Governor Northam’s Forward Virginia plan is focused on ensuring a safe start to recovery. As a local government, we enter Phase 1 while balancing our ongoing response to the COVID-19 public health emergency. We are closely monitoring local positive cases, testing capacity, and resource availability.

Albemarle County’s Response goals remain:

- to reduce transmission among staff and the public
- protect people who are at higher-risk for adverse health complications
- maintain essential services for the public

Our goals for Reconstitution are to:

- protect the health and safety of staff and residents
- support all people and communities
- facilitate a safe transition to “normal” County operations and community economic recovery

Phase 1 of Reconstitution will look a lot like the response phase. The organization quickly shifted to a teleworking model that had limited impacts on service delivery over the past several weeks, and will continue to do so in Phase 1, with limited staff onsite and a closed door to most external customers.

To keep each and every one of us safe, please review and follow the guidance contained in this playbook. If you have questions about this guidance, please email COVID19@albemarle.org.
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**Frequently Asked Questions**

**PHASE 1**

What County programs or services are operating?

- For the most part, all programs and services are operating, but are being delivered virtually and/or telephonically.
- The building remains closed to visitors, with limited exceptions.
- To see a department summary of programs and services, read the Programs & Services Summary.

How do I know where I should report to work?

- Most staff will continue to work from home. Some staff may work both from home and in the building, depending on task assignments. A few staff and our public safety personnel have been and will continue to work in a County building, fire station, or other field assignment.
- Each employee should discuss with their supervisor before making a change in work location. If you have been working from home and have not been directed to return to the building, continue to work from home.
- High-Risk Employees, as defined by current CDC guidelines, should not return to work in the buildings until Phase 3. Please contact your supervisor.

If I’m coming into the office, what should I expect entering the building?

- Review the Phase 1 Non-Public Safety Risk Mitigation Plan and the Reconstitution Phase Staff/Visitor Protection Plan. Key points from these documents are found in this summary, but both documents should be reviewed in their entirety prior to reporting to a County facility for work.
- Complete the Employee Screening Procedure self-evaluation each time you enter the building. If you’re sick – don’t come in.
- Everyone – staff, contractors, and customers – is required to wear a cloth face covering as soon as they enter the building. Face coverings must be worn in common spaces at all times (public safety personnel - follow departmental guidance). This includes hallways, break rooms, printing rooms, etc. Trust us – you get used to them! Please do not wear N95s – these should be reserved for healthcare professionals on the front lines.
- Hand sanitizing stations or bottles are available at all entrances. Everyone entering the building must sanitize their hands. Please wash your hands regularly throughout the workday.

How will physical distancing be observed in the building?

- Continue to utilize Teams to conduct meetings virtually whenever practical.
- All conference rooms have been evaluated by FES to ensure occupants can maintain 6’ of distance and a “physical distancing occupancy limit” has been posted outside each conference space. Please observe this limit at all times. This applies to public conference rooms and department conference rooms.
- Consider eating in your office, outside, or maintain physical distance in break rooms.
- Adjust shared workspaces so that 6’ can be maintained at all times.

What enhanced cleaning protocols are in-place?

- Review the Reconstitution Phase Staff/Visitor Protection Plan for full details.
- Nightly cleaning of all high-touch surfaces will continue in common spaces.
• You are responsible for cleaning your personal workspace each day – each department will be provided cleaning supplies through Facilities & Environmental Services. Consider wiping down your keyboard, mouse, desktop, door knob, and other high-touch surfaces before you begin work each day.
• Pool vehicles have sanitizing wipes inside them and a box of gloves will be located on top of the “keyper”. Please get a pair of gloves when you checkout the vehicle and wipe down high-touch areas of the vehicle before and after use.

What do I do if I have to interact with other employees, customers, or contractors?

• Follow the Customer Interaction Guidelines. This includes evaluating whether in-person contact is necessary, conducting a screening with the person before you begin interacting if in-person is necessary, maintaining physical distancing during the interaction, and sanitizing afterward.

What other measures are in place to limit risk of exposure?

• Though the CDC indicates it is less likely to contract through material exposure, we are taking the following precautions:
  o All mail and packages (USPS, UPS, FedEx, etc.) are being accepted through the Mail Room and held for 36 hours before delivery to the final recipient
  o Tissues, wipes, and hand sanitizer are being provided to each department for use by employees
  o Gloves are available for those handling customer paperwork that cannot be held for 36 hours
  o Recycling services are suspended for the time-being, to limit visitors in the building. Please dispose of all materials in the trash. We look forward to resuming recycling services once we can safely do so.

I work in a shared workspace – what changes should I make to support physical distancing?

• Limit sharing of high-touch work areas, including desks and computers – and clean between each user
• Configure shared spaces to provide 6’ between workstations/tables
• Clean high-touch surfaces frequently

Can I hold in-person meetings, trainings, or other events in County facilities in Phase 1?

