplaces that fall under more than one [COVID-19 Community Level](#), the most restrictive protocols should be applied to all DOI workplaces within the operating unit.

When the level of transmission related to a given DOI workplace increases or decreases, Bureaus or Offices are expected to change their COVID-19 safety protocols to be consistent with [Safer Federal Workforce Task Force](#) requirements as soon as operationally feasible. When workers are traveling to other worksites outside of their normal duty station, they are expected to assess [COVID-19 Community Level](#) prior to starting their travel and follow applicable COVID-19 safety protocols for the county for which they are traveling. COVID-19 signage should be posted at facility entrances to reflect the [COVID-19 Community Level](#) and applicable COVID-19 safety protocols consistent with the [COVID-19 Community Level](#).

16. Health Monitoring

For the purposes of these COVID-19 safety protocols, the term “health monitoring” refers to the requirement that all individuals in a DOI workplace must conscientiously monitor their health for symptoms of COVID-19 or other infectious diseases. All individuals must engage in health monitoring before entry into and while in a DOI workplace. A DOI workplace includes DOI-controlled facilities

¹ CDC, *COVID-19 Community Levels*, available at <https://www.cdc.gov/coronavirus/2019-ncov/science/community-levels.html>.

and DOI-controlled lands, as well as any location in which a DOI employee would interact with other individuals in the performance of official duties (outside of remote and telework). Any individual, including an employee, contractor, official visitor, or member of the public who exhibits symptoms consistent with COVID-19, or other infectious diseases, must not physically enter or remain present in a DOI workplace in accordance with the guidelines following the [Close Contact Exposure](#) Section of this *Plan*. Some individuals may experience symptoms for longer than 10 days which could be consistent with non-infectious post-COVID conditions (e.g., loss of taste and smell). Individuals may not enter a DOI workplace until they meet the criteria in the [Self-Isolation](#) Section of this *Plan*

17. Self-Isolation

For the purposes of these COVID-19 safety protocols, the term “self-isolation” means voluntarily following CDC isolation guidance for individuals with confirmed COVID-19 (a positive COVID-19 test result) or suspected COVID-19 (symptoms consistent with COVID-19). The public health term “[isolation](#)” refers to separating people with confirmed or suspected COVID-19 from those without COVID-19. While DOI does not enforce isolation in the public health sense of the term, DOI follows CDC isolation guidance to determine when it is safe for an individual with confirmed or suspected COVID-19 to be present in a DOI workplace. A DOI workplace includes DOI-controlled facilities and DOI-controlled lands, as well as any location in which a DOI employee would interact with other individuals in the performance of official duties (outside of remote and telework). All individuals with suspected or confirmed COVID-19 must not physically enter or remain present in a DOI workplace until they meet the criteria discussed below relevant to ending self-isolation.

18. Workplace Notification

For the purposes of these COVID-19 safety protocols, the term “workplace notification” refers to the requirement that a manager or supervisor, upon learning of a case of confirmed COVID-19, provide appropriate notifications to the relevant health, safety, and communications experts, in accordance with the [DOI COVID-19 Risk Assessment and Decision Matrix for Managers](#). This helps to ensure that Bureaus and Offices can take appropriate actions to prevent the spread of COVID-19 in the workplace such as cleaning, disinfecting, and ensuring individuals who may be exposed to COVID-19 infection through close contact with a person infected with COVID-19 are notified so that they can take appropriate measures to protect themselves and others.

19. Close Contact Exposure

For the purposes of these COVID-19 safety protocols, the term “close contact exposure” refers to an incident in which an individual may have become infected with COVID-19 due to prolonged physical

proximity to a person infected with COVID-19. Specifically, a workplace close contact exposure occurs when an individual was less than six (6) feet away from an individual currently infected with COVID-19 for a cumulative total of 15 minutes or more over a 24-hour time period.

20. Workplace Close Contact Exposure

For the purposes of these COVID-19 safety protocols, the term “workplace close contact exposure” refers to an employee close contact exposure that occurs in a DOI workplace. Specifically, a workplace close contact exposure occurs when an employee was less than six (6) feet away from an individual currently infected with COVID-19 for a cumulative total of 15 minutes or more over a 24-hour time period in a DOI workplace starting two (2) days before an individual’s symptoms began or two days before administration of a positive test (if asymptomatic).

21. Self-Quarantine

For the purposes of these COVID-19 safety protocols, the term “self-quarantine” means voluntarily refraining from entering DOI workplaces, in accordance with CDC quarantine guidance, as a safety protocol for individuals who come into close contact with a person infected with COVID-19. This term is adopted from the public health term “[quarantine](#),” which refers to keeping people who have been in close contact with someone with COVID-19 apart from others. While DOI does not enforce quarantine in the public health sense of the term, the Department follows CDC quarantine guidance to determine when it is safe for an individual to be present in a DOI workplace following close contact with a person infected with COVID-19.

Following updated CDC guidance, which currently does not recommend quarantine following a close-contact exposure, DOI does not require individuals to refrain from entering DOI workplaces following close contact exposure. However, all individuals who have come into close contact [exposure to COVID-19](#) must follow the safety protocols outlined in the [Close Contact Exposure](#) Section of this *Plan*.

B. Vaccination Requirement

1. Employees

On September 9, 2021, the President signed Executive Order 14043, [Requiring Coronavirus Disease 2019 Vaccination for Federal Employees](#), which requires each agency to implement, to the extent consistent with applicable law, a program to require COVID-19 vaccination for all of its federal employees, subject to such exceptions as required by law. However, on January 21, 2022, a federal

district court issued a nationwide preliminary injunction enjoining agencies from implementing or enforcing Executive Order 14043 until the case is resolved. See *Feds for Medical Freedom v. Biden*, 3:21-cv-356 (S.D. Tex.). To ensure compliance with this nationwide preliminary injunction, which may be supplemented, modified, or vacated, depending on the course of ongoing litigation, DOI will take no action to implement or enforce the COVID-19 employee vaccination requirement pursuant to Executive Order 14043, at this time.

2. Contractors

Executive Order (E.O.) 14042 was signed by the President on September 9, 2021, and published in the *Federal Register* at FR 86 50985 on September 14, 2021. When enforceable, the EO requires agencies to include a clause requiring contractors and subcontractors at any tier to comply with all guidance for contractor workplace locations as published by the Safer Federal Workforce Task Force (Task Force Guidance). When enforceable, this clause applies to contracts and contract like instruments, which includes: procurement contracts or contract-like instruments for services, construction, or leasehold interests in real property; contract or contract-like instruments for services covered by the Service Contract Act, 41 U.S.C. 6701 et seq.; contracts or contract-like instruments for concessions; or contracts or contract-like instruments entered into with the Federal Government in connection with federal property or lands and related to offering services for federal employees, their dependents, or the general public. As instructed by the President in Executive Order 14042, [*Ensuring Adequate COVID-19 Safety Protocols for Federal Contractors*](#) (when enforceable), certain covered federal contractors (those under federal contracts and “contract-like instruments”) may be subject to specific health and safety requirements, including a vaccination requirement,

On December 7, 2021, a Federal district court enjoined enforcement of Executive Order 14042 nationwide. This may be supplemented, modified, or vacated, depending on the course of litigation in this matter and in other federal actions challenging this Executive Order under which more limited injunctions have issued. Accordingly, in implementing Executive Order 14042, DOI will comply with all relevant court orders, taking into account relevant OMB and Safer Federal Workforce Task Force guidance, and will take no action to implement or enforce the contractor COVID-19 vaccination requirement pursuant to Executive Order 14042, in areas which are subject to a current court order prohibiting enforcement. The list of areas currently subject to court orders can be found on the Safer Federal Workforce Task Force’s website: <https://www.saferfederalworkforce.gov/contractors/>.

For contracts where EO 14042 is not applicable, and for contracts where this EO is applicable but not currently being enforced, all contractor employees working onsite in federally-controlled indoor

work sites must comply with the [Safer Federal Workforce Taskforce's guidance](#) for onsite contractor employees. Additional details about this requirement are outlined below in the Contractors Section below.

C. Certification of Vaccination Status

1. Employees

DOI does not currently collect information relevant to each employee's COVID-19 vaccination status in the Safety Management Information System (SMIS) (DOI's web application for DOI incident reporting and data submission for incident investigations).

