**Department of the Interior (DOI)**

**COVID-19 Workplace Safety Plan**

1. **Purpose:**


2. **Background**

The [DOI Pandemic Plan](https://www.interior.gov/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](https://www.interior.gov/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 goal of the [DOI COVID-19 Workplace Safety Plan](https://www.interior.gov/covid-19) is to:

   - A. Halt the spread of coronavirus disease 2019 (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; and
   - C. Sustain the mission of the Department and mitigate impact to the environment, natural resources, economy and the functioning of society.

3. **Communications**

Interior has communicated regularly with staff following the President’s Executive Order, including an All-Staff message reinforcing the mask mandate, bureau-specific messages to staff, new signage throughout the Main Interior Building and development of new signage for visitors to Interior-managed lands (i.e., national parks). Following the completion of the Safety Plan, we will continue to use all of the tools in our communications toolbox to inform federal employees, onsite contractors and visitors of policy changes. This includes an All-Staff email making the new plan available; prominent placement in Interior’s weekly newsletter that goes to all staff; top placement of COVID resources on the DOI.gov website; amplification on social media; and a new public awareness campaign via social media that underscores social distancing/mask rules.

4. **Scope**

Bureaus and Offices are expected to adhere to the principles set forth in this plan. Bureaus and Offices, as appropriate, should develop Bureau, Office, or location-specific plans to implement the principles set forth in this Plan.

5. **OMB Safe Workplace Model Principles**

5.1 **Health and Safety**

(CDC), the Occupational Safety and Health Administration (OSHA) and state worksite guidance to constantly evaluate and develop office and facility-specific plans for workplace mitigation strategies and execution of functions based on local community transmission levels.

DOI has adapted the DOI Common Operating Picture (COP) to include multiple dashboards that provide U.S. Department of Health and Human Services (HHS)/CDC COVID-19 data at the county level, including the CDC’s COVID Data Tracker County View. The DOI COP also includes data from the states for travel restrictions and vaccination plans where available. The DOI COP provides leadership a graphical summary view of the status of DOI public-facing facilities and current DOI COVID-19 case positivity, death rates and recoveries. The DOI COP also displays the latest guidance and critical information for COVID-19 that is disseminated among the DOI Emergency Management Community or to all DOI employees.

DOI will inform employees of the content of this plan and will communicate changes as they occur through Bureaus and Offices. Employee training modules on preventive measures and an overview of COVID-19 are available on DOI’s online learning portal (DOI Talent) and the DOI Safety and Health Phone Application available to all employees.

Upon notification of a positive case the supervisor will utilize the DOI COVID-19 Risk Assessment & Decision Matrix for Managers to ensure the correct information regarding the employee and any potential workplace contact or physical contamination of space is gathered, the appropriate notifications are made to health, safety and communication experts and coordination is completed for cleaning and disinfecting of affected locations. The matrix also covers supervisor discussion with an employee for telework or leave status, as appropriate based on the particular circumstances, as well as assessing return to work feasibility based on CDC guidance.

The Office of Emergency Management (OEM) issued COVID-19 Information Management Requirements early in the pandemic and have updated them as needed during the response. Specifically, there are 3 notification requirements for Bureau/Office Emergency Management Coordinators regarding COVID-19 related operational reporting: 1) notification of positive cases, 2) notification of COVID-19 related deaths, and 3) notification of an employee’s recovery from COVID-19. When notified of any of the above information management requirements from within their Bureau/Office, the Bureau/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 cases, along with any information that is appropriate for dissemination to DOI leadership and emergency management personnel.

Upon receipt of COVID positive cases and COVID-related deaths and recoveries, the IOC will update the DOI Common Operating Picture COVID dashboard and integrate the information into notifications, which are distributed by the IOC on weekdays and 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 case counts and COVID-related impacts to DOI personnel, facilities and lands.

A. Telework

DOI will continue to maximize telework in the Department and the Bureaus. Telework and other workforce flexibilities such as alternative work schedules (e.g., maxiflex), annual leave, sick leave and family medical leave; limited use of excused absence for caregiving responsibilities
(i.e., 20 hours of administrative leave per pay period) remain available. Weather and safety leave may also be authorized for vulnerable employees who cannot effectively perform their jobs in a telework status (i.e., off-site) as well as for those employees who are not telework ready. These flexibilities support the workforce to allow time for activities such as caring for children and protecting high-risk individuals as identified by the CDC.

Employees currently teleworking on a frequent or regular basis (e.g., maximum telework) will be given advance notice and guidance before returning to the physical workplace.