• For the most part, no.
• In-person meetings with internal staff may proceed under Phase 1, if necessary, following physical distancing within offices and/or conference rooms.
• The buildings remain closed to the public, with limited exceptions. You should not schedule in-person meetings, trainings, or other events with non-staff in attendance.
• If you need to host a larger meeting or event, please contact IT and/or CAPE to discuss what virtual options we have available.
• Please contact the IMT if you have a need that cannot be met in a virtual meeting environment, by emailing COVID19@albemarle.org.

Can I attend in-person meetings, trainings, or other events in Phase 1?

• All work-related trainings, events, and conferences have been suspended through at least June 30.
• Local in-person meetings are permissible, but virtual meeting options should be thoroughly considered before scheduling. Follow the customer interaction guidelines if attending an in-person meeting.

• Please contact the IMT if you have a need that cannot be met in a virtual meeting environment, by emailing COVID19@albemarle.org.

What do I do if I have been exposed to COVID-19 or receive a positive diagnosis?

• Call the Designated Infection Control Officer (DICO), available 24/7 at 434-987-8890 and follow the Exposure and Return to Work Policy guidance. The DICO will maintain all documents related to the exposure as medical records in accordance with ADA, EEOC, DOL, and other applicable standards.

• Return to Work procedures follow CDC and Health Department guidelines

What leave provisions apply during Phase 1?

• For Phase 1, there is no change to the Temporary Emergency leave Provisions that were established April 1, 2020.
  o Phase 1 will allow for the continued application of the organization’s stance to protect employees who submitted a Pandemic Risk Form, so long as the reason for submission remains consistent with current CDC guidelines (i.e. the age threshold being 65-years old, being diabetic, having a chronic lung condition, etc. - please note the CDC has revised the higher-risk age threshold to 65 years old).
  o Families First Coronavirus Response Act (FFCRA) Leave will continue to be an option for employees unable to work/telework. The two leave types are Emergency Paid Sick Leave and Emergency Extended Family and Medical Leave. See Temporary Pandemic Leave Provisions – Phase 1 for more details.

PHASE 2

What will Phase 2 look like, and when will it begin?

• The transition between phases will be established by Governor Northam. It is expected that Phase 1 could last 2-4 weeks, but it could be longer based on key metrics – confirmed cases, testing availability, PPE and hospital resource availability, and contact tracing capacity.

• Planning for Phases 2 and 3 is ongoing, in accordance with CDC, OSHA, and other guidance. More information will be provided as it is finalized.
Albemarle County Phase 1 Department Program & Service Summary

Board of Supervisors
The Board of Supervisors Office Administration continues to provides support to the Board of Supervisors through a combination of telework and on-site staffing.

County Executive’s Office
The County Executive’s Office (including OMB) is operating all programs and services through a combination of telework and on-site staffing. Communications efforts will continue at much higher-than-normal levels, and public and employee engagement opportunities remain virtual in Phase 1.

Community Development
Community Development will continue to provide most programs and services through a combination of telework and on-site staffing. Lobby hours remain limited to M, W, and F from 8:30 AM until 4 PM. Many application types can be submitted online. Inspections continue in the field using documented safety protocol. Public meetings are being held for many, but not all, public bodies supported by Community Development.

County Attorney
The County Attorney’s Office is operating all programs and services through a combination of telework and on-site staffing. Litigation is suspended by order of the Virginia Supreme Court, with exceptions. The office is hand-signing documents, which has been delegated to the attorney in the office.

Facilities and Environmental Services
FES continue to provide programs and service through a combination of telework and on-site staffing. Internal recycling has been paused during the building closure. Adjustments continue due to the pandemic, including increased disinfection of high-touch surfaces and continued delay of mail due to 36-hour quarantine procedure.

Finance
Finance is operating all programs and services through a combination of telework and on-site staffing. Payroll is primarily virtual, however does in-office work during payroll processing. Most divisions have one person in each week to open, scan, and route incoming mail. Customer service windows will be closed, but payments will be accepted through the automated payment kiosk and the parking lot drop boxes, and online. Online payments made via e-check will have fees waived.

Fire/Rescue
Fire Rescue has been heavily involved in the response to COVID-19, with staff working to support the regional Emergency Operations Center and the organization’s Incident Management Team, which is ongoing. ACFR continues to respond to calls for service with enhanced personal protective equipment protocols in place. In Phase 1, some field inspections will come back on and trainings/education will shift to virtual platforms. Business and permit inspections by Prevention program still paused.
Human Resources
Human Resources is providing its programs and services through a combination of telework and on-site staffing. In Phase 1, the department will institute office hours for specific services by appointment (e.g., retirement counseling, leave consults, etc.).

Information Technology
Information Technology (IT) is operating all of its programs and services through a combination of telework and limited on-site staffing to support physical hardware and systems. Most functions are being delivered virtually and will continue into Phase 1.

Economic Development
Economic Development is operating all of its programs and services, though using different service delivery methods. Staff are primarily teleworking, with limited visits to the office. Phase 1 will bring back limited in-person site visits, but continue to rely primarily on virtual meetings, email and telephone correspondence. Digital community engagement will begin in Phase 1 on key projects.