Federal laws require DOI to retain the records previously collected in SMIS in compliance with applicable laws governing employee medical information, including the Rehabilitation Act, Occupational Safety and Health Act, the Privacy Act, the Federal Records Act, and other applicable laws. DOI has (1) taken steps to promote privacy and IT security; (2) consulted with our Agency Records Officer, Chief Information Officer, and Departmental Privacy Officer to determine the best means to maintain this information to meet the Department's needs; and (3) only disseminates this vaccination information to the appropriate officials who have a need to know to ensure effective implementation of the COVID-19 safety protocols, which, includes the supervisor level. Such information will not be stored in an employee's official personnel folder.

DOI employees who enter facilities controlled by other federal agencies in the performance of official duties must comply with the COVID-19 health and safety requirements of other federal agencies in federal facilities and on federal lands.

2. Contractors

The Department, at this time, does not inquire or collect information relevant to the COVID-19 vaccination status of contractors.

3. Official Visitors

As defined above, the term "official visitor" refers to any individual who is not a DOI employee or a DOI contractor who visits a DOI workplace (DOI-controlled facility or DOI-controlled land) for business purposes. DOI volunteers, partners, concessionaires, interns, Youth Conservation Corps and any other non-employees, non-contractor groups/individuals who enter DOI for business purposes are considered official visitors, unless otherwise noted. Individuals who visit a DOI workplace to obtain a public service or benefit, such as recreational visitors to a national park or

tribal members obtaining a public service or benefit, are not official visitors, but rather members of the public.

Official visitors must follow DOI COVID-19 safety protocols when physically present in a DOI workplace or engaging with others in person as part of official duties. DOI will not inquire or collect information related to the COVID-19 vaccination status of Official Visitors.

If a locality has imposed additional pandemic-related requirements more protective than those set forth in the model safety principles, official visitors should follow those requirements in DOI-controlled facilities and on DOI-controlled lands in that locality.

4. Members of the Public

Members of the public who visit a DOI workplace (DOI-controlled facility or DOI-controlled land) to obtain a public service or benefit, such as recreational visitors to a national park or tribal members obtaining a public service or benefit must comply with all relevant [CDC COVID-19 guidance](#) and COVID-19 safety protocols. If a locality has imposed additional pandemic-related requirements more protective than those set forth in the model safety principles, members of the public should follow those requirements in DOI-controlled facilities and on DOI-controlled lands in that locality.

If an individual is denied access to a DOI workplace or otherwise unable to access a DOI workplace due to DOI COVID-19 safety protocols, when necessary, DOI will develop alternative procedures that allow for individuals to continue to obtain any Federal Government benefits or services to which they are entitled.

D. Masks

1. General Guidance

The CDC revised its criteria for evaluating [COVID-19 Community Levels](#) and updated its preventive guidance, including masking. DOI Bureaus and Offices must use the CDC [COVID-19 Community Level](#) relevant to a DOI workplace by looking to the [COVID-19 Community Level](#) for the county in which the workplace is located and applying appropriate safety protocols outlined below based on the [COVID-19 Community Level](#).

Where a locality imposes more protective pandemic-related mask requirements, those requirements should be followed in DOI workplaces within that locality.

2. DOI masking protocols based on COVID-19 Community Levels

The following requirements must be implemented indoors in DOI workplaces:

- When the [COVID-19 Community Level](#) is LOW in the county where a DOI workplace is located, Bureaus and Offices **do not need to require individuals to wear masks** indoors in that workplace, regardless of vaccination status.
- When the [COVID-19 Community Level](#) is MEDIUM in the county where a DOI workplace is located, Bureaus and Offices **do not need to require individuals to wear masks** indoors in that workplace, regardless of vaccination status.
- When the [COVID-19 Community Level](#) is HIGH in the county where a DOI workplace is located, Bureaus and Offices must **require individuals to wear masks** when indoors in DOI workplaces and while on-duty in other indoor settings, regardless of vaccination status and consistent with CDC and Task Force guidance on mask-wearing.

Consistent with CDC [guidance](#) and Safer Federal Work Force Task Force requirements, individuals (who are 2 years or older) must wear a high-quality, well-fitting mask under the following circumstances:

- When indoors in DOI workplaces when the [COVID-19 Community Level](#) is HIGH;
- In government-operated aircraft, boats and other maritime transportation conveyances, and buses with multiple occupants regardless of [COVID-19 Community Levels](#);
- In healthcare settings or other special settings as when recommended by CDC;
- When required by, and in accordance with, the requirements for [Self-Isolation](#) and the [Close Contact Exposure](#) Section set forth [below](#); and
- Where State, Local, Tribal, or Territorial rules and regulations require individuals to wear masks; and
- When required by other applicable authorities when engaged in official travel.

When the [COVID-19 Community Level](#) is HIGH, individuals are not required to wear a high-quality, well-fitting masks under the following circumstances:

- When alone in an office with floor to ceiling walls and a closed door;
- During brief time periods when eating, drinking, or taking medications so long as physical distance is maintained in accordance with [CDC guidelines](#);
- In shared living areas when sleeping (e.g., berthing areas on maritime vessel)
- Briefly if asked to lower a mask for identification purposes; and

- Outdoors, including outdoor areas of conveyances, if any, and
- In government-operated aircraft, boats and other maritime transportation conveyances, and buses if there is a single occupant or if the occupants are all cohabitants.

While individuals are not required to wear a mask indoors where [COVID-19 Community Level is](#) LOW or MEDIUM, nothing in this policy should be interpreted to prohibit an individual from choosing to wear a mask.

DOI also strongly encourages:

- All employees to adhere strictly to [CDC guidance](#) for all travel, which includes wearing masks at indoor transportation hubs and on indoor conveyances, before, during, and after official travel;
- All individuals to wear well-fitting masks in multi-passenger government-operated vans, cars, trucks, and other motor pool passenger vehicles; and
- All individuals, including members of the public, to wear masks on multi-passenger indoor or enclosed areas of aircraft, boats and other maritime transportation conveyances, and buses operating on DOI-controlled lands (e.g., conveyances operated by contractors, or concessioners, or other partners).

3. Composition of Masks

For the purposes of this plan, the term “high-quality mask” means a surgical mask, procedure mask, or an internationally approved device (e.g., KN95s and KF94s). Respirators also meet the standard to be considered a “high-quality mask.” Respirators are defined as [NIOSH-approved filtering facepiece respirators](#) (e.g., N95 and P100 respirators). Cloth masks and similar face covers (e.g., gaiters) are not considered to be high-quality masks.

Use of a high-quality, well-fitting mask is required when the is HIGH as outlined in this [section](#) and whenever is a mask is required after completing [self-isolation](#) and following [close contact exposure](#). As outlined in DOI FAQs for masks, masks should be professional to the workplace and not offensive or in disrepair. DOI reserves the right to restrict prohibited messages and images from masks.

Bureaus and Offices may make respirators available to DOI employees to provide an additional option, which DOI employees may accept on a voluntarily basis, to satisfy COVID-19 safety protocols relevant to the use of high-quality masks. Employees may also choose to voluntarily wear a self-provided respirator. In all cases, the use of respirators must comply with requirements outlined within OSHA’s [Respiratory Protection Standard, 29 CFR 1910.134](#). Specifically, an employee may choose to wear filtering facepiece respirator voluntarily in DOI workplaces as long as:

- The employee is not required by their Office or Bureau to wear respiratory protection because of their work tasks (i.e., the employee is enrolled in a [Respiratory Protection Program](#) and must follow procedures outlined in their written respiratory protection program);
- The respirator does not interfere with or present additional safety hazards to the employee (i.e., visibility while driving, arduous work, etc.); and
- The employee MUST follow all applicable Bureau or Office policy and training requirements which MUST include the requirement to review [Appendix E of 1910.134, Respiratory Protection](#), prior to wearing a filtering face piece respirator in any DOI workplace.

DOI offers a course on Voluntary Use of Respirators by Employees During the COVID-19 Pandemic in [DOI Talent](#).

Any time that an employee is required by a Bureau or Office to wear a respirator, including to comply with the mask requirements outlined in this plan, then the employee becomes subject to the full requirements of a Respiratory Protection Program. These requirements include, but are not limited to, medical determination (i.e., medical clearance), fit testing, and training. Managers should consult with their servicing safety office before implementing a mandatory use requirement.

