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Management Plan for the COVID-19 Healthcare Emergency Temporary Standard

OCTOBER 25, 2021

Management Plan for the COVID-19 Healthcare Emergency Temporary Standard

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- E OSHA ETS Compliance Guidance for Employers (Flow Chart)

COVID-19 Safety Coordinator: Henry Schantzen, Head of School

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*** Annual Review Form ***

Certification

I certify that I have reviewed the information provided and accept this written management plan. With assistance from our EHS consultant, the school will implement the policies and procedures noted within this plan. The written plan is a working document that will be reviewed and revised annually, or as needed.

Print Name _____

Signature _____

Date _____

Program reviews and follow-up of program-related issues are documented below.

[illegible]

1.0 Introduction

Bluffview Montessori School is committed to providing a safe and healthy workplace for all employees and preventing the transmission of COVID-19 in the workplace. Personal Protective Equipment (PPE), physical distancing and barriers, ventilation, cleaning and disinfecting, and training procedures have all been developed in this plan as part of a multi-layered infection control approach.

The COVID-19 Safety Coordinator(s) has worked collaboratively with non-managerial employees and their representatives to assess COVID-19 hazards and implement this plan. This management plan outlines methods, policies and procedures to comply with the Occupational Safety and Health Administration's (OSHA) 29 CFR 1910.502 COVID-19 Healthcare Emergency Temporary Standard (ETS).

This program is being implemented at no cost to employees.

The Center for Disease Control and Prevention's (CDC) *Standard and Transmission-Based Precautions* have been utilized to develop this plan to the extent possible.

This program has been established to include similar healthcare settings throughout the school, including the Health Office

2.0 Responsibilities

The program administrator, or designee, is the COVID-19 Safety Coordinator and is responsible for:

- Establishing all methods, policies and procedures in this written program
- Ensuring the program remains up-to-date
- Coordinating required workplace-specific hazard assessments, training, medical evaluations and fit tests
- Ensuring that non-managerial employees and representatives have had input on this written program

The program administrator has authority to ensure compliance with all aspects of this plan. Contact information for the program administrator is available on the first page of this management plan.

The COVID-19 Safety Coordinator(s) works collaboratively with non-managerial employees, or representatives, to assess and address COVID-19 hazards, including when there is employee exposure to people with suspected or confirmed COVID-19.

3.0 Definitions

Facemask is defined as, a surgical, medical procedure, dental, or isolation mask that is FDA-cleared, authorized by an FDA EUA, or offered or distributed as described in an FDA enforcement policy. Facemasks may also be referred to as "medical procedure masks."

Face shield is defined as, a device, typically made of clear plastic, that: Is certified to ANSI/ISEA Z87.1 (incorporated by reference, § 1910.509); or covers the wearer's eyes, nose, and mouth to protect from splashes, sprays, and spatter of body fluids, wraps around the sides of the wearer's face (i.e., temple-to-temple), and extends below the wearer's chin.

Healthcare services is defined as, services that are provided to individuals by professional healthcare practitioners (e.g., doctors, nurses, emergency medical personnel, oral health professionals) for the purpose of promoting, maintaining, monitoring, or restoring health. Healthcare services are delivered through various means including: hospitalization, long-term care, ambulatory care, home health and

hospice care, emergency medical response, and patient transport. For the purposes of this section, healthcare services include autopsies.

Healthcare support services is defined as, services that facilitate the provision of healthcare services. Healthcare support services include patient intake/ admission, patient food services, equipment and facility maintenance, housekeeping services, healthcare laundry services, medical waste handling services, and medical equipment cleaning/reprocessing services.

Aerosol-generating procedure (AGP) is defined as, a medical procedure that generates aerosols that can be infectious and are of respirable size. For the purposes of this section, only the following medical procedures are considered aerosol generating procedures:

- Open suctioning of airways
- Sputum induction
- Cardiopulmonary resuscitation
- Endotracheal intubation and extubation
- Non-invasive ventilation
- Bronchoscopy
- Manual ventilation
- Medical/surgical/ postmortem procedures using oscillating bone saws
- Certain dental procedures

Confirmed COVID-19 is defined by the CDC as, when a person has received a positive result from a COVID-19 viral test (antigen or PCR test) but they may or may not have symptoms.