**B. 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.

[Diagram of DOI Pandemic Plan Departmental Response Coordination]

**DOI Pandemic Plan Departmental Response Coordination Diagram**

The DOI Pandemic Plan provides functional descriptions of each element listed in the above organization chart. For the purposes of the COVID-19 response, the DOI COVID-19 Coordination Team, as defined by the OMB memo (M-21-15), is also considered the Secretary’s Leadership Team.

The Secretary’s Leadership Team leads the Department’s strategic response and crisis communications effort during severe and catastrophic events. Membership of this team may vary according to the type of incident. For the COVID-19 response, this team includes the Senior Advisor to the Chief of Staff, the Office of Emergency Management, the Office of Human Capital, the Office of Communications, the Office of Occupational Safety and Health (OSH), the Office of the Solicitor, Assistant Secretaries, Bureau Directors and Field Special Assistants. See Appendix A for a detailed list of DOI COVID-19 Coordination Team members.
The Senior Executive Emergency Management Council (SE-EMC) supports the Secretary’s Leadership Team as needed. The SE-EMC is led by the DOI Office of Emergency Management and includes representation from all bureaus and all the major Offices of the Secretary.

The DOI COVID-19 Coordination Team will conduct assessments to establish, implement and monitor compliance with: 1) safety protocols for physical space and masking; and 2) determinations of on-site and telework/remote working. The DOI COVID-19 Coordination Team has been meeting regularly since February 2020 and plans to continue meetings until the Department has moved out of the pandemic phase of the COVID-19 response.

The DOI One Health Group is a team of wildlife, human and environmental health professionals from across the Department that provide subject matter expertise in support of emergency managers responding to pandemic threats involving wildlife species, DOI personnel, volunteers, students, inmates, or visitors to DOI lands.

C. Masks

Consistent with current CDC and OSHA guidance and applicable law, all persons in DOI buildings or on DOI-managed lands must wear a mask. This requirement is subject to limited exceptions detailed below.

Masks must conform to CDC guidance \footnote{1} and fully cover the nose and mouth. DOI will not allow novelty/non-protective masks (e.g., bandanas and gaiters), masks with ventilation valves or vents, face shields as a substitute for masks. Guidance regarding the structural composition of effective masks may be subject to change as the CDC updates its guidelines to better reflect the current understandings of scientists and public health experts.

To the extent funds are available, Bureaus and Offices are authorized, but are not required, to purchase masks to provide to staff and visitors for use in the conduct of DOI business, in DOI facilities, or on DOI lands.

Masks do not provide the same level of protection as respirators (e.g., N95s) and should not replace respirators that are formal personal protective equipment (PPE) when required at the workplace. They also do not replace the need for physical distancing of at least 6-feet and washing or sanitizing hands frequently.

Bureaus and Offices shall promptly consult, as appropriate, with State, local, Tribal and Territorial government officials, federal employees, federal employee unions, federal contractors and any other interested parties concerning the implementation of this section.

(1) Employees, Contractors, Concessionaires and Volunteers: On-duty or on-site federal employees, contractors, concessionaires and volunteers must wear a mask when in any indoor common areas; or shared workspaces (including hallways, open floorplan office space, cubicle embankments and conference rooms) in a DOI facility. On-duty or on-site federal employees, contractors, concessionaires and volunteers on DOI lands must wear a mask when in outdoor shared and outdoor public spaces when physical distancing of six feet cannot be maintained or when approaching others with the expectation that physical distancing of a

\footnote{1} (Examples of allowable masks are: Non-medical disposable masks, masks that fit properly (snugly around the nose and chin with no large gaps around the sides of the face), masks made with breathable fabric (such as cotton), masks made with tightly woven fabric (i.e., fabrics that do not let light pass through when held up to a light source), masks with two or three layers and masks with inner filter pockets)
minimum of six feet cannot be maintained. On-duty or on-site federal employees, contractors, concessionaires and volunteers on DOI lands must also wear a mask when interacting with visitors where there are less than six feet between the employee and the visitors (e.g., contact stations, entrance kiosks, visitor service areas, campground management). For on-duty or on-site federal employees, contractors, concessionaires and volunteers working outdoors in remote DOI areas where contact with the public/visitors is limited such individuals must have a mask with them at all times and wear the mask when nearing or passing others where physical distancing of at least six feet cannot be maintained.