Parks & Recreation
Parks & Recreation continues to operate and maintain County properties, but some programming will continue to be impacted by COVID-19 in Phase 1. Administrative staff will continue to primarily telework. Field staff has continued to report to the field and will continue to do so. The Parks Ambassador Program, which was created to support responsible use of parks during the pandemic, will continue in Phase 1 as supplemental field staffing. Summer programming, including classes, athletics programs, and summer camp, and summer swim, are canceled. Reservations for field use and pavilions are canceled/not available. Parks facilities and amenities, including tennis courts, basketball courts, picnic tables, grills, pavilions, and restrooms, remain closed. Dog parks are limited to 10 people. Open spaces, trails, and boat launches remain open.

Police
Police continue to operate all programs and services. Administrative and operational support staff will continue to primarily telework but report to the office as needed. Criminal investigations rely on telework and have shifted to conducting all interviews in the field, whenever possible. Patrol staff will continue to respond to Priority 1 and 2 calls and utilize online and teleservice reporting for crimes that have occurred in the past. Officers in the field will continue to wear face coverings.

Social Services
Social Services continue to operate all programs and services but have shifted to primarily virtual service delivery. Benefits applications are only being accepted through the online application. Mandated site/home visits continue to occur with staff wearing face coverings. Most interviews and client contacts are occurring virtually or telephonically. As School properties continue to be closed, Bright Stars remains closed.

Voter Registration
Voter Registration continue to operate all programs and services. Trainings have moved to a virtual meeting platform. Voters are encouraged to vote by mail for the upcoming Scottsville Town Council election in May and the primary election in June. In-person voting continues with access management of the 5th Street Office Building.
COVID-19 Non-Public Safety Risk Mitigation Plan
Phase 1

**Purpose:** This guidance is intended to help Albemarle County employees and supervisors in non-public safety positions to maintain a healthy and safe work environment while working throughout the COVID-19 pandemic. This guidance is based on recommendations from the Centers for Disease Control and Prevention (CDC) and the Occupational Safety and Health Administration (OSHA).

**Risk Analysis:**
Since the County Office Buildings were never fully closed, phase 1 of reconstitution is very similar to operations throughout the Governor’s stay at home order. In phase 1, a minimal number of employees will return to the building, but the building will remain largely closed to the public with limited exceptions.

**Occupational Risk**
OSHA has defined the following risk exposure categories for workers based on COVID-19, based on the type of work, the ability to maintain social distance and the likelihood of contact with known or suspected COVID-19 patients. The CDC states, “COVID-19 is thought to spread mainly through close contact from person-to-person. Some people without symptoms may be able to spread the virus.” Read more information [here](#). This guide attempts to limit the foreseeable risk to non-public safety employees to the lower and medium exposure risk categories.

- **Very High Exposure Risk:** Jobs are those with high potential for exposure to known or suspected sources of COVID-19 during specific medical, postmortem, or laboratory procedures.

- **High Exposure Risk:** Jobs are those with high potential for exposure to known or suspected sources of COVID-19.

- **Medium Exposure Risk:** Jobs that require frequent and/or close contact with (i.e., within 6 feet of) people who may be infected with SARS-CoV-2, but who are not known or suspected COVID-19 patients. In areas without ongoing community transmission, workers in this risk group may have frequent contact with travelers who may return from international locations with widespread COVID-19 transmission.

- **Lower Exposure Risk:** Jobs that do not require contact with people known to be, or suspected of being, infected with SARS-CoV-2 nor frequent close contact with (i.e., within 6 feet of) the general public. In areas where there is ongoing community transmission, workers in this category may have contact with the general public.

**Employees with Higher Health Risk:**
Certain employees are at a higher risk for severe illness if they contract COVID-19 and may be eligible for emergency paid sick leave with a supporting health care provider note regardless of their occupational exposure risk. More information on County COVID-19 leave codes and eligibility can be found [here](#).

Based on the most recent CDC guidance those persons with higher risk include:

- People 65 years and older *(Previously, high risk was defined as greater than 60 years of age)*
- People with chronic lung disease or moderate to severe asthma
- People who have serious heart conditions
- People who are immunocompromised
- People with severe obesity (body mass index [BMI] of 40 or higher)
People with diabetes
People with chronic kidney disease undergoing dialysis
People with liver disease

Risk Mitigation:

The following strategies shall be instituted to mitigate the foreseeable risks associated with Phase 1 of the COVID-19 reconstitution.

Facility Access
During phase 1 the building will remain closed to the general public with limited in-person services by appointment only. Personal visitors should be avoided whenever possible; if necessary, they should be met outside.

Identification of Symptomatic Persons
It is a critical step in reducing the potential risk to identify employees, customers and other visitors who are symptomatic so they may be removed from the workplace, limiting exposure to the remaining occupants.

Employees
All employees/contractors should self-monitor for signs and symptoms using the adopted Employee and Contractor Screening Procedures, which includes a regular affirmation of health status. Employees/contractors who are working at/in County buildings, vehicles, and facilities shall complete a self-assessment anytime they are entering County properties. The self-assessment is to affirm that the employee is free of COVID-19 signs and symptoms that are not attributable to another condition (such as seasonal allergies) and/or cleared by a health professional to be in the workplace.