Suspected COVID-19 is defined by the CDC as, a person showing symptoms of COVID-19 but either has not been tested via a viral test or is awaiting test results. If their test result is positive, suspected COVID-19 is reclassified as confirmed COVID-19.

4.0 Applicability

The OSHA Emergency Temporary Standard (ETS) applies to settings where any employee provides healthcare services or healthcare support services. The ETS does not apply during basic first aid duties given by an employee who is not a licensed healthcare provider.

The ETS also does not apply if the following conditions are met:

- It is a non-hospital ambulatory care setting.
- ALL non-employees are screened prior to entry.
- People with suspected or confirmed COVID-19 are not permitted to enter.

Exemptions to specific rules are also available within the OSHA ETS for workplaces that have all vaccinated employees and when employees are unlikely to come into contact with those suspected of having COVID-19.

Exemptions to the OSHA ETS are also in place for workplaces that screen entrants and do not allow suspect or confirmed COVID-19 cases to enter the building. This exemption does not apply to most schools, because students are unable to leave immediately upon feeling ill.

ETS applies to Health Services offices, as well as areas where Occupational Therapy (OT), Physical Therapy (PT), and Aerosol Generating Procedures (AGPs) occurs.

5.0 Hazard Assessment

The school has completed hazard assessment(s) of the workplace and tasks completed by applicable staff members. The hazard assessment(s) are located in Appendix A and will be updated whenever there are any changes at the workplace that create a new potential risk of employee exposure to COVID-19.

6.0 Screening and Patient Management

In each work area determined to be included in the program, staff will:

- Limit and monitor points of entry to the setting
- Screen all students, visitors, and other non-employees entering the setting for symptoms of COVID-19 by observation and discussion of symptoms (see [CDC Covid symptom](#)) in Appendix C.
- Maintain a poster outside the room(s) to remind people of the screening and masking requirements

OSHA's ETS also requires implementation of applicable patient management strategies in accordance with the CDC's "COVID-19 Infection Prevention and Control Recommendations". To comply, the school will:

- Require masking of people entering the setting and post visual alerts at the entrances of the requirement and masking instructions
- Providing supplies for hand hygiene
- Provide tissues and no touch disposal receptacles, such as step-on or motion powered trash cans
- Separate patients by six feet or more

7.0 Personal Protective Equipment (PPE)

Bluffview Montessori School provides and ensures that employees wear FDA approved facemasks, or a higher level of respiratory protection, when determined to be applicable, as per the hazard assessment. Facemasks must be worn by employees over the nose and mouth when indoors and when occupying a vehicle when with another person for work purposes.

A sufficient number of facemasks are provided. They are changed at least once a day, whenever they are soiled or damaged, and more frequently as necessary (e.g., patient care reasons).

Facemasks are not required to be worn:

- When the employee is alone
- When the employee is eating and drinking, as long as the employee is at least 6 feet away from any other person, or separated by a physical barrier

Employees may choose to voluntarily wear their own facemask and/or face shield in situations when they are not required, unless doing so would create a hazard of serious injury or death, such as interfering with the safe operation of equipment. Employees are also permitted to wear their own respirator instead of a facemask, and in that situation, then 29 CFR 1910.504, mini-respirator program, would apply.

Face shields can be worn to protect respirators for reuse. When used, they are cleaned at least daily and are disposed of when damaged. If respirators are reused, they should be placed in a paper bag (or something similar) labeled with the employee's name and date the usage started.

Protective clothing and equipment, including respirators, gloves, gowns, goggles, and face shields, are provided to each employee and are used in accordance with the risk assessment located in Appendix A. For employees with exposure to people with suspected or confirmed COVID-19, respirators and other PPE, including gloves, an isolation gown or protective clothing, and eye protection are provided.

If an employee feels that PPE needs are not being met, the Program Coordinator should be contacted.