When a mask is required, regardless of the type of mask worn by the employee, compliance with this section requires that masks be (1) high-quality; (2) “well-fitting”; and (3) made with materials consistent with CDC [guidance](#). A mask is “well-fitting” if it covers the nose, mouth, and chin with no large gaps around the sides of the face. CDC [guidance](#) provides information on selecting a mask that provides the best fit, comfort, and protection for the wearer. DOI will not allow non-protective masks, cloth-face masks, any masks with ventilation valves, gaiters, or face shields as a substitute for a high-quality, well-fitting mask.

When a mask is not required, including when the COVID-19 Community Level is LOW or MEDIUM, employees may continue to wear cloth-face masks. Use of cloth masks should follow [CDC guidance](#). Bureaus and offices should otherwise avoid unnecessarily limiting the types of masks that can be worn by individuals in Federal facilities.

4. Requests for Exceptions to Masking Requirement

Some work situations are not conducive to wearing a mask. Requests for [exceptions to the COVID-19 mask requirement](#), either categorical or on a case-by-case basis, may be submitted to the COVID-19 Coordination Team. The requestor, along with the Bureau or Office Safety and Health Manager, in

consultation with other officials as required, will develop a list of safeguards based on CDC guidance to mitigate COVID-19 exposures when well-fitting masks cannot be worn. Once the request and the safeguards have been drafted, they will be presented to the COVID-19 Coordination Team for approval. If the Department makes such exceptions, appropriate alternative safeguards will be required, such as additional physical distancing measures, testing, or reconfiguration of workspace. All exceptions will be made in accordance with any guidance from the COVID-19 Coordination Team and will be documented in writing. Exceptions previously approved by the COVID-19 Coordination Team remain in effect, in accordance with the parameters established by the COVID-19 Coordination Team, until otherwise instructed by the COVID-19 Coordination Team.

5. Enforcement

Enforcing mask-wearing requirements for members of the public

Each Bureau or Office with law enforcement authority will undertake the appropriate administrative or regulatory actions as necessary to provide the basis to enforce applicable [mask requirements](#) for official visitors and members of the public in DOI workplaces and in DOI-operated conveyances. The DOI enforcement strategy will rely on appropriate regulatory actions, implementation and enforcement, and the incorporation of clear and consistent signage as appropriate. Significant efforts will be directed at safeguarding human life and the protection of natural and cultural resources. Law enforcement officers should promote education and deterrence, although when circumstances dictate that investigation, apprehension, or prosecution may be appropriate, an officer should do so professionally and effectively.

Although violations of mask-wearing requirements could result in legal penalties, law enforcement personnel should remain mindful that sound judgment and discretion are cornerstones in carrying out their law enforcement duties. Striving to maintain the sensitivity called for in achieving the overall goal of professional resource and visitor protection consistent with the DOI mission remains paramount. Discretion in enforcement decisions requires a critically thoughtful appraisal of the circumstances so the best possible result is attained. The outcomes of enforcement decisions should build public trust, meet mission goals, and uphold individual liberties and constitutional rights. De-escalation of any situation is the desired outcome.

E. Physical Distancing

[Physical distancing](#) is the practice of physically staying at least six feet away from other individuals to slow the transmission of COVID-19. Individuals are generally not required to physically distance within

DOI workplaces except under the circumstances provided in this *Plan*, consistent with CDC guidance regarding specific settings in which physical distancing is appropriate. Nothing in this policy should be interpreted to prohibit an individual from choosing to maintain physical distance from others, when practical, out of an abundance of caution in order to protect themselves and others from COVID-19 transmission.

When the COVID-19 Community Levels are MEDIUM or HIGH, Bureaus and Offices should post signage encouraging individuals, regardless of vaccination status, to consider avoiding crowding and physically distancing themselves from others in indoor common areas, and meeting rooms in DOI workplaces.

F. COVID-19 Employee Testing

DOI Bureaus and Offices are authorized to provide COVID-19 screening testing to DOI employees, at no cost to DOI employees under two circumstances: (1) COVID-19 screening testing offered following close contact exposure; and (2) COVID-19 screening testing when required in the performance of official business or for official travel. Bureaus and Offices are not authorized to implement any other COVID-19 employee screening testing program at this time, including serial screening testing in high-risk settings. Bureaus and Offices that seek to implement COVID-19 screening testing programs beyond the two circumstances authorized here must first communicate that desire with the COVID-19 Coordination Team to coordinate approval from the Safer Federal Workforce Task Force before implementing any COVID-19 screening testing program that is not authorized here (including serial screening testing in high-risk settings).

1. Screening Testing Offered Following Close Contact Exposure Protocols

a. Summary of Policy

Bureaus and Offices may offer DOI employees COVID-19 testing in conjunction with COVID-19 safety protocols following [close contact exposure](#), as described in this *Plan*.

Employees who test negative for COVID-19 may continue to report in person to the workplace or engage with others as part of their official duties while following applicable DOI COVID-19 safety protocols as outlined in the applicable Section of this *Plan*.

Employees who test positive for COVID-19 may telework or be granted sick leave (pay code 030) or another appropriate form of leave, as applicable and appropriate.

b. Coverage

This screening testing protocol is available to Bureaus and Offices to provide COVID-19 testing to DOI employees, in accordance with the COVID-19 safety protocols relevant to [close contact exposure](#).

c. Screening Testing Protocols

Bureaus and Offices will offer COVID-19 testing, on a voluntary basis under 5 C.F.R. § 339.302, must follow all applicable laws, rules, and regulations regarding testing offered under 5 C.F.R. § 339.302.

2. Screening Testing for Official Business or Official Travel

a. Summary of Policy

Some DOI employees may be required by another entity to present proof of a negative COVID-19 test result in the performance of official duties, such as when required to enter another federal facility or when required in connection with official travel or official business. When a DOI employee, in the performance of official duties, is required by another entity to supply proof of a negative COVID-19 test result, the employing Bureau or Office will offer COVID-19 testing provided by the Bureau or Office at no cost to employee, on a voluntary basis under 5 C.F.R. § 339.302.

b. Coverage

This policy applies to all DOI employees, as that term is defined in the Definitions Section.

c. Consequences of Refusing DOI-Offered COVID-19 Testing

Employees may decline testing offered by Bureaus and Offices under this program. Employees will not be disciplined for declining COVID-19 testing offered under the program for screening testing for official business or travel. However, employees may face adverse consequences if they fail to perform official duties due to the failure to supply requisite proof of a negative COVID-19 test result.

When the testing requirement is imposed by another entity, such as another federal agency, employees may choose to decline COVID-19 testing provided by the employer at no cost to employee offered by Bureaus or Offices. Since the requirement to supply proof of a negative COVID-19 test is imposed by another entity, employees who decline COVID-19 testing offered by Bureaus and Offices at no cost to employee may be responsible for obtaining COVID-19 testing in compliance with the requirements imposed by the other entity, in order to perform official duties. Employees who fail to

perform official duties may be subject to appropriate corrective action, including discipline, for the failure to perform official duties.

3. Protocols Following Positive Test Result

a. Duty to Notify Supervisor of Positive COVID-19 Test Result

All employees who test positive for COVID-19 through COVID-19 testing provided under this policy must immediately notify their supervisors of the positive COVID-19 test result. The failure to follow this requirement may result in appropriate corrective action, including appropriate discipline. Supervisors must report all cases following their established Bureau or Office protocols

b. Self-Isolation

Any employee who tests positive for COVID-19 through COVID-19 testing provided under this policy, or tests positive for COVID-19 via any personal testing source or develops symptoms consistent with COVID-19 or other infectious illness **MUST NOT** report in person to any DOI workplace or interact with members of the public in the performance of official duties. The failure to follow this rule may result in appropriate corrective action, including appropriate discipline.

All DOI employees with suspected COVID-19 (symptoms consistent with COVID-19 or other infectious disease) or confirmed COVID-19 (a positive COVID-19 test result) must follow the applicable COVID-19 safety protocols for the [Self-Isolation](#) section in this *Plan*.

c. Reporting Requirements

Any employee who tests positive for COVID-19 must not physically report to the workplace and must follow applicable [guidance](#) in this *Plan* and [DOI Risk Assessment and Decision Matrix for Managers](#) to determine when the employee may safely return to the workplace. Employees who test positive for COVID-19 must immediately notify their supervisors or appropriate DOI-designated supervisory points of contact. Supervisors must report all cases following their established Bureau and Office protocols.