If an on-duty or on-site federal employee, contractor, or volunteer is unable to wear a mask properly or cannot tolerate a mask, DOI will consider adaptations and alternatives on a case by case basis. Some worksites are not conducive to wearing a mask. Exceptions to the mandate will be made on a case-by-case basis following any guidance from the COVID-19 Coordination Team. In accordance with applicable law, DOI will provide reasonable accommodations for qualified individuals. Supervisors and contracting officers shall ensure compliance with mask requirements. DOI reserves the right to restrict prohibited messages and images from masks.

(2) Public visitors to DOI-managed facilities and lands: DOI will place signage at main entrance areas notifying visitors of occupancy requirements/limitations and that masks are required when visiting DOI facilities and public lands. Masks are required when visitors are inside any DOI facility. Masks will also be worn in outdoor shared and public spaces when physical distancing of at least 6 feet cannot be maintained. Visitors who are unable to wear a mask for medical reasons will be addressed on a case-by-case basis. The Department will ensure citizens have access to benefits and services to which they are entitled by law.

(3) Implementing and enforcing mask-wearing requirements for public visitors: To enforce the wearing of a mask, each Bureau with law enforcement authority will undertake the appropriate administrative or regulatory actions as necessary to provide the basis to enforce the mask requirement to visitors on the DOI-managed lands. The DOI enforcement strategy will rely on CDC Guidance on mask-wearing to support regulatory actions, implementation and enforcement, incorporate clear and consistent signage as appropriate and utilize multiple methods of communication (website, press release, public service announcement, pamphlet/brochure, use of visitor service staff, etc.) to educate visitors and establish health and safety expectations prior to enforcement action.

Although violations of mask-wearing requirements could result in criminal 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. 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.

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.
(4) **Limited Exceptions**: The Department recognizes there are other unique environments (e.g., schools, detention centers, law enforcement operations, arduous work activities, DOI employees working outside DOI lands and facilities while in DOI logoed or other identifying attire, etc.) that may need further exploration and explanation. Bureaus/Offices will develop a process in their plans to develop written requests for exceptions and adjudication of the requests. The requestor along with the Bureau/Office Safety and Health Manager, in consultation with other officials as required, will develop a list of safeguards based on CDC guidance that will be used to mitigate exposures. 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, additional testing, or reconfiguration of workspace, consistent with applicable law. All exceptions will be made in accordance with any guidance from the COVID-19 Coordination Team and will be documented in writing.

**D. Testing**

As required in the [Executive Order](#), the CDC is developing and submitting a testing plan for the federal workforce to the COVID-19 Response Coordinator. Once that plan is available, the DOI Workplace Safety Plan or other guidance will be updated to reflect the CDC plan.

**E. Contact Tracing**

The Department’s involvement with the official health department case investigation or contact tracing process may vary on a case-by-case basis as outlined in CDC guidance. Site managers will use the [DOI COVID-19 Decision Matrix](#) to assess risk and determine appropriate actions (e.g., identifying and notifying workplace close contacts) to prevent and mitigate the spread of COVID-19. When requested, site managers will collaborate with local health departments with contact tracing efforts. Site managers are expected to coordinate with HR and facilities staff to implement appropriate infection control and workplace safety efforts once informed of a case of COVID-19 (either due to specific symptoms or positive test).

In accordance with applicable federal privacy laws and regulations, only those individuals with a bonafide need to know (e.g., site manager, HR, safety officials) have the authority to make disclosures to local public health officials as authorized and necessary to provide for the public health and safety of federal employees and contractors. Such individuals must comply with applicable federal privacy laws and regulations when disclosing such information. If two or more confirmed COVID-19 cases occur within a distinct work setting within a 14-day period, it will be the responsibility of the local supervisor to determine appropriate next steps in consultation with the Bureau/Office safety and health manager or public health office. The Department will be transparent in communicating related information to the workforce, as relevant and appropriate, consistent with federal privacy laws and regulations.

**F. Travel**

DOI employees should adhere to CDC [guidelines](#) before, during and after official travel. At this time, these include the following precautions: 1) carefully assessing travel risk before travel, 2) wearing a mask during all portions of a trip, maintaining physical distance from non-household members, 3) maintaining good hand hygiene by regularly washing hands with soap and water, or using alcohol-based hand sanitizer if soap and water are not available, 4) getting tested before and after travel, and 5) staying away from the workplace after traveling in accordance with CDC
guidance. The CDC has extensive guidelines for both domestic and international travel and DOI employees should consult these resources carefully before deciding to travel. Additional resources for official travel can be found on the GSA COVID-19 Information Site. Bureaus/Offices are encouraged to make additional guidance available to suit their missions as appropriate.