8.0 Aerosol Generating Procedures (AGPs)

If an AGP is performed on a person with suspected or confirmed COVID-19, the following will occur:

- Provide a respirator, gloves, gowns or protective clothing, goggles, and face shields
- Limit the number of employees present during the procedure to only those essential for patient care and procedure support
- Ensure that the procedure is performed in an existing airborne infection isolation room (AIIR), if available
- Clean and disinfect the surfaces and equipment in the room or area where the procedure was performed, after the procedure is completed

PPE is used in accordance with the risk assessment located in Appendix A.

9.0 Physical Distancing and Barriers

Each employee is separated from other people in the workplace by at least six feet when indoors (physical distancing), unless it can be demonstrated that such physical distance is not feasible for a specific activity. Where not feasible, employees are as far apart from other people as possible. Physical barriers may be installed at each fixed work location outside of direct patient care areas where each employee is not separated from all other people by at least six feet, unless it can be demonstrated that it is not feasible to install such physical barriers.

Physical barriers are:

- Solid and made from impermeable materials, easily cleanable or disposable
- Sized and located to block face-to-face pathways between individuals based on where each person would normally stand or sit
- Secured so that they do not fall or shift, causing injury or creating a trip or fall hazard
- Not blocking workspace air flow or interfere with the heating, ventilation, and air conditioning (HVAC) system operation
- Transparent in cases where employees and others have to see each other for safety
- Not interfering with effective communication between individuals

10.0 Ventilation

The following procedures for each facility's heating, ventilation, and air conditioning (HVAC) system are followed:

- The HVAC systems are used in accordance with the manufacturer's instructions and the design specifications.
- The amount of outside air circulated through the HVAC systems and the number of air changes per hour are maximized to the extent appropriate.
- Air filters are rated Minimum Efficiency Reporting Value (MERV) 13 or higher, when compatible with the HVAC systems; if not compatible, the filter with the highest compatible filtering efficiency is used.
- All air filters are maintained and replaced as necessary, to ensure the proper performance.
- All intake ports that provide outside air to the HVAC systems are cleaned, maintained, and cleared of any debris that may affect the function and performance of the HVAC systems.

11.0 Cleaning and Disinfecting

Cleaning practices will be conducted to prevent the exposure of COVID-19.

- Staff will utilize spray bottles of soap and water to wash away any biomass before sanitizing.
- Staff will utilize “TB Disinfectant Cleaner Ready To Use”, which is an approved **disinfectant for NON-food surfaces** by EPA. Registration number 1839-83-1677.
 - The dwell time of the product is 45 seconds.
 - The SDS states that no special PPE is required for eye, hand, skin, or respiratory.
 - The SDS is available to staff in all classrooms. Andy/Carly will refill weekly.
 - The containers are pre-labeled with GHS compliant labels.
 - Staff have received training on good cleaning practices and Employee Right-to-Know. Records are located in the school office...all staff training was done by Ecolab rep during inservice week.
- Staff will utilize Smartpower Sink & Surface Cleaner Sanitizer, which is an approved **sanitizer for Food Safe Surfaces**.
 - The dwell time of the product is 45 seconds.
 - The SDS states that the PPE is required and includes standard gloves and eye protection.
 - The SDS is available to staff in all classrooms.
 - The containers are pre-labeled with GHS compliant labels.
 - Staff have received training on good cleaning practices and Employee Right-to-Know. Records are located in the school office.
 - Proper ventilation-do not spray near the children.

Sanitizers and disinfectants will be placed up and out of child reach at all times.

When technology items are needing to be cleaned, alcohol wipes will be utilized to prevent damage to the equipment.

Routine Cleaning

Internal custodial staff who complete routine cleaning will follow these cleaning steps:

1. Chemical-resistant gloves and safety glasses or goggles will be worn.
2. If the surface is visibly dirty, clean using soap and water
3. Surfaces will be disinfected using disinfectant provided and paper towels and or disposable scrub pads. The product will remain wet on the surface for the designated amount of time.
4. Garbage bags will be used for your waste and placed in dumpster.
5. Gloves will be removed then hands washed thoroughly with warm water and soap for at least 20 seconds.