Under the Occupational Safety and Health Administration's (OSHA) recordkeeping requirements, in a case of a workplace exposure, where an employee tests positive for COVID-19, each of the following conditions must be met:

- (1) the case is a confirmed case of COVID-19;
- (2) the case is work-related (as defined by 29 C.F.R. § 1904.5); and

(3) the case involves one or more relevant recording criteria (set forth in 29 C.F.R. § 1904.7) (e.g., medical treatment beyond first aid or days away from work).

If the above conditions are met, then under OSHA's recordkeeping requirements, the case must be recorded in the SMIS for official recording of it on the organization's OSHA *Injury and Illness Log*.

d. Time and Attendance

Employees who test positive for COVID-19 may telework, if telework-ready, or request and be granted sick leave (pay code 030), as applicable and appropriate. Managers and supervisors may request medical documentation to support a request for sick leave (such as proof of a positive COVID-19 test result), in accordance with applicable laws, rules, and regulations. Depending on the facts, a number of other options may exist for the employee to code time. Managers and supervisors should consult their servicing HR office with questions regarding time and attendance coding options.

4. COVID-19 Testing Specifications

a. COVID-19 Tests

Employees must use a test that has been approved or authorized by the FDA to detect current infection, such as an antigen (e.g., rapid) or nucleic acid amplification test (e.g., PCR). Antibody tests (serological tests) will not be accepted.

To verify the date and result of a test, tests must be able to generate a report with 1) identity of the individual tested; 2) the date on which the test sample was taken; 3) the test result to the tested DOI employee.

Options for the DOI COVID-19 Testing Program include:

- 1) In-store or drive-through point-of-care (POC) testing, such as at pharmacies;
- 2) Swab-testing capabilities that enable an individual to collect the specimen, using a self-collection kit, and drop it off at a designated collection location or ship it to a laboratory (as long as those tests are not both self-collected and self-read by the employee);
- 3) Over the counter (OTC) tests, as long as those tests are not both self-administered and self-read by the employee unless observed by a licensed physician or licensed health practitioner; or
- 4) Other self-administered tests, as long as those tests are not also self-read by the employee unless observed by a licensed physician or a licensed health practitioner.

b. Testing Costs

For the approved circumstances listed in this policy, Bureaus and Offices will pay for the cost of approved testing for employees, when necessary, as outlined above. Any additional costs, including fees associated with processing, shipping, handling, etc. must be pre-approved.

The cost of testing for official travel that was not available through a federal dispensary or not covered (or reimbursable) through travel insurance can be claimed in a travel voucher as a Miscellaneous Expense under agency travel policies.

Follow your Bureau or Office guidance for obtaining, documenting, and paying for tests for employees.

c. Testing Sources

Supervisors are expected to work with DOI employees who need testing to identify a source for testing. Supervisors must follow their Bureau or Office guidance for obtaining tests for employees, which may include checking with their contracting office to determine whether there is an existing contract prior to approving any purchase of tests or testing services. All contracts and other purchases must comply with Departmental policy regarding acceptable tests and testing procedures.

It is recommended that all COVID-19 testing be established and administered via government contract or agreement to ensure compliance with state and federal regulations associated with medical testing and other applicable laws. Testing may be conducted in-house (e.g., point-of-care tests used at a place of employment) if the Bureau or Office has a federally licensed medical provider to administer and interpret test results in a patient care setting that ensures proper storage and handling of the tests, and a facility that operates under a Clinical Laboratory Improvement Amendments (CLIA) Certificate of Waiver or Certificate of Compliance/Certificate of Accreditation.

d. Handling COVID-19 Test Results

Bureaus or Offices must comply with all applicable laws, rules, regulations, and policies, including their Bureau or Office's records management policies related to employee medical information when handling COVID-19 test results. Tests results are confidential medical records and must be treated as confidential in accordance with the requirements of the Rehabilitation Act. Supervisors and managers are encouraged to contact their servicing HR office for guidance in handling medical information.

G. Contact Tracing

Local health departments are responsible for prioritizing and leading case investigations, contact tracing, and outbreak investigations. When requested, Bureaus or Offices will collaborate with and support the contact tracing programs of local health departments to help identify, track, and manage contacts of COVID-19 cases. Bureaus or Offices will engage in coordination with facilities staff to implement COVID-19 infection control and workplace safety efforts once informed of a known or suspected case of COVID-19 (due either to specific symptoms or a positive test). Bureaus or Offices should also ensure that appropriate state and county reporting requirements and disclosures are made to public health officials, as required or necessary, to provide for the health and safety of federal employees, contractors, and the general public, in accordance with public health mandates and requirements.

If COVID-19 cases occur within a specific workplace, it will be the responsibility of Bureaus or Offices (or a field office or agency component designee) to determine—in consultation with local public health officials—appropriate next steps. Bureaus or Offices should be transparent in communicating related information to the workforce, as relevant and appropriate disclosures must be consistent with applicable laws governing privacy and confidentiality, including the Privacy Act, Occupational Safety and Health Act, and the Rehabilitation Act.

The Office of Safety and Health (OSH) maintains [DOI COVID-19 Risk Assessment & Decision Matrix for Managers](#) that is available to all employees on DOI's COVID-19 SharePoint site for Managers to assist Bureau or Office managers with assessing risk and determining appropriate actions to prevent and mitigate the spread of COVID-19 in DOI workplaces.

H. Reporting of COVID-19 Notifications

OEM issued COVID-19 Information Management Requirements early in the pandemic that have been updated as needed during the response. Specifically, there are two notification requirements for Bureau or Office Emergency Management Coordinators regarding COVID-19 related reporting:

- 1) Notification of all employees' positive cases including those who have a positive "at home" test and/or laboratory confirmed testing; and
- 2) Notification of employee COVID-19 related deaths.

This reporting is required for any employee cases regardless of whether they are work related. When notified of any employee positive cases or employee death from within their Bureau or Office, the Bureau or Office Emergency Management Coordinator will collect all pertinent information and send

an email to the Interior Operations Center (IOC) for tracking and reporting of Department-wide COVID-19 case numbers, along with any information that is appropriate for dissemination to DOI leadership and emergency management personnel. This information should be submitted at a minimum weekly no later than close of business on Thursday.

The IOC will update the DOI Common Operating Picture COVID-19 Dashboard and integrate the information into weekly notifications, which are distributed by the IOC on Monday or on an as-needed basis depending on the situation and severity of the information. The intent is to provide DOI Senior Leadership and the DOI emergency management community with a high-level view of DOI COVID-19 case counts and COVID-19 related impacts to DOI personnel and workplaces.

I. Health Monitoring, Self-Isolation, Close Contact Exposure, & Recordkeeping

1. Resources

The DOI OSH maintains the DOI [COVID-19 Risk Assessment & Decision Matrix for Managers](#) to assist Bureau or Office managers with assessing risk and determining appropriate actions to prevent and mitigate the spread of COVID-19 in the workplace.

Please refer to the definitions section above for the definitions of [health monitoring](#), [self-isolation](#), [self-quarantine](#), and [workplace notifications](#).

2. Health Monitoring

All individuals, including federal employees, contractors, official visitors, or members of the public, entering a DOI workplace are expected to complete daily [health monitoring](#) prior to entry using the information on [CDC's Symptoms of COVID](#), or [CDC's Symptom Checker Tool](#). Symptom screening can be self-conducted and does not need to be verified by Bureau or Office personnel. [CDC's Symptom Checker](#) provides direction on whether employees are allowed to physically report to work based on their symptoms, if they have had close contact with someone with a COVID-19 infection and are able to follow the COVID-19 safety protocols, and their COVID-19 current testing and diagnosis status. DOI workplace entrances will display signage listing common COVID-19 symptoms. Official visitors and members of the public may be asked to refer to the signage and complete a self-symptom screening before entering a DOI workplace. If DOI employees, contractors, official visitors, or members of the public have symptoms consistent with COVID-19, they must not physically enter or remain present in a DOI workplace. The Department strongly encourages individuals who develop COVID-19 symptoms to get tested immediately with a viral test authorized by the FDA to detect current infection.

Individuals who develop symptoms consistent with COVID-19, or other infectious diseases, must follow the [Self-Isolation](#) Section of this *Plan* to determine when it is safe to physically enter a DOI workplace.