DOI employees should be aware that they may be required to stay away from the workplace for a period of time after official or personal travel (typically allowing the employee to request personal leave when it results from personal travel if an employee is otherwise expected to be present onsite) before they are allowed to return to the workplace, as well as following any testing guidance once issued. Private transportation for official travel is preferred to the use of public or other communal transportation, in combination with other safety/security guidance.

DOI employees who need to self-quarantine due to official travel and are telework-eligible should be allowed to telework. Employees who are ineligible to telework should contact their supervisor and servicing HR specialist to determine appropriate COVID-19 HR flexibilities. Every opportunity should be afforded for the supervisor to find the employee work during their self-quarantine such as training or reviewing of SOPs.

Given currently high levels of transmission in the United States, official domestic travel should be limited to only mission-critical trips. Each Bureau and Office should establish a policy for review and authorization of travel including identification of mission-critical travel and identifying the level of approval required. International travel should also be avoided if at all possible unless it is mission-critical. Avoid any unnecessary air or other mass transit travel to, within, or connecting through a location that has a high level of community transmission.

Where a local jurisdiction requires COVID-19 testing as a condition of entry or to avoid quarantine, agency appropriations are available to pay for the cost of testing for mission-critical trips. Where testing is required for official travel, individual employees should not be required to travel but can do so voluntarily.

G. Symptom Monitoring

DOI relies on employees, contractors, volunteers and visitors to the Department’s workplaces to conduct a daily self-assessment for all symptoms of COVID-19, including elevated temperature. Additionally, DOI workplace entrances will display signage listing common COVID-19 symptoms. Anyone exhibiting any symptoms consistent with COVID-19, may not enter. Any individual who develops any symptoms consistent with COVID-19 during the workday should immediately isolate away from other employees and visitors, notify their supervisor (preferably by phone) and, unless teleworking from home, promptly leave the workplace. Any individual who is awaiting COVID-19 test results must not enter a DOI facility. OSH continues to maintain the DOI COVID-19 Risk Assessment & Decision Matrix for Managers to assist agency managers with assessing risk and determining appropriate actions to prevent and mitigate the spread of COVID-19 in the workplace.
H. Quarantine and Isolation

All DOI employees, volunteers and contractors with suspected or confirmed COVID-19 should not be physically present in the workplace. Employees, volunteers and contractors are advised to follow CDC guidance regarding self-quarantine and self-isolation as well as CDC guidance to determine when it is safe to return to the workplace.

All DOI employees, volunteers and contractors who have had close contact, as defined by CDC, with someone who was diagnosed with COVID-19 should follow CDC and local guidance for self-quarantine. Critical infrastructure workers (e.g., law enforcement, firefighters) should adhere to CDC’s guidance COVID-19 Critical Infrastructure Sector Response Planning Guidance. Based on this guidance, DOI may consider allowing exposed and asymptomatic critical infrastructure workers to continue to work in select instances when it is necessary to preserve the function of critical infrastructure workplaces. This option should be used as a last resort and only in limited circumstances, such as when cessation of operation of a facility may cause serious harm or danger to public health or safety.

All DOI employees who contracted COVID-19 due to a workplace exposure while on-duty must enter relevant information about their illness into the DOI’s Safety Management Information System (SMIS).

DOI guidance, Recommendations for Mitigations and Managing COVID-19 Exposures and Illness in Shared and Congregate Housing, will be used to protect workers and volunteers who reside in shared/congregate housing to prevent the spread of COVID-19.

I. Confidentiality

All medical information collected from personnel, including test results and any other information obtained as a result of testing and symptom monitoring, will be treated confidentially in accordance with applicable law and accessible only by those with a need to know in order to protect the health and safety of personnel. OSH and the Departmental Designated Agency Safety and Health Official (DASHO) serve as the point of contact for all questions relating to personal medical data.

5.2 Workplace Operations

Bureaus/Offices will continuously assess the feasibility and safety of operations while ensuring employee and visitor safety. To do this, Bureaus and Offices will use the Risk Assessment Tool for Reopening Public-Facing Facilities, published June 9, 2020, and identify whether appropriate mitigation techniques can be performed to protect employees, volunteers, contractors and visitors. Decisions will continue to be documented on the DOI COVID-19 Station Risk Assessment Decision Form, published June 9, 2020. Bureaus and Offices are encouraged to consult with safety and health managers for guidance on evaluating the most effective methods to prevent and control workplace hazards.