Cleaning with Suspected or Confirmed Case of COVID-19

When a person who is COVID-19 positive has been in the workplace within the last 24 hours, healthcare service areas are cleaned and disinfected daily after school hours. The individual cleaning wears gloves and a face covering. This includes [cleaning after an AGP occurs](#) on a suspected or confirmed patient with COVID-19. The cleaning may be done by the individual performing the AGP, and they may choose to wear the same PPE worn for the AGP.

12.0 Exposure Protocols and Back to Work Criteria

Employees are able to receive COVID-19 testing through Winona Health or the walk-in testing site at the Winona Mall.

12.1 Employee Notification

Employees will be notified if they have been exposed to a person with COVID-19 at their workplace. The notification provisions below are not triggered by the presence of a patient with confirmed COVID-19 in a workplace where services are normally provided to suspected or confirmed COVID-19 patients. When the school is notified that a person who has been in the workplace (including employees, clients, patients, residents, vendors, contractors, customers, delivery people and other visitors, or other non-employees) is COVID-19 positive, the following notifications will occur for the parties covered by this plan:

- Each employee will be notified who was not wearing a respirator and any other required PPE and had been in close contact with the person with COVID-19 in the workplace.
- The notification will state that the employee was in close contact with someone with COVID-19, along with the date(s) the contact occurred.
- The notification will also specify the date(s) the person with COVID-19 was in the workplace during the potential transmission period.

Notifications will not include the name, contact information, or occupation of the COVID-19 positive person.

Note: Close contact means being within 6 feet of the person for a cumulative total of 15 minutes or more over a 24-hour period during the person's potential transmission period. The potential transmission period runs from 2 days before the person felt sick (or, if not showing symptoms, 2 days before testing) until the time the person is isolated.

See Appendix B for a template Email Notification to inform employees of a potential exposure.

12.2 Medical Removal from the Workplace

The following policy is followed for removing employees from the workplace in certain circumstances. An employee will be immediately removed from the school when:

- An employee is COVID-19 positive.
- An employee has been told by a licensed healthcare provider that they are suspect to have COVID-19.
- The employee is experiencing a recent loss of taste and/or smell with no other explanation.
- The employee is experiencing both a fever of at least 100.4 degrees and a new unexplained cough associated with shortness of breath.

Employees are required to be away from the school for 14 days, or after 7 days when the employee can provide a negative COVID-19 test after at least 5 days from the exposure, at the cost of the school. Employees that test positive must follow the Return to Work criteria below. Employees are also able to refuse a test. If an employee refuses a test they must stay away from the School for 14 days. When an employee refuses a test, they are not provided the medical removal protection benefits as listed below.

12.3 Medical Removal Protection Benefits

Employees will have continued to be paid who have been removed from the school under the medical removal provisions of the ETS. When an employee has been removed and is not working remotely, the school continues to provide the employee with benefits and the same regular pay the employee regularly receives (up to \$1,400/per week).

The employer pays the regular pay as listed above but beginning in the third week of the employee's removal, the pay is reduced to two-thirds the amount paid, with a maximum of \$1,000/per week).

12.4 Return to Work Criteria

Persons with COVID-19 who **have symptoms** will not return to work until all the following have occurred:

- At least 24 hours have passed since a fever of 100.4 °F. or higher has resolved, without the use of fever-reducing medications.
- COVID-19 symptoms have improved.
- At least ten days have passed since COVID-19 symptoms first appeared.

Persons with COVID-19 who have **tested positive, but never developed symptoms**, will not return to work until a minimum of ten days have passed since the date of specimen collection of their first positive COVID-19 test.

A negative COVID-19 test will not be required for an employee to return to work once the requirements for "cases with symptoms" or "cases who tested positive, but never developed symptoms" (above) have been met.

People who had close contact, but never developed symptoms may return to work when ten days have passed since the last known close contact.

People who had close contact and are showing symptoms may return to work when:

- The person tested negative for COVID-19 using a polymerase chain reaction (PCR) COVID-19 test with specimen taken after the onset of symptoms.
- At least 10 days have passed since the last known close contact.
- The person has been symptom-free for at least 24 hours, without using fever-reducing medications.