Employees who have medical conditions that present with symptoms consistent with COVID-19 (e.g., seasonal allergies) or who have a physical or mental impairment that substantially limits one or more major life activities who require an adjustment in order to perform the essential functions of their positions while observing these health and safety protocols should contact their supervisor to explore appropriate solutions. Supervisors and managers should contact their servicing HR official for advice and support on any related reporting or human resources requirements.

3. Self-Isolation

As outlined in the [Health Monitoring](#) Section of this *Plan*, any employee who has suspected COVID-19 (symptoms consistent with COVID-19 or other infectious disease) or confirmed COVID-19 (a positive COVID-19 test result) MUST NOT be physically present in a DOI workplace or interact in person with others as part of their official duties until 24 hours post-symptoms (if not COVID-19) or as outlined below if probable or confirmed COVID-19.

- For employees who NEVER develop symptoms consistent with COVID-19, for the purpose of these protocols, the date on which the positive COVID-19 test was administered counts as “day 0”.
- For employees that develop symptoms AFTER testing positive, for the purpose of these protocols, the date of symptom onset counts as “day 0”. If an asymptomatic employee develops symptoms at any point after receiving a positive test result, they should start their self-isolation period over at day 0 (even if they have already return to the physical workplace after day 5).
- For employees who develop symptoms consistent with COVID-19 before testing positive for COVID-19, for the purposes of these protocols, “day 0” describes the first date on which symptoms appear.

DOI employees diagnosed with a COVID-19 infection must typically remain away from DOI workplaces and may not interact with members of the public in-person as part of their official duties

through day 10.² However, from day 6–day 10, employees may end the isolation period earlier only if they meet all five (5) criteria:

- 1) The employee must have been fever-free for 24 hours without the use of fever-reducing medication;
- 2) The employee does not exhibit any other symptoms consistent with infectious disease (e.g., coughing, shortness of breath, difficulty breathing);
- 3) The employee’s other symptoms that are associated with COVID-19, but not with a present COVID-19 infection, are improving*;
- 4) The employee must wear a high-quality, well-fitted mask compliant with the [mask requirements](#) under the Mask Section [mask](#) Section of this *Plan* at all times from days 6–10;
AND
- 5) The employee must follow the travel restrictions and requirements in the [Travel](#) Section of this *Plan*.

*If an employee had moderate illness (if they experienced shortness of breath or had difficulty breathing), or severe illness (they were hospitalized) due to COVID-19, or they have a weakened immune system, they should not return to a DOI workplace or interact with members of the public as part of their official responsibilities until after day 10. If an employee had severe illness or have a weakened immune system, they should consult their doctor before returning to a DOI workplace or interacting with members of the public as part of their official responsibilities.

If an employee cannot comply with these requirements (i.e., cannot wear a mask) they must refrain from physically entering a DOI workplace or interacting with others as part of their official duties until after day 10.

Employees who do not physically enter a DOI workplace or interacting with members of the public in person as part of their official responsibilities until after day 10 of when symptom onset or a positive test result may not be offered a test.

Employees subject to an isolation or quarantine order by an applicable State, Local, Tribal, Territorial, or public health authority may be required to observe additional health and safety protocols. Employees who are severely ill with COVID-19 (including those who were hospitalized)

² Some individuals may experience [symptoms for longer than ten \(10\) days](#) which could be consistent with non-infectious post-COVID conditions and need not delay return to work.

and employees with compromised immune systems should refrain from entering a DOI workplace until after day 10 following the date on which symptoms first appeared or the date on which the positive COVID-19 test was administered, whichever occurred first. These employees are advised to consult with their healthcare provider regarding when they should physically return to a DOI workplace.

Employees who develop symptoms consistent with COVID-19 or other infectious disease MUST NOT physically report to a DOI workplace, even if they have recently completed self-isolation.

CDC's setting-specific guidance may provide additional recommendations for settings such as congregate settings and healthcare settings. Where there is a conflict with more general guidance, Bureaus or Offices must follow the setting-specific guidance. CDC generally recommends a ten (10) day isolation period for certain congregate settings (including correctional or detention facilities) that have a high risk of secondary transmission. In these settings, CDC's recommendations for "isolation" would be the adopted as the Bureau or Office's return to work criteria for these congregate settings. Any decisions to shorten isolation in these settings should be made in consultation with State, local, Tribal, or Territorial health departments and should take into consideration the context and characteristics of the facility.

Please note, if an individual is residing in DOI controlled or operated shared or congregate housing and has symptoms consistent with COVID-19 or has been diagnosed with COVID-19 within the last 10 days they must follow the protocols prescribed above. When necessary, Bureaus or Offices must identify and provide single occupancy living quarters with their own bathroom for the entire duration of time required or self-isolate.

4. Workplace Notification

Upon notification of any positive COVID-19 case (e.g., employees, contractors, official visitors), the supervisor will refer to the [DOI COVID-19 Risk Assessment & Decision Matrix for Managers](#) to:

- Gather the correct information regarding the employee and any potential workplace contact or physical contamination of space to ensure appropriate safety protocols are applied;
- Make appropriate notifications to health, safety, and communication experts; and
- Coordinate [cleaning and disinfecting](#) of affected locations, when necessary.

5. Close Contact Exposure

An individual who comes into contact with a person infected with COVID-19 may become infected without exhibiting symptoms (asymptomatic infection) and may spread COVID-19 to others, absent appropriate safety precautions. Therefore, DOI employees who have come into [close contact exposure with a person currently infected with COVID-19](#) must:

- 1) Monitor themselves for symptoms consistent with COVID-19;
- 2) Wear a high-quality well-fitted mask compliant with the [Mask](#) Section of this *Plan* in indoor DOI workplaces and in outdoor DOI workplaces where physical distancing cannot be maintained. Masking must be observed through day 10 following the last close-contact exposure, where Day 0 is the date of close contact exposure and Day 10 is the tenth full calendar day following the date of close contact exposure;
- 3) Maintain physical distance of at least six (6) feet from others when masking is unpracticable (e.g., when briefly eating or drinking).

d. Employees Who Develop Symptoms Following Close Contact Exposure Must Follow Self-Isolation Protocols

Employees who develop symptoms consistent with COVID-19 or other infectious illness during Day 0 through Day 5 must follow COVID-19 safety protocols for [Self-Isolation](#). Consistent with DOI Policy, COVID-19 screening testing is not available to employees who present symptoms consistent with COVID-19 or other infectious illness.

e. Availability of Employee Testing Following Close Contact Exposure

To protect health and safety in DOI workplaces, Bureaus and Offices may offer COVID-19 testing, consistent with the requirements described in the Testing Section of this Plan and applicable laws, rules, and regulations, to employees who remain asymptomatic through the fifth (5th) full calendar day following close contact exposure with someone infected with COVID-19. Bureaus and Offices may offer COVID-19 testing to employees on Day 6 following the date of close contact exposure. Employees who test negative may continue to physically report to DOI workplaces while continuing to wear high-quality, well-fitting masks through Day 10. Employees who test positive at any time must follow COVID-19 safety protocols for self-isolation.

6. Recordkeeping Requirements

Under OSHA's recordkeeping requirements, if a DOI employee tests positive for COVID-19, and each of the following conditions are met, the case must be reported in DOI's SMIS to be recorded on the OSHA Illness and Injury Log: (1) the case is a confirmed case of COVID-19; (2) the case is work-related (as defined by [29 C.F.R. § 1904.5](#)); and (3) the case involves one or more relevant recording criteria (set forth in [29 C.F.R. § 1904.7](#)) (e.g., medical treatment beyond first aid, days away from work or restricted duty).

7. Claim for Work Related Injury

Employees diagnosed with COVID-19 due to work related exposure must give notice of injury in writing on Form CA-1 COVID-19, (Federal Employee Notice of Traumatic Injury and Claim for Continuation of Pay) in the Employees' Compensation Operations and Management Portal (ECOMP) for wage loss and medical benefits through the Department of Labor, Office of Workers' Compensation Programs (OWCP).

Workers covered by the Federal Employees' Compensation Act who suffer a traumatic injury proximately caused by exposure to COVID-19 in connection with employment may be eligible to receive workers' compensation benefits, including disability benefits, medical services, and survivor benefits, and may be eligible to elect to receive continuation of pay instead of using accrued sick or annual leave. For information on Workers' Compensation testing requirements and filing deadlines, please refer to [FECA Bulletin No. 22-06 COVID-19 Claims Processing Guidelines Relating to Reinfection & Home Test](#).