A. Occupancy

Currently, no DOI indoor workplace or visitor experience facility, venue, or other areas where visitors typically congregate in large crowds should operate above 25% of normal occupancy standards during periods of significant or high community transmission as defined by CDC. Levels of community transmission can be established by consulting CDC’s COVID Data Tracker County View. Exceptions to this policy must be cleared by the bureau head or Assistant
Secretary for Policy, Management and Budget (AS-PMB) as advised by the DOI COVID-19 Coordination Team and in consultation with the Safer Federal Workforce Task Force. Each Bureau/Office will continue to manage and update staffing plans for each facility that outline which employees will work on-site full-time, on-site occasionally, or fully remote to meet operational requirements and essential functions. Supervisors (or Bureaus) shall ensure no more than 25% of their employees are at the worksite at any given time if at all possible through the use of alternative work schedules, maximum telework, maxiflex as described in the OPM work schedule flexibilities fact sheet.

B. Physical Distancing

To the extent practicable, individuals will be asked to maintain a distance of at least six feet from others at all times whether indoors or outdoors, consistent with CDC guidelines, including in offices, conference rooms and all other communal and workspaces. Signs will be posted on all entrances and floor stickers will be used as appropriate to remind and encourage appropriate distancing. Distance and testing are not substitutes for wearing masks. Individuals should maintain distance AND properly wear masks. Mitigation strategies, such as one-way walkways, reconfiguration of workspaces or office assignments should be considered and implemented to minimize interactions. Employees that must report to the worksite should practice social distancing and work with their supervisors to ensure protocols are met. Facility managers may consider monitoring the number of employees who “swipe” in or working with human capital to determine the number of employees who record telework, administrative leave, weather and safety leave on a biweekly basis. All DOI messaging will be utilized as appropriate.

C. Environmental Cleaning

Standard office cleaning operations will continue on normal schedules, with additional sanitization 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 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 CFR 1910.1200) and utilize appropriate personal protective equipment in accordance with OSHA requirements and DOI policy.

Any area occupied within the last 7 days by a person diagnosed with COVID-19 or presumed symptomatic will be immediately closed for at least 24 hours before being sanitized per the CDC guidance and GSA Cleaning and Disinfection Procedures, published March 12, 2020. If more than 7 days have passed since the person who is sick visited or used the facility, additional cleaning and disinfection are not necessary.

D. 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 FDA Do-Not-Use List.
and have at least 60% alcohol. Personnel will be encouraged to wash their hands with soap and water or use hand sanitizer or alcohol-based hand rubs frequently.

**E. Ventilation and Air Filtration**

Designated officials at each indoor DOI facility should consult with building engineers and their servicing safety office/manager to assess the building’s ventilation systems using the DOI COVID-19 Ventilation Checklist in Appendix B. This should be used to determine if any ventilation modifications are advisable per CDC and OSHA guidelines for building ventilation systems to minimize the concentration of SARS-CoV-2 particles in the air in indoor spaces. Modifications should be documented in the approved facility-level plan to assure that CDC/OSHA recommended upgrades are implemented.

**F. Visitors**

The number of visitors to the federal indoor workplaces should be minimized and efforts should be made to conduct visits virtually where possible. Any visitor must self-screen for symptoms consistent with COVID-19 before entering a DOI facility or DOI leased facility. Mask-wearing requirements, outlined in Section 5.1 C, will also apply to any visitors to DOI or DOI leased facilities.

**G. Staggered Work Times and Cohort-Based Scheduling**

In instances where different offices are in a building shared with other government agencies, Tribes, or other mission partners or even in the same local area with other government agencies, supervisors should communicate with one another to better stagger schedules to control the number of people in the building at one time as well as ensure that all offices follow similar protocols. For example, set up a spreadsheet or use the Microsoft Teams Shifts tool to schedule work in an office or lab so employees only enter one at a time. All requests would have to be approved 24 hours ahead so staff could be restricted in the event of an exposure. If it is a shared facility, approvals would have to be allocated to ensure staggering.

**H. Elevators**

Local safety and health managers should determine safe occupancy limits and implement the recommendations outlined in the CDC’s office building guidance for elevators and escalators when appropriate. Such decisions should be documented in the Bureau or facility plan. Signs will be posted advising users of the occupancy limits. Individuals must wear masks in elevators and elevator lobbies. The use of stairs by those who are physically able is strongly encouraged. Signage will be posted to explain current procedures.