Symptoms include:
- Cough
- Shortness of breath or difficulty breathing
- Fever
- Chills
- Muscle pain
- Sore throat
- New loss of taste or smell
- Nausea, vomiting, or diarrhea

The self-assessment shall be done as a mindful process and will not be documented by any other means. If the employee/contractor is unable to affirm a clear health status, they shall not enter County properties.
If an employee develops symptoms consist with COVID-19 or believe they have been exposed to someone suspected or known to have COVID-19 they should notify the County’s infection control team using the form or contact them at 434-987-8890 for urgent assistance. Additional information can be found in the Exposure and Return to Work Policy.

Customers and Visitors
Customers and visitors shall continue to be screened prior to providing in person services, whether on or off site using the Customer Interaction Guideline.
**Social Distancing**
Strict social distancing (maintaining 6’ from one another) should be adhered to whenever possible.

During phase 1 the following strategies shall be implemented to maintain social distancing:

- Telework for most non-public safety employees continues in phase 1; department head approval is required before returning to onsite work
- Virtual meetings should be considered prior to scheduling in-person meetings
- Shared desks and work areas should be avoided whenever possible. If unavoidable, the area shall be disinfected between users.
- Breaks should be staggered to limit the number of people in break areas and restrooms
- Stagger work schedules to reduce the number of employees in an office at any given time
- Open every other service counter and/or workstation where applicable

**Facility Use/Modification**
To reinforce social distancing during reconstitution, the following modifications will be made to the use of County facilities in phase 1:

- Common conference rooms will be limited to use by the IMT or other groups at IMT approval
- FES will evaluate all conference rooms and break rooms to determine a Phase 1 Maximum Occupancy. The capacity will be posted and must be followed at all times.
- Mail and packages will be held by FES for 36 hours prior to delivering to individual departments. If materials are time sensitive and can’t wait 36 hours, gloves should be utilized to open/handle the items.

**Face Coverings**
The CDC recommends the use of a cloth face covering while in public settings. Face coverings help slow the spread of the virus by people who may have the virus, but not know it (asymptomatic and pre-symptomatic individuals). Face coverings are also beneficial in areas where other social distancing measures are difficult to maintain.

Cloth face coverings should not be placed on young children under age 2, anyone who has trouble breathing, or is unconscious, incapacitated or otherwise unable to remove the mask without assistance.

During phase 1 the following guidelines will apply to the use of face coverings:

- Customers and visitors are required to wear a face covering to enter the facility and continue wearing it as long as they remain in the building.
- Employees and contractors are required to wear a face covering during the following circumstances:
  - During in-person customer service interactions
  - In a public setting outside of a County facility, while being compensated by Albemarle County or in an uncompensated status but identifiable as a County employee by their vehicle, clothing, ID badge, etc.
  - In common areas of County facilities including:
    - Hallways, lobbies, corridors
    - Shared offices or other spaces where strict social distancing is unable or difficult to maintain
- Conference rooms
- Break rooms and kitchens where strict social distancing is unable or difficult to maintain
- Copy and storage rooms
- Restrooms
- County vehicles with more than 1 occupant

If you do not have a face covering consistent with CDC recommendations, notify your department head. Additional information about the use, fit and cleaning of face coverings can be found here.

**Personal Hygiene**

**Handwashing**
Upon entering a County facility all personnel shall clean their hands using the available sanitizing stations. Routine handwashing is recommended throughout the day, anytime they are visibly soiled, and after removing PPE. If soap and water is not immediately available, then hand sanitizer should be used. Additional information on proper handwashing can be found here.

**Respiratory etiquette**
Employees should cover coughs and sneezes using tissues or by using the inside of their elbow. Tissues should be immediately disposed of in the trash. Employees should wash hands with soap and water, or if that is not available hand sanitizer should be used. Additional information on respiratory hygiene can be found here.

**Cleaning and Disinfecting**
FES has increased the cleaning schedule to include nightly disinfecting of high-touch surfaces in common areas, such as doorknobs, safety rails, sinks and elevator buttons. FES will also provide disinfectant wipes to all departments so personnel can clean their work areas throughout the day. Special emphasis should be placed on high-touch surfaces such as keyboards, phones, arm rests, etc.

Pool vehicles have sanitizing wipes inside them, and a box of gloves will be located on top of the “keyper” box. Please get a pair of gloves when checking out a vehicle and wipe down high-touch areas of the vehicle before and after use.

**Personal Protective Equipment (PPE)**
It’s not anticipated that PPE, such as N95 masks, gowns or eye protection, will be required for non-public safety employees. However, gloves will be made available to departments that have a need to handle mail or paperwork that is not able to be handled for 36 hours. Instruction on the proper donning and doffing of gloves can be found here.