13.0 Training

Each affected employee receives training, in a language and at a literacy level the employee understands, on the following topics:

- How COVID-19 is transmitted (including pre-symptomatic and asymptomatic transmission)
- The importance of hand hygiene to reduce the risk of spreading COVID-19 infections
- Ways to reduce the risk of spreading COVID-19 through proper covering of the nose and mouth
- The signs and symptoms of COVID-19
- Risk factors for severe illness
- When to seek medical attention
- Policies and procedures on patient screening and management
- Tasks and situations in the workplace that could result in COVID-19 infection
- Workplace-specific policies and procedures to prevent the spread of COVID-19
- Employer-specific multi-employer workplace agreements related to infection control procedures, the use of common areas, and the use of shared equipment that affect employees at the workplace
- PPE policies and procedures, including when required, limitations, and how to properly don, doff, and store
- Procedures for cleaning and disinfection
- Procedures on health screening and medical management
- Available sick leave policies, any COVID-19-related benefits to which the employee may be entitled under applicable federal, state, or local laws, and other supportive policies and practices
- The identity of the Safety Coordinator(s) specified in this COVID-19 plan

- OSHA's COVID-19 ETS
- How the employee can obtain copies of OSHA's COVID-19 ETS and this written COVID-19 plan

During the training, employees will be informed that they have a right to protections per the ETS and that the school is prohibited from discharging or discriminating against any employee for exercising their rights under ETS.

Training is overseen or conducted by a person knowledgeable in the covered subject matter as it relates to the employee's job duties, and that the training provides an opportunity for interactive questions and answers with a person knowledgeable in the covered subject matter as it relates to the employee's job duties.

Additional training will be provided whenever changes occur that affect the employee's risk of contracting COVID-19 at work, policies or procedures are changed, or there is an indication that the employee has not retained the necessary understanding or skill.

14.0 Recordkeeping and Reporting

14.1 Recordkeeping

The school will retain all versions of this COVID-19 plan implemented to comply with OSHA's COVID-19 ETS while the ETS remains in effect.

A COVID-19 log is located in Appendix D to record each instance in which an employee is COVID-19 positive, regardless of whether the instance is connected to exposure to COVID-19 at work. The COVID-19 log will contain, for each instance, the employee's name, one form of contact information, occupation, location where the employee worked, the date of the employee's last day at the workplace, the date of the positive test for, or diagnosis of COVID-19, and the date the employee first had one or more COVID-19 symptoms, if any were experienced.

A positive COVID-19 case will be recorded on the COVID-19 log within 24 hours of learning that the employee is COVID-19 positive. The COVID-19 log is maintained as a confidential medical record and will not be disclosed except as required by OSHA's COVID-19 ETS or other federal law. The COVID-19 log will be maintained while OSHA's COVID-19 ETS remains in effect.

When requests are submitted to the Program Coordinator, the school will provide any of the following items requested by the end of the next business day after a request:

- All versions of the written COVID-19 plan to any employees, their personal representatives, and their authorized representatives
- The individual COVID-19 log entry for a particular employee to that employee and to anyone having written authorized consent of that employee
- A version of the COVID-19 log that removes the names of employees, contact information, and occupation, and only includes, for each employee in the COVID-19 log, the location where the employee worked, the last day that the employee was at the workplace before removal, the date of that employee's positive test for, or diagnosis of, COVID-19, and the date the employee first had one or more COVID-19 symptoms, if any were experienced, to all of the following: any employees, their potential representatives, and their authorized representatives.

14.2 Reporting

The following will be reported to OSHA:

- Each work-related COVID-19 fatality within 8 hours of learning about the fatality

- Each work-related COVID-19 in-patient hospitalization within 24 hours of learning about the in-patient hospitalization

