

Food Industry Recommended Protocols When Employee/Customer Tests Positive for COVID- 19

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Background

Food production facilities, distributors and wholesalers are part of our nation's "critical infrastructure" and must remain operational to feed the country. Inconsistent approaches to reacting to an employee who tests positive for COVID-19 has the potential to jeopardize our food system. This document recommends a consistent approach in how a company can continue operations in the event an individual has tested positive, given the global COVID-19 pandemic and high transmissibility of this respiratory virus from person to person. This guidance relies on guidance from the Centers for Disease Control and Prevention and OSHA, and will cover recommendations on:

- Steps to be taken when an employee tests positive for COVID-19 (a confirmed case) or has symptoms associated with COVID-19—cough, fever, sore throat, shortness of breath (presumptive or suspected case)
- Steps to be taken when an employee/facility visitor is exposed (in close contact) to an individual who is positive for COVID-19

Steps to be taken when an employee tests positive for COVID-19

- A. If an individual has the symptoms associated with COVID-19 or is diagnosed with COVID-19
 - And the employee is onsite at the facility send the employee home immediately; if the employee is at home, do not permit the employee to come to work
 - If the employee has not been tested but is symptomatic, encourage the employee to contact their local health department and physician to determine next steps
 - Employees who have symptoms of acute respiratory illness are recommended to stay home and not come to work until they are free of fever (100.4° F [38.0° C] or greater using an oral thermometer), signs of a fever, and any other symptoms for at least 24 hours, without the use of fever-reducing or other symptom-altering medicines (e.g. cough suppressants). Employees should notify their supervisor and stay home if they are sick. CDC guidance states that if an employee that has been tested and confirmed to be infected with COVID-19, and has not had a second test to determine if he/she are still contagious, the employee

should not return to work until s/he has had no fever for at least 72 hours, other symptoms have improved, and at least 7 days have passed since symptoms first appeared.

- i. If the employee will have a second test to determine if he/she is contagious, the employee can return to work if he/she no longer has a fever, other symptoms have improved, and he/she has received two negative test results in a row, 24 hours apart.
 - ii. A return to work note may or may not be needed as per CDC guidance (<https://www.cdc.gov/coronavirus/2019-ncov/healthcare-facilities/hcp-return-work.html>)
 - o Investigate the nature and scope of exposure of employee confirmed positive or with symptoms for COVID-19 to other facility employees, working with state and/or local public health authorities as the situation dictates
 - i. Investigate to determine where the employee confirmed positive or with symptoms for COVID-19 was working, and who they were in close contact with (less than 6 ft.) in the facility
 1. Talk to employee if possible, via telephone or other means to obtain this information; use any other sources available, such as other facility employees or family members to obtain this information
 2. Determine if possible whether or not the employee has told other employees about the positive test
 - ii. Understand the nature of your workplace
 1. Size and density of the facility
 2. Movement of employees
 3. Assembly line/processing line versus office settings
 - o Inform appropriate personnel, third parties, and authorities;
 - i. Tell other employees with whom the employee worked that you believe they may have been exposed to the virus (keep the identity of the ill worker confidential)
 1. Verbally and/or in writing
 2. Strongly consider sending those employees home for 14 days, using CDC and OSHA risk assessment guidance, in conjunction with the guidance of state and/or local public health authorities (<https://www.osha.gov/SLTC/covid-19/>)
 - ii. Work with local and/or state public health authorities to advise the potentially exposed employees of the symptoms of COVID -19 and how to conduct a personal risk assessment, based on

1. CDC – COVID-19 Symptoms
(<https://www.cdc.gov/coronavirus/2019-ncov/symptoms-testing/symptoms.html>)
 2. Interim U.S. guidance for Risk Assessment and Public Health Management of Persons with Potential COVID-19
(<https://www.cdc.gov/coronavirus/2019-ncov/php/risk-assessment.html>)
- iii. A company decision will need to be made, based on the results of the investigation, the scope of the workforce that needs to be informed
 - iv. Contact relevant third parties who may have been exposed
 - v. Make an OSHA record/report if required. OSHA's recent guidance says such a report is required if:
 1. There is a confirmed case of COVID-19
 2. It is contracted due to employee performing work-related duties, and
 3. It meets other standards for OSHA reporting (for example, more than one day away from work, or medical treatment beyond first aid)
 - vi. State OSHA authorities
 - vii. Notify workers' compensation carrier and provide claim form to employee
- o Take steps to protect the workplace
 - i. Immediately undertake appropriate cleaning measures of the affected workspace or entire facility
 - ii. Initiate cleaning and disinfection procedures in the impacted areas of the facility [See Cleaning and Disinfecting section below]
 - iii. Follow guidance from health officials
 - o Do not reveal the name of the sick employee
 - i. Adhere to HIPAA requirements regarding health information of the affected individual (<https://www.osha.gov/SLTC/covid-19/>)