**Individual Work Area Evaluation**

The risk mitigation strategies above should adequately address the risk for most employees; however, some work areas or specific processes may require additional measures to further minimize the risk. Each department head will evaluate those areas as necessary and should contact FES if they feel additional measures need to be taken to address a unique risk.
# COVID-19 Reconstitution Phase Staff/Visitor Protection Plan

## Assumptions

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<tr>
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<th>Building Closure State</th>
<th>Phase I</th>
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<tbody>
<tr>
<td><strong>Staff Level</strong></td>
<td>Essential On-Site Only</td>
<td>Up to 30% No High-Risk Persons</td>
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<td><strong>Public Service Level</strong></td>
<td>Limited Services, By Appointment</td>
<td>Limited Services, By Appointment</td>
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<td>Strict Social Distancing</td>
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<td>Usage: IMT Only</td>
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<td><strong>Visitor Protection</strong></td>
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## PPE / Measures

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<td><strong>Shared Conference Rooms</strong></td>
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<td>Initial CDC Guidance</td>
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Employee/Contractor COVID-19 Screening Procedure
(Revised for Phase 1 – May 2020)

Purpose: To prevent the spread of COVID-19 by identifying employees and/or contractors that are experiencing symptoms consistent with COVID-19 prior to entering a county facility and restricting their access.

Procedure:

1. Entry Points:
   a. Signage shall be placed at all employee entry points to remind employees of the screening and to reinforce the need to go home if they feel sick
   b. Hand sanitizer shall be provided at all entry points
   c. Employees should avoid using the customer entrance when possible

2. Screening Process: The following screening process should be used each time the employee reports to work, excluding telework, and every 12 hours of continuous work thereafter.
   a. All employees shall wash or sanitize their hands immediately upon entering the facility
   b. Employees/contractors who are working at/in County buildings, vehicles, and facilities shall complete a self-assessment anytime they are entering County properties. The self-assessment is to affirm that the employee is free of COVID-19 signs and symptoms that are not attributable to another condition (such as seasonal allergies) and/or cleared by a health professional to be in the workplace.

   Symptoms include:
   - Cough
   - Shortness of breath or difficulty breathing
   - Fever
   - Chills
   - Muscle pain
   - Sore throat
   - New loss of taste or smell
   - Nausea, vomiting, or diarrhea

   c. The self-assessment shall be done as a mindful process and will not be documented by any other means. If the employee/contractor is unable to affirm a clear health status, they shall not enter County properties.
   d. If an employee develops symptoms consistent with COVID-19 or believe they have been exposed to someone suspected or known to have COVID-19 they should notify the County’s infection control team using the form or contact them at 434-987-8890 for urgent assistance. Additional information can be found in the Exposure and Return to Work Policy.
Customer Interaction Guidance
(For non-public safety employees)

**Purpose:** This guidance is intended to help Albemarle County employees and supervisors in non-public safety operational jobs maintain health and safety during customer interactions throughout the COVID-19 pandemic but may be adapted to control other infections as needed. This guidance is based on recommendations from the Centers for Disease Control and Prevention (CDC) and the Occupational Safety and Health Administration (OSHA).

**Background:** OSHA has provided risk exposure categories for workers based on COVID-19 - this guidance is intended for use by employees in the two lower risk categories:

Medium Exposure Risk: jobs that require frequent and/or close contact with (i.e., within 6 feet of) people who may be infected with SARS-CoV-2, but who are not known or suspected COVID-19 patients. In areas without ongoing community transmission, workers in this risk group may have frequent contact with travelers who may return from international locations with widespread COVID-19 transmission.

Lower Exposure Risk: jobs that do not require contact with people known to be, or suspected of being, infected with SARS-CoV-2 nor frequent close contact with (i.e., within 6 feet of) the general public. In areas where there is ongoing community transmission, workers in this category may have contact be with the general public.

**Application:** This guidance should be used by employees during all in-person customer interactions until further notice, unless the employee is using a more rigorous screening and protection process - such as public safety operational staff.

**Process:** Employees and customers should follow the following guidance when conducting in-person interactions.

1: **Public education** – Albemarle County will provide the public accurate and timely information about the spread of infection, what they should do when they are sick, and County policies we are implementing. This should be done using media outlets, social media, signage, and other available resources. Signage should be placed at the entryways instructing people not to enter if they are sick and/or considered a patient under investigation (PUI) by CDC standards. This should include signs of sickness such as cough, fever, shortness of breath – click here for more information, and this sign is ideal for employees but would need to be adapted for general public.

**For 2 and 3:** Ideally use a phone to conduct screening with customer prior to in-person contact. Otherwise ask the appropriate questions from a distance of 6 feet or further away and BEFORE the customer has approached the service area/customer interaction area.

2: **Attempt to use non-in-person interactions whenever possible** – Is there a virtual way to address the customer’s needs (online, telephone, virtual meeting, etc.)? Employees should always use the non-in-person option when possible.

3: **If non-in-person options do not exist, conduct Screening / Risk Assessment** - The employee should ask the customer the following questions:

- Have you been diagnosed with COVID-19 or tested and are awaiting test results?
- Has the Health Department advised you to isolate or quarantine due to a COVID-19 exposure?
- Have you had any of the following symptoms now or in the last 72 hours:
  - Cough
• Shortness of breath or other difficulty breathing
• Fever
• Chills
• Muscle pain
• Sore throat
• New loss of taste or smell
• Abdominal distress, vomiting or diarrhea

If the answer to any of the questions above is yes, then in-person customer service is not allowable. Advise the customer that they are not able to enter the facility or receive in-person service at this time. Refer them to the customer service line (434-243-7929) to explore alternative options.