Appendix A

Hazard Assessment

Employee Job Hazard Assessment

School:		Bluffview Montessori School			
Person(s) Conducting the Assessment:		Dan Fitch, IEA and Henry Schantzen			
Date:		10/26/2021			
Description of Job Task	Prevention Controls (PPE, Engineering, etc.)	Work Area(s)	Potential for COVID-19 Exposures (Yes/No)	Employees Affected	Notes
Dispensing medications (student is not displaying symptoms)	PPE • Facemask Engineering Controls • Fan on at the highest setting	Health office	No	<ul style="list-style-type: none"> • Head of School • Assistant Head of School • Office Manager • Admin Assistant 	
Dispensing medications to students with suspected or confirmed COVID-19	PPE • Gloves • Isolation Gown/Protective Clothing • N95 Respirator • Eye Protection • Face Shield Engineering Controls Fan on at the highest setting	Health office	Yes	<ul style="list-style-type: none"> • Head of School • Assistant Head of School • Office Manager • Admin Assistant 	
Providing basic first aid/health services to students (student is not displaying symptoms)	PPE • Facemask Engineering Controls Fan on at the highest setting	Health office	No	<ul style="list-style-type: none"> • Head of School • Assistant Head of School • Office Manager • Admin Assistant 	
Providing basic first aid/health services to students with suspected or confirmed COVID-19	PPE • Gloves • Isolation Gown/Protective Clothing • N95 Respirator • Eye Protection • Face Shield Engineering Controls Fan on at the highest setting	Health office	Yes	<ul style="list-style-type: none"> • Head of School • Assistant Head of School • Office Manager • Admin Assistant 	

Appendix B

Email Notification Template

Sample Email Notification to Employees

Dear [Employee Name],

We have been notified that an individual who was present in our workplace on [MM/DD/YYYY] has been diagnosed with COVID-19. We are separately notifying people who potentially had close contact with the individual, but we want to alert everyone working in the same well-defined workplace area to the possibility of exposure.

If you experience symptoms of COVID-19, such as fever, chills, cough, difficulty breathing, new loss of taste or smell, or other symptoms, please contact [COVID-19 Safety Coordinator Name and Contact Information] and consider consulting with your healthcare provider about COVID-19 testing.

As always, [Company Name] will protect all employee medical information.

Sincerely,

[Signatory]

Appendix C

Visual Chart

<https://www.cdc.gov/coronavirus/2019-ncov/symptoms-testing/symptoms.html>

Symptoms of Coronavirus (COVID-19)

Know the symptoms of COVID-19, which can include the following:



Symptoms can range from mild to severe illness, and appear 2–14 days after you are exposed to the virus that causes COVID-19.

Seek medical care immediately if someone has Emergency Warning Signs of COVID-19

- | | |
|--|--|
| • Trouble breathing | • Inability to wake or stay awake |
| • Persistent pain or pressure in the chest | • Pale, gray, or blue-colored skin, lips, or nail beds, depending on skin tone |
| • New confusion | |

This list is not all possible symptoms. Please call your healthcare provider for any other symptoms that are severe or concerning to you.

Appendix D

COVID-19 Recordkeeping Log

ST##P<School> COVID-19 Log

The OSHA COVID-19 Healthcare Emergency Temporary Standard (ETS) requires employers to keep a COVID-19 Log if they have more than 10 employees on June 21, 2021 (the effective date of the ETS) (See 29 CFR 1910.502(q)). Employers are required to record on the COVID-19 Log each instance of an employee being confirmed COVID-19 positive (i.e., case that tested positive or was diagnosed by a licensed healthcare provider), whether it was contracted at work or elsewhere.