For questions pertaining to Workers' Compensation benefits, contact the workers' compensation specialist assigned to the specific Bureau or Office.

J. Travel

1. General

Pursuant to EO 13991, [OMB Memorandum M-21-15](#), and as outlined in the Safer Federal Workforce Task Force [FAQs](#), all DOI employees should adhere strictly to DOI's COVID-19 safety protocols (e.g., masking physical distancing, and testing) outlined in this *Plan* before, during, and after official travel when required. All travelers should [take health and safety precautions](#) and self-monitor for symptoms.

Employees are encouraged to refer to CDC's guidelines for both [domestic](#) and [international travel](#). Bureaus or Offices are encouraged to provide guidance, as necessary to carry out their missions. Employees must be made aware of all travel restrictions outlined below if they test positive for COVID-19, develop symptoms consistent with COVID-19, or are exposed at close-contact with persons infected with COVID-19 while on official government travel. Managers and supervisors considering approving official travel should be aware that return travel may be delayed in order to observe COVID-19 safety protocols.

If there is a need to accommodate any extension in travel, the emergency travel regulations at [41 CFR 301-30](#) can be used by a travel preparer and Bureau and Office leadership to provide lodging and MI&E during the additional travel days to accommodate any extensions in travel due to COVID-19 symptoms or a diagnosis as outlined in CDC guidance (up to 14 days).

Where a State, Local, Tribal, or Territorial jurisdiction requires or CDC guidance recommends COVID-19 testing as a condition of entry, the Department will pay for the cost of testing as outlined in the [Testing](#) Section of this *Plan* above.

Employees should follow all testing requirements as outlined in the [Testing](#) Section of this *Plan* and each individual Bureau or Office's COVID-19 testing protocols.

2. Official Travel

DOI employees regardless of vaccination status may travel to conduct official government business (although Bureau or Office travel policies still apply).

In approving official travel for employees, Bureaus and Offices should:

- Inform those employees that CDC recommends that individuals make sure they are *up to date* with COVID-19 vaccines before travel;

- Recommend that those employees consider being tested for current infection with a viral test as close to the time of departure as possible (no more than 3 days) before travel;
- Instruct those employees to adhere strictly to CDC guidance for domestic or [international](#) travel before, during, and after official travel, including masking; and
- Instruct those employees to check their destination’s COVID-19 situation before traveling, including given that State, Tribal, local, and territorial governments may have travel restrictions in place.

3. Travel Requirements Following Recent Close Contact Exposure Before or During Official Government Travel

The following requirements should be applied for all DOI employees before or during official government travel following a recent close contact exposure:

Employees regardless of their vaccination status, may undertake official travel at any time so long as:

- 1) They remain asymptomatic;
- 2) Official travel is consistent with the Bureau or Office’s travel policy; and
- 3) They wear a high-quality well-fitting mask compliant with the requirements in the [Mask](#) Section of this *Plan* at all times in indoors and on public transportation (e.g., trains, airplanes, vessels, busses) and MAY NOT remove their mask when present around others from day 0–day 10.

To protect health and safety in DOI workplaces, Bureaus and Offices may offer COVID-19 testing, consistent with the requirements described in the Testing Section of this Plan and applicable laws, rules, and regulations, to employees who remain asymptomatic through the fifth (5th) full calendar day following close contact exposure with someone infected with COVID-19. The test must be offered on or after day 6 and Bureaus and Offices do not need to require that employees wait for the results of this a test to undertake official travel, including return travel.

If an employee cannot follow these criteria, they may not engage in any official government travel until after day 10.

If either the test result is positive, or the employee develops symptoms consistent with COVID-19 the employee must immediately follow safety protocols for [self-isolation](#), as described above. Official travel is not permitted until they meet the return to work/travel criteria outlined in the next Section.

4. Travel Requirements Following COVID-19 Diagnosis or Positive Test Result Before or During Official Government Travel

Any employee who tests positive for COVID-19, receives a diagnosis of COVID-19, or develops symptoms consistent with COVID-19 must immediately follow safety protocols in the [self-isolation](#) section of this Plan.

Official travel is not permitted at any time for employees with [confirmed or probable](#) COVID-19 from day 0–day 5.

From day 6–day 10, Bureaus and Offices may approve travel only if all the following criteria are met. Employees must:

- 1) Meet the requirements to end [self-isolation](#);
- 2) Comply with federal travel requirements related to additional costs; and
- 3) Wear a high-quality well-fitting mask compliant with the requirements in the [Mask](#) Section of this *Plan* at all times and MAY NOT remove their mask when present around others.

If an employee cannot follow these criteria, they may not engage in any official government travel until after day 10.

5. Travel in Single Occupancy Vehicle to Following Close Contact Exposure or Self-Isolate

The Safer Federal Workforce Task Force has indicated that if an employee is on official government travel and may not travel on a common carrier due to a close-contact exposure or an asymptomatic COVID-19 infection, the employee may be allowed to drive a single occupancy vehicle in order to return to their permanent duty station following a close contact exposure or self-isolate. The Department may allow and reimburse such travel so long as the employee receives second level supervisor approval and modifies their travel orders, as long as the travel for return to the permanent duty station does not exceed 350 miles using the most direct route or require more than 8 hours of travel time over the course of a single day. During return travel, an employee MAY NOT enter an indoor facility at any time or come into close contact with any other individuals indoors or outdoors at any time before or during the duration of their entire return trip.

6. Local Travel

DOI employees, regardless of their vaccination status, who are undertaking local travel on official business (i.e., local travel on official business beyond their commute to and from their worksite and that is not conducted under an official travel authorization) who are notified of having had a close contact with someone infected with COVID-19, may proceed with official business that requires local,

same-day travel on indoor public-transportation conveyances. Employees must also follow the COVID-19 safety following the [Close Contact Exposure](#) Section of this *Plan* and all screening testing requirements in the [Screening Testing Following Workplace Close Contact](#) Section of this *Plan*.

K. COVID-19 Human Resource Flexibilities

1. Administrative Leave for Obtaining a COVID-19 Vaccination

Effective on and after January 21, 2022, while the preliminary injunction is in place, administrative leave (pay code 060) should be granted (as opposed to duty time, which was previously granted) for employees to obtain an FDA-approved and FDA-authorized COVID-19 vaccination during work hours. Employees whose COVID-19 vaccination appointment(s) fall within their regularly scheduled tour of duty may request administrative leave (pay code 060) for the time necessary to obtain each dose of the vaccine (generally, not to exceed four hours per dose). Under extenuating circumstances (e.g., employees who reside in remote locations and need to travel long distances to their appointments), employees may be granted additional administrative leave in the amount necessary to obtain the vaccination, but no more than eight hours per dose. The use of administrative leave to obtain each dose of an FDA-approved or FDA-authorized COVID-19 vaccine is subject to supervisory discretion and operational needs. Employees may not be credited with administrative leave or overtime work for time spent obtaining a vaccination outside their duty hours.

2. Obtaining a Booster or Additional COVID-19 Vaccination

To promote the safety of the federal workforce and the American public, DOI supervisors should grant up to four hours of administrative leave (pay code 060) for eligible employees to receive a booster or additional dose of an FDA-approved or FDA-authorized COVID-19 vaccine, consistent with FDA and CDC guidance. Since federal employees are not required to receive an additional COVID-19 vaccine booster or additional dose, official duty time (pay code 010) may not be authorized for such purposes. The administrative leave should cover the time it takes to travel to the vaccination site, receive the vaccination dose, and return to work. If an employee spends less time getting the vaccine, only the needed amount of duty time should be granted. Employees may not be credited with administrative leave or overtime work for time spent getting booster vaccine shot or additional dose outside of their tour of duty (during non-duty hours).

3. Leave Due to Adverse Effects following Vaccination

In the event an employee experiences adverse side effects after obtaining an FDA-approved or FDA-authorized COVID-19 vaccine and is unable to work (including telework), the employee may request up to two full days of administrative leave (pay code 060), subject to supervisory discretion and operational needs. Employees needing additional recovery time may request sick leave (pay code 030) or other appropriate leave.