**I. Shared Spaces**

Shared tools and equipment must be disinfected by users anytime the equipment is used by or transferred to a new person and disinfectants on the EPA List N: Disinfectants for Coronavirus (COVID-19) will be made available for individuals to clean shared equipment and property. This includes phones, computers and other communication devices, kitchen implements and other office equipment. Refrigerators, microwave ovens, water coolers and coffee brewers with disposable cups (or a personal reusable cup/container) and single-serve condiments and creamers may be used with proper hand hygiene. Visual markers may be installed to promote physical distancing within common spaces and furniture may be removed. Steps may be taken to limit the number of people who can use common spaces at any one time and signage outlining these limits
should be prominently displayed. Bureaus and Offices should develop plans to assure shared tools and equipment are disinfected in all facilities and post appropriate signs to direct and instruct employees on proper disinfectant.

J. Incident, Wildland Fire and Disaster Response Operations

The health and well-being of all personnel are a priority throughout our response and recovery operations. Personnel should refer to “Mitigation Strategies to Reduce the Risk of Transmission in DOI Workplaces,” published May 5, 2020, for strategies to help reduce the spread of COVID-19 at the incident site.

DOI should adhere to travel guidelines detailed in Section 5.1 F. of this plan before, during and after mission-critical and disaster/wildland fire response operations.

Upon arrival at the incident check-in location, personnel may undergo screening procedures as established by the organization managing the incident. Any individual responding may opt-out of the screening procedures by declining to deploy. Upon screening, if personnel are found to have symptoms of COVID-19, they will not be allowed entrance and will be excluded from incident assignments until they meet the CDC’s guidance on discontinuing home isolation. The next steps should be coordinated with team leadership, the medical unit and/or public health authorities. Any medical information gathered is subject to the Rehabilitation Act and Privacy Act must be handled confidentially and must be maintained in the Employee Medical Folder. Best practices on screening procedures and prevention and mitigation strategies at an incident can be found on the All DOI Employee COVID-19 Wildland Fire Portal.

Practicing physical distancing is crucial to helping to prevent the spread of COVID-19. Personnel should follow DOI’s “Social Distancing and Daily Health Monitoring Implementation Guidelines,” published February 8, 2021, for general physical distancing guidance. For the duration of the incident, single resources and teams should use a “team as one or module as one” or family unit approach to reduce their exposure to the public and other teams. Once a team has been established, minimize interaction with the public and outside community when physical distancing cannot be appropriately maintained. If possible, when integrating new members into a team where physical distancing is unlikely and close-quarters work is common, new members should be separated for two weeks before integration. Teams should avoid gathering with other groups and should limit face-to-face meetings. However, if meetings are necessary and teams cannot maintain appropriate physical distancing of six feet from each other, the Department requires the wearing of cloth masks and use of other mitigation strategies appropriate to the work environment. Personnel should not engage in unnecessary physical contact with others, such as handshaking. Incident Management Safety Officers have the discretion to make risk-based decisions when the work environment is not conducive to wearing a mask (e.g. wildland fire operations that require high intensity cardiovascular or physical activities). Any mask worn near a fire line must be made of non-synthetic material.

During incident assignments, personnel may need to interact with others in spaces in which physical distancing cannot be maintained. Personnel should reference the best practices listed below:

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. All personnel should follow the latest cleaning and hygiene guidance available on the Safety and Health page of the All DOI Employee COVID-19 Information Portal. If a person falls ill on an incident, she/he must report that to their incident manager. 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 7 calendar days from the date of receiving information that a recordable injury or illness has occurred.

All response and recovery personnel must understand the differences between the types of masks and PPE and their appropriate use to mitigate the spread of COVID-19. Follow the “DOI Employee Guidance on the Wearing of Cloth Face masks” during response and recovery operations. Utilize the OSH “Understanding the Differences – Respirators, Masks and Cloth Face masks,” published March 24, 2020, table to ascertain when masks versus personal protective equipment should be used. Masks should be frequently cleaned with soap and water. Each person should have multiple masks so that one can be used while the others are laundered.

In living quarters on an incident, cleaning and disinfection of common areas and potentially contaminated surfaces is necessary to mitigate the spread of COVID-19. Personnel should follow DOI and CDC cleaning and disinfection recommendations throughout the deployment. Other best practices on cleaning and disinfecting procedures can be found at:

- All DOI Employee COVID-19 Wildland Fire Portal
- National Park Service COVID-19 Information Portal - NPS Coronavirus Response - Managers of Facilities, Building Systems and Other Operational areas
- U.S. Geological Survey’s Cleaning and Disinfection of the Workplace

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 All DOI Employee COVID-19 Wildland Fire Portal.

K. Continuity of Operations (COOP)

(1) Prioritization of Essential Functions during a pandemic.