4: In-person customer interaction – If the customer does not answer any screening questions as yes, then advise the customer to sanitize their hands, using the provided hand sanitizer. Then allow the customer access to the facility and direct them to the appropriate person/office. Customer interaction should be conducted in the lowest risk method possible, considering the following:

• Employees and customer shall wear a face covering as recommended by CDC and TJHD
• Employees should maintain a minimum of 6’ distance from other employees and from customers
• Conduct the interaction outside in fresh air if possible
• Avoid contact with documents and/or packages when possible for 36 hours without gloves

5: Documents and/or packages – Employees should not handle any external documents/packages within the first 36 hours of receipt. Ideally ask the customer to remove any boxes or other containers (especially if the container is made of plastic or other hard surfaces). Then ask the customer to place the documents into designated bin utilizing the supplies provided by Albemarle County. These documents should sit in the container for at least 36 hours before employees handle them. Employees may pick up the bin to move into a secure location if needed.

In the case of time sensitive mail/packages, employees should wear gloves to open and process the items. If the item is determined to not be time sensitive once it is opened, it should be held for 36 hours before processing as noted above.

6: Clean and sanitize – Once customer interaction is complete, encourage customer to use hand sanitizer as they exit the building. Employees should clean the customer interaction area with wipes, sprays, and/or paper towels provided by FES.

7: Wash hands - Once cleaning is complete, employees should immediately wash hands thoroughly in a manner consistent with guidance from the CDC.

Additional notes for field/site work or home visits: For employees conducting work in a field, site and/or home visit setting, incorporate any/all above practices as practicable. Before going out to meet with customers, gather any supplies needed to protect employee and customer health such as educational materials or flyers, hand sanitizer, face covering, gloves, cleaning supplies plastic bins, etc.

Prior to conducting work at a customer’s site or home, the following additional precautions should be taken:
A. Conduct interactions and/or business in a room with as few people as possible. This may be a vacant room or a room with sufficient space to maintain 6 feet of distance between employee(s) and customers who are not already in the same household.
B. Confirm that any persons on the site who will be interacting with or in the same room as employee(s) will be wearing face coverings as recommended by the CDC.

C. Conduct the screening as noted in number 3 above for anyone who will be interacting with or in the same room as the employee.

D. If any items above are not in compliance advise the customer that we are unable to provide on-site service until they are able to comply.

E. In the case of a confirmed or presumed positive COVID-19 case where the person was ill while at the site, county personnel are prohibited from providing on-site service until one of the following two conditions are met (in addition to A-E, above):
   i. It has been a minimum of 7 days since the most recent case has left the site, or
   ii. The site has been disinfected according to CDC guidelines and it has been a minimum of 3 days since the most recent case has left the site
COVID-19 Customer Interaction Guide

1. Customer requests in person service at county facility

   - Is there a virtual way to address the customer's needs (online, telephone, virtual meeting, etc.)?
     - Yes
       - Advise the customer that they are not able to enter the facility or receive in person service at this time. Refer them to the customer service line (434-243-7929) to explore alternative options.
     - No

2. Conduct a risk assessment by phone or at a minimum distance of 6'.
   - Have you been diagnosed with COVID-19 or awaiting test results?
   - Has the Health Department advised you to isolate or quarantine due to a COVID-19 exposure?
   - Have you had any of the following symptoms now or in the last 72 hours:
     - Cough
     - Shortness of breath or other difficulty breathing
     - Fever
     - Chills
     - Muscle pain
     - Sore throat
     - New loss of taste or smell
     - Abdominal distress, vomiting or diarrhea

3. Did the customer answer yes to any of the screening questions?
   - Yes
     - Sanitize any areas the customer came in contact with and then wash/sanitize your hands.
   - No

4. Advise the customer to sanitize their hands and then allow access to the facility and direct the customer to the appropriate person/office.

5. Customer interaction should be conducted in the lowest risk method possible, considering the following:
   - Maintain a minimum of 6' distance
   - Conduct the interaction outside in fresh air if possible
   - Avoid contact with documents for 36 hours without gloves
COVID-19 Exposure and Return to Work Policy

**Purpose:** Protect the workplace and employees from exposure to communicable diseases such as the SARS-CoV-2 (COVID-19) pandemic, direct timely notification of illnesses to County Infection Control Officer(s) and provide guidance to employees on expected actions for post exposures follow up.

**Scope:** This policy applies to all Albemarle County Local Government Employees and Volunteers. For the purpose of this document the term employee includes Albemarle volunteers unless specifically noted.

**Procedure:**

The following procedure outlines the process for reporting COVID-19 related symptoms or exposures, the process to determine if isolation and/or work restrictions are required, and when an employee can return to work after being placed on isolation and/or work restrictions.