4. Leave to Accompany a Family Member for a Vaccination

Generally, up to four hours of administrative leave (pay code 060) per dose of an FDA-approved or FDA-authorized COVID-19 vaccine must be granted to an employee to accompany a family member to become vaccinated where the family member's appointment(s) falls within the employee's regularly scheduled duty hours, subject to supervisory discretion and operational needs. For this purpose, a "family member" is an individual who meets the definition under [5 C.F.R. § 630.201](#).

5. Leave Due to Self-Isolation

DOI employees who become ill with COVID-19 or other infectious disease must not physically report to or remain in DOI workplaces as outlined in the [Self-Isolation](#) Section of this *Plan*. This includes mandatory isolation orders while on travel status.

When a DOI employee is [not allowed](#) to physically report to the workplace due to confirmed or probable COVID-19, managers and supervisors should work with the employee to determine, with assistance from the servicing HR office as necessary, how to appropriately manage work or code the employee's time. Generally, a telework-ready employee should telework. If an employee is symptomatic or has tested positive for COVID-19 or other infectious disease, a supervisor must grant the employee's request for sick leave, in accordance with applicable laws, regulations, and Departmental policies. DOI employees may request to use other available forms of leave (such as annual leave, credit hours, leave without pay, etc.), which managers and supervisors may approve if appropriate under applicable laws, rules, and regulations. When approving requests by employees to take leave, Bureaus and Offices should advise employees that making a false statement about illness or a close-contact exposure could result in disciplinary action, up to and including removal from federal service. HR servicing offices may request additional information when necessary to confirm that the employee has been diagnosed with or is experiencing symptoms consistent with COVID-19. In requesting this information, agencies must comply with any applicable federal laws, including requirements under the Rehabilitation Act of 1973 and the Privacy Act.

6. Telework & Remote Work

Bureaus or Offices should manage workplace flexibilities such as telework, remote work, alternative work schedules, and leave consistent with Departmental policy, ensuring that the use of these flexibilities does not diminish organizational performance.

L. Facilities and Safety

1. Entry into DOI Facilities and Workplaces

In accordance with [EO 13991](#), [OMB Memorandum M-21-15](#), and this *Plan*, the responsible manager of each DOI workplace must ensure all individuals physically present in DOI workplaces are aware of the requirements for entry and required COVID-19 safety protocols upon entry.

2. Signage

Designated Officials (DO) or the GSA Building Manager is responsible for posting signage at the entrances to inform all personnel to follow COVID-19 safety protocols based [COVID-19 Community Levels](#). This includes posting signage that mask-wearing is optional when the COVID-19 Community Level is LOW and MEDIUM.

Signage will vary by DOI workplace as needed given local requirements and conditions. Information about these requirements at specific facilities also will be publicly available on the Bureau's and Office's website(s) and will be regularly communicated to employees, onsite contractor employees, official visitors, and members of the public.

The Department is required to take steps to implement the policy established by EO 13991, and these steps include orders by the occupant agency or the relevant Facility Security Committee (FSC), or, for GSA-controlled facilities, GSA imposing requirements consistent with the EO 13991. For GSA controlled facilities, GSA will also post COVID-19 signs about mask-wearing requirements in entries and common areas of federally owned GSA-controlled facilities and privately leased facilities if GSA leases the entire building. If GSA has delegated operations and maintenance to an occupant agency, DOI is responsible for signage. For non-GSA controlled facilities, if the agency with jurisdiction, custody, or control over a facility has not already issued a policy making the wearing of high-quality, well-fitting masks consistent with CDC guidance a condition of entry to the facility and throughout common areas and shared workspaces, the occupying DOI Bureau or Office must implement the requirements of EO 13991 and distribute notice of the mask requirement through written signage posted conspicuously at each public entrance on the property, and through other communications of

internal policies and guidance directed to its employees and contractors. The FSC should meet to discuss operational considerations (including conspicuous posting of notices at entrances to facilities), enforcement protocols, and any other issues associated with implementation of EO 13991 requirements that require cross-agency collaboration at the local level.

The Office of Facilities and Administrative Services (OFAS) COVID-19 signage is updated on the internal [OFAS website](#). Posted signs will reflect the mask wearing requirements based on CDC's [COVID-19 Community Level](#) for the county in which the DOI workplace is located.

For DOI workplaces that encompass more than one county, Bureaus and Offices must assess the [COVID-19 Community Level](#) for all relevant counties and follow the most protective safety protocols based on the highest [COVID-19 Community Level](#) across the entire DOI workplace. When feasible, information about these requirements at specific facilities is also publicly available on the agency's website(s) and regularly communicated to employees and onsite contractor employees.

3. Environmental Cleaning

Standard office cleaning operations will continue normal schedules, with additional cleaning of communal areas conducted daily, by existing janitorial staff or supplemental contracts. DOI will conduct periodic risk assessments to determine areas that are considered common use/high-touch/high-density spaces (e.g., lobbies, restrooms, elevators, and stairwells) and develop, update, and implement facility-level plans for regular cleaning and when necessary, disinfecting of these areas in accordance with [CDC guidelines](#). Wipes, gloves, and other products on [EPA List N: Disinfectants for Coronavirus \(COVID-19\)](#) will be made available for individuals to wipe down their workstation and related personal property.

The Department will ensure all employees and contractors who use cleaning chemicals and disinfectants are properly trained on the hazards of the cleaning chemicals used in the workplace in accordance with [OSHA's Hazard Communication standard \(29 C.F.R. § 1910.1200, et seq.\)](#) and that all employees and contractors utilize appropriate personal protective equipment in accordance with OSHA requirements and DOI policy. Physical barriers, such as plexiglass shields, may be installed, where appropriate. Any time an indoor workspace is altered, (i.e., installing a physical barrier; moving desks or equipment) Safety and Health Managers/building management should be consulted to ensure additional health or safety hazards are not created by modification.

Specific guidance for cleaning and disinfecting can be found CDC's [Cleaning and Disinfecting your Facility](#) webpage. If a person diagnosed or with symptoms consistent with COVID-19 was physically

present in the workplace, building managers should follow DOI's and when applicable, GSA's building notification requirements, and CDC's cleaning and disinfecting [guidance](#). It is advised, that if the area needs to be cleaned or disinfected, it be closed off until cleaning or disinfecting can be performed, and cleaning staff should wait as long as possible (at least several hours) before cleaning and disinfecting. Specific guidance for cleaning and disinfecting can be found below and on CDC's [Cleaning and Disinfecting your Facility](#) webpage. As of July 15, 2022, CDC advises:

- **If less than 24 hours have passed** since the person who is sick or diagnosed with COVID-19 has been in the space, **clean and disinfect** the space.
- **If more than 24 hours have passed** since the person who is sick or diagnosed with COVID-19 has been in the space, **cleaning is enough**. Building managers may also disinfect depending on [certain conditions](#) or everyday practices required by the facility.
- **If more than 3 days have passed** since the person who is sick or diagnosed with COVID-19 has been in the space, **no additional cleaning (beyond regular cleaning practices) is needed**.

The Bureaus and Offices should consult with their Safety and Health Managers to determine the appropriate scope of workplace closures needed—in some cases, it may be a suite or individual offices or part of a floor, in other cases, it may include an entire facility.

4. Hygiene

Hand washing or hand sanitizer stations are to be available to staff and visitors at building entrances and throughout workspaces. Hand sanitizer must not be on the [U.S. Food and Drug Administration \(FDA\) Do-Not-Use List](#) and have at least 60% alcohol and be manufactured in accordance with FDA requirements. All hand sanitizer ingredients should be listed on a "Drug Facts" label. Personnel will be encouraged to wash their hands with soap and water or use hand sanitizer or alcohol-based hand rubs frequently.

GSA will provide hand sanitizer in the building entrances and common areas of federally owned GSA-controlled facilities. In GSA-controlled lease location, Bureaus and Offices are responsible for procuring and providing hand sanitizer in facility entrances and common areas. Bureaus and Offices are also responsible for procuring and providing hand sanitizer within their occupied spaces, whether leased or federally owned.

5. Occupancy

To be consistent with Safer Federal Workforce Task Force guidance, Bureaus or Offices should not establish facility-level occupancy limits solely for the purpose of facilitating physical distancing as a COVID-19 prevention action, absent an exception approved by COVID-19 Coordination Team. When

COVID-19 Community Levels are MEDIUM or HIGH, Bureaus and Offices can consider establishing occupancy limits for indoor common areas and meeting rooms in DOI facilities, and in high-risk settings within DOI facilities, where necessary, including where ventilation and air filtration is challenging to improve despite agency efforts to the maximum extent feasible, or crowding cannot otherwise be avoided.