Steps to be taken when an employee/facility visitor is exposed (in close contact) with an individual who is positive for COVID-19

- Identify potentially exposed individuals (e.g., those that were in close contact with the infected individual) *Unless advised by local authorities, other individuals in the facility should not be considered high risk for infection, do not require special treatment, and may continue working as normal (after surfaces are cleaned and disinfected, as described below).*

- Close contact is defined by CDC as—
 - Within approximately 6 feet (2 meters) of a COVID-19 case for a prolonged period of time; close contact can occur while caring for, living with, visiting, or sharing a healthcare waiting area or room with a COVID-19 case, OR,
 - Having direct contact with infectious secretions of a COVID-19 case (e.g., being coughed on)
- In accordance with HIPAA requirements, inform individuals of potential exposure, and, working with local authorities and the individuals' health care providers, consider if it is appropriate to quarantine, self-monitor or take a different action.
- For individuals in the workplace who learn that they have been exposed to the virus outside of the workplace, send exposed employee home.
- Individuals that have been exposed to someone that is confirmed to have COVID-19 or is showing the symptoms of this virus should stay home at least 14 days from the last exposure.

[According to CDC](#)

Some personnel (e.g., emergency first responders) fill essential (critical) infrastructure roles within communities. Based on the needs of individual jurisdictions, and at the discretion of state or local health authorities, these personnel may be permitted to continue work following potential exposure to SARS-CoV-2 (either travel-associated or close contact to a confirmed case), provided they remain asymptomatic. Personnel who are permitted to work following an exposure should self-monitor under the supervision of their employer's occupational health program including taking their temperature before each work shift to ensure they remain afebrile. On days these individuals are scheduled to work, the employer's occupational health program could consider measuring temperature and assessing symptoms prior to their starting work. Exposed healthcare personnel who are considered part of critical infrastructure should follow existing CDC guidance.

- Clean and disinfect surfaces to limit employee contact. (see cleaning and disinfection)
- Because transmission occurs from person to person, a facility/ location does not need to shut down as a result of an employee, visitor, or other individual testing positive for COVID-19 if the steps above are followed and the ill and potentially exposed individuals are appropriately addressed.

Cleaning and Disinfection Guidelines

- Existing sanitation standard operating procedures should be effective to achieve adequate cleaning and disinfection of SARS-CoV-2 to prevent transmission to people

- As soon as an employee is identified that has tested positive for COVID-19 or has symptoms associated with this virus, clean and sanitize the facility according to CDC guidance at <https://www.cdc.gov/coronavirus/2019-ncov/community/organizations/cleaning-disinfection.html>
- [CDC has issued specific guidance](#) regarding the cleaning and disinfection of facilities with suspected or confirmed cases of COVID-19.
- EPA registered disinfectants should be used.
 - There is a list of EPA-registered “disinfectant” products for COVID-19 on the [Disinfectants for Use Against SARS-CoV-2 list](#) that have qualified under EPA’s [emerging viral pathogen program](#) for use against SARS-CoV-2, the coronavirus that causes COVID-19.
 - **IMPORTANT:** Check the product label guidelines for if and where these disinfectant products are safe and recommended for use in food manufacturing areas or food establishments.
- Special attention should be paid to high contact surfaces such as: door knobs, touch screens, control panels, time clocks, table tops, breakroom/ cafeteria facilities, handwashing stations, and restroom facilities.

Disposition of Food

- There is currently no evidence to support that the SARS-CoV-2 virus can be transmitted to humans through food or food packaging materials. The FDA does not anticipate that food will need to be held, recalled or withdrawn from the market due to possible exposure to SARS-CoV-2 through a person that has tested positive for the COVID-19 virus that works a food facility.
<https://www.fda.gov/food/food-safety-during-emergencies/food-safety-and-coronavirus-disease-2019-covid-19>

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