ST##P School

ST##P Address

COVID-19 Safety Coordinator: ST##P <Name and contact info>

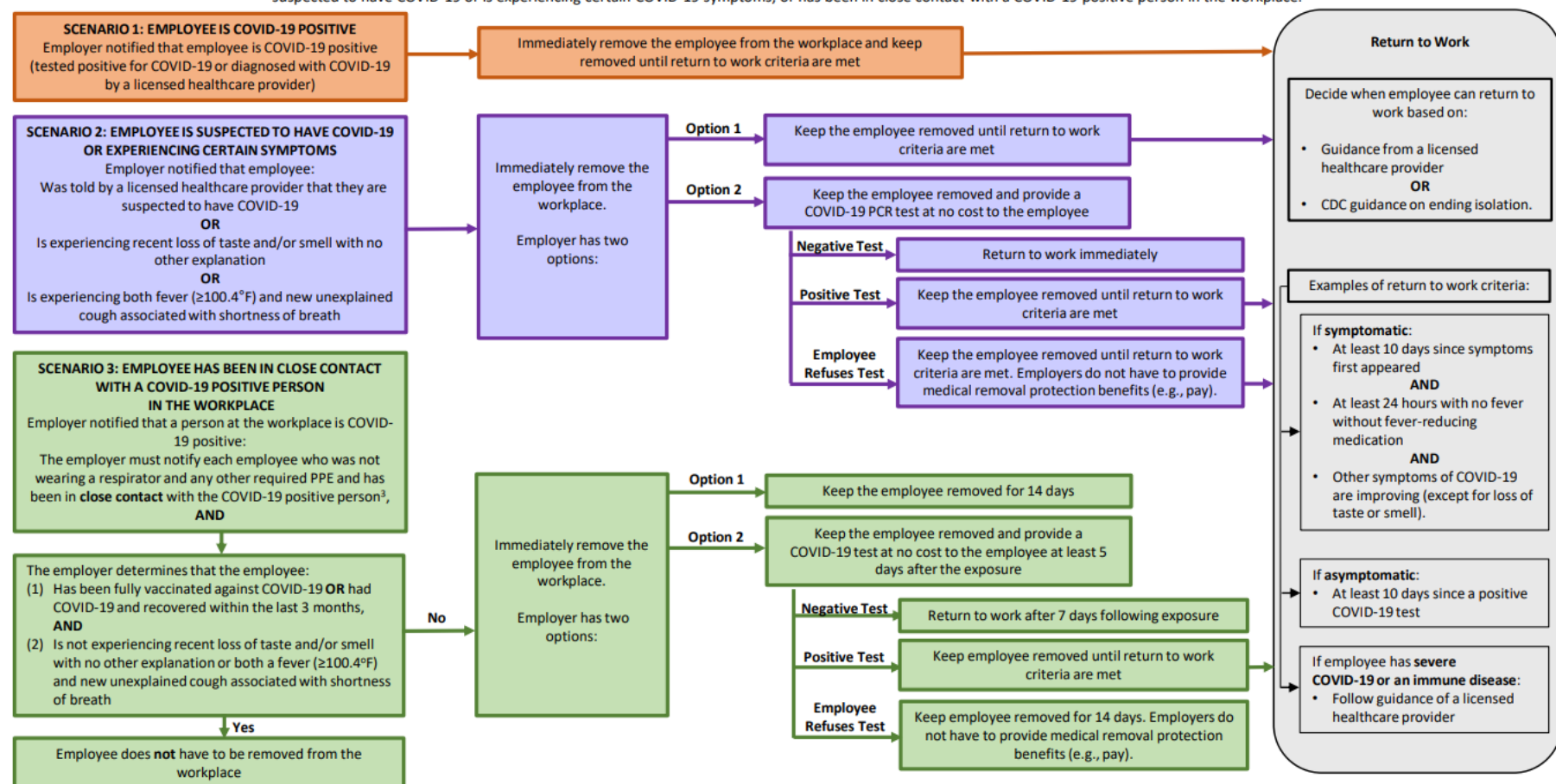
[illegible]

Appendix E

*OSHA ETS Compliance Guidance for Employers
(Flow Chart)*

ETS Compliance Guidance for Employers – Paid¹ Medical Removal of Employees and Return to Work

This flow chart explains the steps that employers must take when notified that an employee is COVID-19 positive, told by a licensed healthcare provider that they are suspected to have COVID-19 or is experiencing certain COVID-19 symptoms, or has been in close contact with a COVID-19 positive person in the workplace.²



¹ OSHA is requiring medical removal protection benefits to be paid only by employers that have more than 10 employees.

² Employers may choose to remove or test employees for other COVID-19-related reasons not required by the ETS (e.g., additional symptoms from the CDC list or exposure to someone who is COVID-19 positive outside the workplace).

³ This notification provision is not triggered by the presence of a patient with confirmed COVID-19 in a workplace where services are normally provided to suspected or confirmed COVID-19 patients (e.g., emergency rooms, urgent care facilities).