1. **Reportable Conditions** - The following situations pose a significant and imminent risk to the employee, their co-workers, and our customers. It is essential they be reported to the infection control team in a timely manner immediately so steps can be taken to limit the potential spread of COVID-19.  
   a. **Confirmed or Suspected Case of COVID-19**  
      i. Employee is COVID-19 positive or presumed positive  
      ii. Employee has been advised by their health care provider to self-quarantine  
   b. **Non-Work Related (Household/Close Contact)**  
      i. In the last 14 days, the employee has traveled to a location with widespread ongoing transmission  
      ii. In the last 14 days, the employee has traveled on a cruise ship or river boat  
      iii. Employee is living in the same household as a COVID-19 positive or presumed positive person  
      iv. Employee is caring for a COVID-19 positive or presumed positive person  
      v. Being within approximately 6 feet of a person with COVID-19 for 10 minutes or longer  
      vi. A COVID-19 positive patient coughed or sneezed on the employee outside of work  
   c. **Work Related Exposure**  
      i. An employee has had close contact with a person exhibiting signs/symptoms of COVID-19 during the course of their job  
   d. **Personal Illness**  
      i. Employee experiences signs and symptoms consistent with COVID-19 including any one or more of the following:  
         1. Cough  
         2. Shortness of breath or other difficulty breathing  
         3. Fever  
         4. Chills  
         5. Muscle pain  
         6. Sore throat

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2. Reporting Procedure- An employee that meets any of the reportable conditions noted above shall notify the designated infection control officer (DICO) at their earliest opportunity using the link below, but no later than 24 hours from the onset of the condition. If the employee is at work when they become aware of the condition, they should don a facemask or face covering, as available, avoid direct contact with other employees, notify their supervisor by electronic means, notify the DICO, and immediately leave the worksite. If the employee is experiencing severe symptoms such as difficulty breathing, persistent pain or pressure in the chest, new confusion, or bluish lips/face they should seek medical attention immediately. If the employee is not at work when they become aware of the condition, they shall notify their supervisor, contact the DICO, and not return to the employee’s worksite for any reason until cleared to Return to Work.

Click here to report an illness or exposure
If urgent or unable to access online form, call:
Designated Infection Control Officer (DICO) 434-987-8890 (available 24/7)

3. Exposure Investigation- Upon notification of a reportable condition as noted above, the infection control team will take the following actions.
   a. Conduct Investigation- The DICO taking the report will document all pertinent information and develop a timeline of other potentially exposed employees.
b. Determine Risk and Provide Initial Guidance- Based on the DICO’s investigation, they will make an initial determination of risk based on current CDC guidelines and provide initial guidance on the need for isolation and/or work restrictions.  

   c. Notify Potentially Exposed Employees- If the exposed employee is confirmed positive or symptomatic for COVID-19 then employees that have had close contact with the exposed employee will be notified by the DICO. They will be advised to self-monitor and adhere to social distancing guidelines but will not disclose any information that could identify the exposed employee.

4. Post Exposure Follow-Up-
   a. Hospital Coordination- If the patient was transported to the hospital the DICO will contact the hospital to determine the status of the patient’s COVID-19 testing results.
   b. Health Department Coordination- The DICO will work closely with the local health department to ensure all people that were potentially exposed are notified and the appropriate self-isolation and work restrictions are being implemented.
   c. Employee Monitoring- The DICO will contact any employee required to monitor their signs and symptoms daily to record their symptoms and determine any needs.
   d. Employee Testing- The employee’s health care provider will determine the need for testing. In the case of expedited testing for emergency responders, the DICO will coordinate the testing with TJHD and UVA.
   e. Work Force Housing- Employees that experience a work-related exposure, are directed to self-isolate by the DICO, Health Department or their medical care provider and are unable to return home due to concerns about the potential risk to their family and/or roommate(s) will be offered work force housing. This may consist of a local hotel room or a dedicated facility consistent with Virginia Health Department guidelines. Any approved costs associated with work force housing including, lodging and food, for the duration of the self-isolation will be paid by the County. The DICO will assist in determining the employee’s needs and securing of work force housing if required.
   f. Facility Decontamination- The DICO, in conjunction with TJHD and FES, will determine the need for sanitizing of a facility that has had a confirmed or suspected case of COVID-19. If required, FES will coordinate the cleaning and disinfection in accordance with CDC guidelines.

5. Employee Privacy- The DICO will maintain any documents related to the exposure as medical records in accordance with ADA, EEOC, DOL, and other applicable standards. Mandated reporting under this policy is restricted solely to COVID-19 diagnoses and COVID-19 related symptoms and exposures. Employees should not report any other underlying, pre-existing, or unrelated medical condition or disability.

6. Return to Work- Employees who have been prescribed self-isolation directives will be permitted to return to work in accordance with CDC and Health Department guidelines and in conjunction with the employee’s health care provider. Telework should be prioritized for asymptomatic employees on work restrictions.