During COVID-19, COOP planning influences response to mission vulnerability. Detailed guidance on DOI’s COOP operations is found in the DOI COOP Plan. Depending on the effects
on the performance of DOI’s Primary Mission Essential Functions, Mission Essential Functions and Essential Supporting Activities detailed in the DOI COOP Plan, the Secretary or AS-PMB may choose to activate the DOI COOP Plan in order to ensure prioritization and continuation of essential functions throughout the pandemic period. Bureau and office directors may activate their COOP plans independently of the DOI COOP Plan if a pandemic affects essential functions within a bureau or office more than DOI as a whole. Activation of the DOI COOP Plan or any other COOP Plan during COVID-19 does not automatically mean relocation of continuity team members to an alternate location.

Distribution of the DOI COOP Plan is limited to personnel with a need to know. Please contact the Office of Emergency Management for more information.

(2) Alternate Operating Facilities.

DOI has identified and prepared alternate operating facilities to support COOP operations, including facilities geographically dispersed from the National Capital Region, should the activation of the DOI COOP Plan occur during COVID-19. Alternate sites are not designed or intended for use to physically distance employees.

OEM has reviewed and adapted operations plans to address the movement, protection, housing and feeding of staff if deployment to DOI’s alternate sites is required for simultaneous activation of the DOI COOP Plan during COVID-19. Additionally, these plans incorporate appropriate mitigation measures in accordance with CDC guidelines to prioritize the health and safety of all personnel at the alternate sites.

(3) Special Provisions for COOP Team Members During a Pandemic.

Employees working at alternate operating locations during a pandemic may be asked to take certain precautions before deploying and upon arrival. Some of these precautions may include:

a. Entrance screening for infection.
b. Proper wearing and donning of masks.
c. Prioritization and provision of vaccination (if available) and antimicrobial medication.
d. Quarantining at COOP site for the appropriate amount of time based on the disease to determine individuals are not infected.
e. Working flexible/alternate schedules to reduce the numbers of personnel in common spaces at alternate operating locations at one time and support physical distancing.
f. Working from lodging rooms to reduce the numbers of personnel in common spaces at alternate operating locations at one time and support physical distancing.

Summary of Document Version and Changes

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<thead>
<tr>
<th>Version Number</th>
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<th>Date of New Version</th>
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<td>1.1</td>
<td>Finalized</td>
<td>2/19/2021</td>
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### Appendix A DOI COVID-19 Coordination Team

<table>
<thead>
<tr>
<th>Position</th>
<th>Office</th>
</tr>
</thead>
<tbody>
<tr>
<td>Senior Advisor to the Chief of Staff</td>
<td>Office of Emergency Management</td>
</tr>
<tr>
<td>Office of Human Capital</td>
<td>Office of Communications</td>
</tr>
<tr>
<td>Office of Occupational Safety and Health (OSH)</td>
<td>Office of the Solicitor</td>
</tr>
<tr>
<td>Assistant Secretary</td>
<td>Assistant Secretary – Fish, Wildlife and Parks</td>
</tr>
<tr>
<td>Assistant Secretary – Indian Affairs</td>
<td>Assistant Secretary – International and Insular Affairs</td>
</tr>
<tr>
<td>Assistant Secretary – Lands and Minerals Management</td>
<td>Assistant Secretary – Policy, Management and Budget</td>
</tr>
<tr>
<td>Assistant Secretary – Water and Science</td>
<td>Deputy Assistant Secretary – Public Safety, Resource Protection and Emergency Services</td>
</tr>
<tr>
<td>Bureau of Indian Affairs</td>
<td>Bureau of Indian Education</td>
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<tr>
<td>Bureau of Land Management</td>
<td>Bureau of Ocean Energy Management</td>
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<tr>
<td>Bureau of Reclamation</td>
<td>Bureau of Safety and Environmental Enforcement</td>
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<tr>
<td>Bureau of Trust Fund Administration</td>
<td>Fish and Wildlife Service</td>
</tr>
<tr>
<td>National Park Service</td>
<td>Office of Surface Mining Reclamation and Enforcement</td>
</tr>
<tr>
<td>United States Geological Survey</td>
<td>Region 1 - North Atlantic-Appalachian</td>
</tr>
<tr>
<td>Region 2 – South Atlantic-Gulf</td>
<td>Region 3 – Great Lakes</td>
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<tr>
<td>Region 4 – Mississippi Basin</td>
<td>Region 5 – Missouri Basin</td>
</tr>
<tr>
<td>Region 6 – Arkansas-Rio Grande-Texas-Gulf</td>
<td>Region 7 – Upper Colorado Basin</td>
</tr>
<tr>
<td>Region 8 – Lower Colorado Basin</td>
<td>Region 9 – Columbia-Pacific Northwest</td>
</tr>
<tr>
<td>Region 10 – California-Great-Basin</td>
<td>Region 11 – Alaska</td>
</tr>
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<td>Region 12 – Pacific Islands</td>
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</tbody>
</table>


# Appendix B Ventilation Checklist

## DOI COVID-19 Ventilation Checklist

This document is intended for use in DOI-owned and operated buildings. It primarily uses the *Centers for Disease Control and Prevention Guidance on Ventilation in Buildings* to evaluate and document potential modifications to Heating, Ventilation, Air-Condition (HVAC) systems.