6. Ventilation & Air Filtration

Facility Managers at each indoor DOI facility should consult with building engineers and their servicing safety office/manager to assess, make, and maintain improvements to the facility's ventilation and air filtration systems using the DOI COVID-19 [Building Re-Occupancy Guidance](#), the [CDC Ventilation in Buildings Guidance](#), and the Environmental Protection Agency's Clean Air in Buildings Challenge. This should be used to determine if any ventilation modifications are advisable per [CDC](#) and [OSHA](#) guidelines for facility ventilation systems to minimize the concentration of COVID-19 particles in the air in indoor spaces. Facility Managers may deploy portable high-efficiency particulate air (HEPA) cleaners in indoor common areas and meeting rooms, particularly where ventilation or air filtration is otherwise challenging to improve despite agency efforts to the maximum extent feasible, or where crowding cannot be avoided, and in high-risk settings.

Modifications should be documented in the approved facility-level plan to assure that CDC and OSHA recommended upgrades are implemented, especially as facility population density increases. To the maximum extent feasible, indoor ventilation will be optimized to increase the proportion of outdoor air and improve filtration.

M. Collective Bargaining Obligations

In implementing this *Plan*, DOI Bureaus or Offices will continue to communicate regularly with employee representatives on workplace safety matters. DOI will satisfy all applicable collective bargaining obligations under [5 U.S.C. Chapter 71](#) over the impact and implementation of the Agency Model Safety Principles and CDC guidance and consistent with any applicable collective bargaining agreement(s), as appropriate, and as provided for in Section 2(c) of EO 13991. DOI must act quickly due to the COVID-19 emergency and to protect the health and safety of employees, contractor employees, official visitors, and members of the public. As such, while DOI will communicate with the appropriate union representatives in a timely manner and strive to satisfy any applicable collective bargaining obligations under the law at the earliest opportunity, completion of bargaining may need to occur on a post-implementation basis where appropriate.

N. Incident, Wildland Fire, and Disaster Response Operations

The health and well-being of all personnel are a priority throughout our response and recovery operations. During urgent incident response (e.g., wildland fire and other responses), relevant safety protocols (e.g., masking, physical distancing, and testing) must be followed as outlined in this Plan. As outlined in [485 DM 4, Section 4.5 E: Interagency Operations and Activities](#), where employees of other federal agencies engage in joint operations and activities and/or primarily report to work, or carry out operations and activities in the same establishment as DOI, the jurisdictional agency's safety and health standards adopted under 29 CFR 1960.7[16] and/or the jurisdictional agency's supplemental standards adopted under 29 CFR 1960.17~19 shall govern. In the event a jurisdictional agency's safety and health standards do not meet the minimum standards promulgated by DOI, then DOI will apply its standards to DOI employees at multi-employer worksites.

Personnel should reference the best practices in the U.S. Geological Survey's [COVID-19 Contingency Planning Guide for USGS Large Vessel Operations](#) (internal), published May 25, 2021.

All personnel should monitor their health and continue to monitor DOI's OSH and CDC guidance for regular updates to the [list of symptoms of COVID-19](#). If an employee develops symptoms consistent with COVID-19 while on assignment, the employee must report that to their supervisor. The next steps will be coordinated with team leadership, the medical unit, and/or public health authorities. For employees who fall ill or are injured while on an incident, the supervisor will be required to enter the injury or illness case in the DOI SMIS within seven calendar days from the date of receiving information that a recordable injury or illness has occurred.

Specific best practices for Public Safety and Emergency Medical Service Providers are on the [First Responders](#) section of the [All DOI Employees COVID-19 Information Portal](#). Other best practices to utilize on deployments in a COVID-19 environment can be found in the All DOI Employee COVID-19 Wildland Fire Portal.

APPENDIX A–DOI COVID-19 Coordination Team

- Senior Counselor to the Secretary
- Principal Deputy Assistant Secretary–Policy, Management and Budget
- Office of Occupational Safety and Health
- Office of Human Capital
- Office of Communications
- Office of the Solicitor
- Office of Emergency Management

Should conditions change that warrant expanding the DOI COVID-19 Coordination Team, these additional members would be included as needed:

- Assistant Secretary–Fish and Wildlife and Parks
- Assistant Secretary–Indian Affairs
- Assistant Secretary–International and Insular Affairs
- Assistant Secretary–Lands and Minerals Management
- Assistant Secretary–Policy, Management and Budget
- Assistant Secretary–Water and Science
- Deputy Assistant Secretary–Public Safety, Resource Protection and Emergency Services
- Bureau of Indian Affairs
- Bureau of Indian Education
- Bureau of Land Management
- Bureau of Ocean Energy Management
- Bureau of Reclamation
- Bureau of Safety and Environmental Enforcement

- Bureau of Trust Fund Administration
- Fish and Wildlife Service
- National Park Service
- Office of Surface Mining Reclamation and Enforcement
- United States Geological Survey
- Region 1 - North Atlantic-Appalachian
- Region 2–South Atlantic-Gulf
- Region 3–Great Lakes
- Region 4–Mississippi Basin
- Region 5–Missouri Basin
- Region 6–Arkansas-Rio Grande-Texas-Gulf
- Region 7–Upper Colorado Basin
- Region 8–Lower Colorado Basin
- Region 9–Columbia-Pacific Northwest
- Region 10–California-Great Basin
- Region 11–Alaska
- Region 12-Pacific Islands

APPENDIX B—Summary of Document Version and Changes

- 8/2022 Version 5.0-Updated to reflect SFWTF’s changes related to meetings and conferences, physical distancing, close-contact exposure, testing, self-isolation, masks, and travel
- 08/19/2022 Version 4.0- Updated to reflect SFWTF’s changes related screening testing, quarantine, physical distancing, and attestation, and testing
- 08/02/2022: Version 3.0- Updated to reflect SFWTF’s changes related to Exceptions, Leave, Mask-Wearing, Official Travel, and Testing, and Updated FAQs on Contractors, Quarantine and Isolation, Symptom Screening, Vaccinations, and Visitors and CDC’s recent isolation, testing, masking, vaccination status, quarantine, travel, COVID-19 Community Levels, and the nationwide preliminary injunctions enjoining agencies from implementing or enforcing EO 14043 and EO 14042, incident response and mission critical guidance.
- 12/10/2021: Version 2.1-Page 3, Section I added language about Executive Order 14042 and court orders. Page 9, Section V.A.2b removed the word “testing”. Section V.A.2c added language about Executive Order 14042 and court orders. Page 19, Section V.J.2 removed language about SARS-CoV-2 viral test results and changed to “follow CDC testing requirements, CDC symptom monitoring guidance”.
- 12/03/2021: Version 2.0-Added vaccination requirements, exemptions, added information from OMB Self-Assessment checklist
- 9/28/2021: Version 2.0-Updated to latest Safer Federal Workforce Task Force guidance related to attestation, diagnostic testing, levels of transmission, vaccination requirement, reasonable accommodations, and masking, physical distance requirements throughout *Plan*, and changed format to improve readability
- 7/29/2021: Version 1.3-Updated to mask wearing guidance for vaccinated personnel
- 7/23/2021: Version 1.2a-Correction to date §5.2 A and change table
- 7/20/2021: Version 1.2-Adjusted Section 5.1: F. Travel, and H. Quarantine and Isolation, Section 5.2: A. Occupancy, F. Visitors, and I. Shared Spaces to align with OMB Memorandum M-21-25
- 6/4/2021: Version 1.1-Updated URL links, various nomenclature, and revised document to remain consistent with CDC’s mask, travel, physical distancing, testing, and cleaning and disinfecting guidelines and Safer Federal Workforce Task Force FAQs and directives
- 6/4/2021: Version 1.1-Updated to maintain consistency with COVID-19 Workplace Safety and Health Risk Reduction Guidelines, DOI COVID-19 Testing Guidance, DOI Employee Guidance for Domestic Travel, Recommendations for Mitigations and Managing COVID-19 Exposures and Illness in Shared and Congregate Housing, DOI’s COVID-19 Testing Guidance, DOI’s Updated Vaccination FAQs for DOI Managers and Supervisors, and mask wearing guidance for vaccinated personnel