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a. Confirmed or suspected case of COVID-19 1,3,6
   i. Non-test-based strategy. Self-isolate and exclude from work until:
      1. At least 3 days (72 hours) have passed since recovery defined as resolution of fever without
         the use of fever-reducing medications AND
      2. improvement in respiratory symptoms (e.g., cough, shortness of breath), AND
      3. At least 10 days have passed since symptoms first appeared
   ii. Test-based strategy. Self-isolation and exclude from work until:
      1. Resolution of fever without the use of fever-reducing medications AND
      2. improvement in respiratory symptoms (e.g., cough, shortness of breath), AND
      3. negative results of an FDA Emergency Use Authorized molecular assay for COVID-19 from
         at least two consecutive nasopharyngeal swab specimens collected ≥24 hours apart (total
         of two negative specimens). See Interim Guidelines for Collecting, Handling, and Testing
   iii. If the employee was never tested for COVID-19 but had an alternate diagnosis (e.g., tested positive
        for influenza), criteria for return to work should be based on that diagnosis.

b. Household or close contact 1
   i. Employee must remain in self-quarantine and on work restrictions for 14 days after the close
      contact is released from isolation
   ii. If the employee develops symptoms see confirmed or suspected case

c. Confirmed exposure (other than household/close contact) 1,3
   i. Low Risk
      1. No work restrictions are required
   ii. Medium/High Risk
      1. Employee must remain in self-quarantine and on work restrictions for 14 days
      2. If the employee develops symptoms see confirmed or suspected case

d. Critical Personnel- In cases of severe staffing shortages, it may be necessary to allow asymptomatic
   employees that are deemed essential to mission critical services to return earlier than the standard
   recommendations. This decision would only be considered after consultation with the Health Department
   and local government leadership. 1,3,7

Definitions: 3

Close contact - for healthcare exposures is defined as follows: a) being within approximately 6 feet (2 meters) of a
person with COVID-19 for a prolonged period of time (such as caring for or visiting the patient; or sitting within 6
feet of the patient in a healthcare waiting area or room); or b) having unprotected direct contact with infectious
secretions or excretions of the patient (e.g., being coughed on, touching used tissues with a bare hand).

Active monitoring - means that the state or local public health authority assumes responsibility for establishing
regular communication with potentially exposed people to assess for the presence of fever or respiratory symptoms
(e.g., cough, shortness of breath, sore throat). For HCP with high- or medium-risk exposures, CDC recommends this

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7 Implementing Safety Practices for Critical Infrastructure Workers Who May Have Had Exposure to a Person with
communication occurs at least once each day. The mode of communication can be determined by the state or local public health authority and may include telephone calls or any electronic or internet-based means of communication.

**Self-monitoring** - HCP should monitor themselves for fever by taking their temperature twice a day and remain alert for respiratory symptoms (e.g., cough, shortness of breath, sore throat). Anyone on self-monitoring should be provided a plan for whom to contact if they develop fever or respiratory symptoms during the self-monitoring period to determine whether medical evaluation is needed.

**Self-monitoring with delegated supervision** - in a healthcare setting means HCP perform self-monitoring with oversight by their healthcare facility’s occupational health or infection control program in coordination with the health department of jurisdiction, if both the health department and the facility are in agreement. On days HCP are scheduled to work, healthcare facilities could consider measuring temperature and assessing symptoms prior to starting work. Alternatively, a facility may consider having HCP report temperature and absence of symptoms to occupational health prior to starting work. Modes of communication may include telephone calls or any electronic or internet-based means of communication.

**High-risk** - exposures refer to HCP who have had prolonged close contact with patients with COVID-19 who were not wearing a facemask while HCP nose and mouth were exposed to material potentially infectious with the virus causing COVID-19. Being present in the room for procedures that generate aerosols or during which respiratory secretions are likely to be poorly controlled (e.g., cardiopulmonary resuscitation, intubation, extubation, bronchoscopy, nebulizer therapy, sputum induction) on patients with COVID-19 when the healthcare providers’ eyes, nose, or mouth were not protected, is also considered high-risk.

**Medium-risk** - exposures generally include HCP who had prolonged close contact with patients with COVID-19 who were wearing a facemask while HCP nose and mouth were exposed to material potentially infectious with the virus causing COVID-19. Some low-risk exposures are considered medium-risk depending on the type of care activity performed. For example, HCP who were wearing a gown, gloves, eye protection and a facemask (instead of a respirator) during an aerosol-generating procedure would be considered to have a medium-risk exposure. If an aerosol-generating procedure had not been performed, they would have been considered low-risk.

**Low-risk** - exposures generally refer to brief interactions with patients with COVID-19 or prolonged close contact with patients who were wearing a facemask for source control while HCP were wearing a facemask or respirator. Use of eye protection, in addition to a facemask or respirator would further lower the risk of exposure.

**Self-Quarantine** - refers to the practice of confining individuals who have had close contact with an infectious case to determine whether they develop symptoms of the disease. Quarantine for COVID-19 should last for a period of 14 days.

**Self-Isolation** - Isolation is defined as the separation or restriction of activities of an ill person with a contagious disease from those who are well.

**Healthcare Personnel** - For the purposes of this document HCP refers to all paid and unpaid persons serving as a first responder or in healthcare settings who have the potential for direct or indirect exposure to patients or infectious materials, including body substances; contaminated medical supplies, devices, and equipment; contaminated environmental surfaces; or contaminated air. For this document, HCP does not include clinical laboratory personnel.