Ventilation system upgrades or improvements or other steps can increase the delivery of clean air and dilute potential contaminants.

Completed by: _____________________ Date: _____________________

<table>
<thead>
<tr>
<th>Intervention Considerations</th>
<th>Facility Notes</th>
</tr>
</thead>
<tbody>
<tr>
<td>☐ Obtain consultation from building managers and experienced Heating, Ventilation and Air Conditioning (HVAC) professionals when considering changes to the HVAC systems and equipment</td>
<td></td>
</tr>
</tbody>
</table>

Ventilation improvements may include some or all of these considerations:

☐ Increase outdoor air ventilation (using caution in highly polluted areas)

☐ Increase fresh outdoor air by opening windows and doors. NOTE: *Do not open windows and doors if doing so poses a safety or health risk to occupants in the building.*

☐ Use fans to increase the effectiveness of open windows. NOTE: To safely achieve this, fan placement is important and will vary based on room configuration. Avoid placing fans in a way that could potentially cause contaminated air to flow directly from one person over another.

☐ Decrease occupancy in areas where outdoor ventilation cannot be increased.

☐ Ensure ventilation systems operate properly and provide acceptable indoor air quality for the current occupancy level for each space.

☐ Increase airflow to occupied spaces when possible.

☐ Turn off any demand-controlled ventilation (DCV) controls that reduce air supply based on occupancy or temperature during occupied hours. In homes and buildings where the HVAC fan operation can be controlled at the thermostat, set the fan to the “on” position instead of “auto,” which will operate the fan continuously, even when heating or air-conditioning is not required.

☐ Open outdoor air dampers beyond minimum settings to reduce or eliminate HVAC air recirculation. NOTE: In mild weather, this will not affect thermal comfort or humidity. However, this may be difficult to do in cold, hot, or humid weather.
☐ Improve central air filtration by increase aid filtration to as high as possible without significantly reducing design airflow.

☐ Improve central air filtration by inspecting filter housing and racks to ensure appropriate filter fit and check for ways to minimize filter bypass.

☐ Improve central air filtration by checking filters to ensure they are within their service life and appropriately installed.

☐ Ensure restroom exhaust fans are functional and operating at full capacity when the building is occupied.

☐ Inspect and maintain local exhaust ventilation in areas such as kitchens, cooking areas, etc. Operate these systems any time these spaces are occupied. Consider operating these systems, even when the specific space is not occupied, to increase overall ventilation within the occupied building.

☐ Consider portable high-efficiency particulate air (HEPA) fan/filtration systems to help enhance air cleaning (especially in higher risk areas such as a nurse’s office or areas frequently inhabited by persons with a higher likelihood of COVID-19 and/or increased risk of getting COVID-19).

☐ Generate clean-to-less-clean air movement by re-evaluating the positioning of supply and exhaust air diffusers and/or dampers (especially in higher-risk areas).

☐ Consider using ultraviolet germicidal irradiation (UVGI) as a supplement to help inactivate SARS-CoV-2, especially if options for increasing room ventilation are limited. Upper-room UVGI systems can be used to provide air cleaning within occupied spaces and in-duct UVGI systems can help enhance air cleaning inside central ventilation systems.

☐ This checklist is on file with the building manager

Note: The ventilation intervention considerations listed above come with a range of initial costs and operating costs which, along with risk assessment parameters such as community incidence rates, facemask compliance expectations and room occupant density, may affect considerations for which interventions are implemented. Cost estimates per room for the listed ventilation interventions in cost.

Example: In non-residential settings, consider running the HVAC system at maximum outside airflow for 2 hours before and after the building is occupied.

- No cost: opening windows; inspecting and maintaining local exhaust ventilation; disabling DCV controls; or repositioning outdoor air dampers
- Less than $100: using fans to increase the effectiveness of open windows, or repositioning supply/exhaust diffusers to create directional airflow
- $500 (approximately): adding portable HEPA fan/filter systems
- $1500 (approximately): adding upper room UVGI