

# Brookhaven National Laboratory COVID-19 Workplace Safety and Reentry Plan

Revision 8



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# Brookhaven National Laboratory

## COVID-19 Workplace Safety Plan

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# BNL COVID-19 Workplace Safety and Reentry Plan

## Purpose

The health and safety of the Brookhaven Laboratory workforce, including our employees and on-site guests, users, and collaborators, is our highest priority. The Federal Government and the U.S. Department of Energy (Department or DOE) are committed to addressing essential work requirements consistent with best public health practices. The Department's paramount concern is the health and safety of all Federal employees, on-site contractors, and individuals interacting with the Federal workforce.

The BNL COVID-19 Workplace Safety and Reentry Plan primarily uses the DOE COVID-19 "Workplace Safety and Reentry Framework" (December 15, 2021) as a primary reference. As set forth in the January 20, 2021, Executive Order 13991 "Protecting the Federal Workforce and Requiring Mask-Wearing," and the September 9, 2021, Executive Order 14043 "Requiring Coronavirus Disease 2019 Vaccination for Federal Employees" the policy of the Administration is "to halt the spread of coronavirus disease 2019 (COVID-19) by relying on the best available data and science-based public health measures". The DOE COVID-19 Workplace Safety and Reentry Framework that has been developed in accordance with relevant orders and guidance, including: the Office of Management and Budget (OMB) memorandum M-21-15, COVID-19 Safe Federal Workplace: Agency Model Safety Principles, issued January 24, 2021; M-21-25, Integrating Planning for a Safe Increased Return of Federal Employees and Contractors to Physical Workplaces with Post-Reentry Personnel Policies and Work Environment, issued June 10, 2021; Safer Federal Workforce Task Force COVID-19 Workplace Safety: Agency Model Safety Principles, updated September 13, 2021; Executive Order 14042, Ensuring Adequate COVID Safety Protocols for Federal Contractors, signed on September 9, 2021, and relevant court orders; guidance from the Safer Federal Workforce Task Force; updated U.S. Centers for Disease Control and Prevention (CDC) guidance; Occupational Safety and Health Administration (OSHA) guidelines; and other federal guidance.

On February 25, 2022, the CDC set recommendations related to COVID-19 Community Levels, which measure the impact of COVID-19 illness on health and healthcare systems. Layered prevention strategies—like staying up to date on vaccines, screening testing, ventilation, and wearing masks—can help limit severe disease and reduce the potential for strain on the healthcare system.

Pursuant to Executive Order 13991, Federal agencies follow CDC guidelines for mask-wearing and other public health measures. This Plan provides BNL with initial implementation guidance they should follow in utilizing the CDC's COVID-19 Community Levels to determine the appropriate mask-wearing and screening testing requirements.

The U.S. Department of Health and Human Services announced the official end of the COVID-19 Public Health Emergency on May 11, 2023, however the Federal Safer Federal Workforce Task Force has not lifted workplace safety requirements.

## Introduction

The Brookhaven National Laboratory (BNL) COVID-19 Workplace Safety and Reentry Plan (Plan) has been written to meet the requirements established in the DOE Framework and the BNL Prime Contract. The DOE Framework outlines the requirements to protect the health and safety of the workforce for a safe reentry to DOE Federal facilities as well as the reentry schedule for the safe accomplishment of the DOE mission in a COVID-19 environment. The DOE Framework is a living document that will be updated as needed to account for changing COVID-19 conditions, Safer Federal Workforce Task Force guidance and CDC guidelines.

The BNL site has been affected by COVID-19 since March 2020, and through the implementation of the comprehensive Resumption of Operations Plan (ROOP) BNL has been able to mitigate the impact on the Laboratory workforce and the Lab's science mission. The ability to conduct limited operations during the pandemic was essential so that our world-class user facilities could contribute to the fight against COVID-19. The principles of administrative and engineering controls reduced on-site density, and adequate cleaning supplies and Personal Protective Equipment (PPE) all contributed to a workplace infection rate significantly less than what has been experienced in the local area.

The following provides a timeline for the BNL response to the pandemic:

On March 23, 2020, BNL transitioned to a minimal operating status (Essential Mission Critical Operations) because of the national and regional effects of the pandemic. During that period (aka Phase '0'), greater than 90 percent of Laboratory staff remained off site, with most of those individuals working remotely from home.

On June 4, 2020, BNL successfully transitioned to Phase '1' of its recovery in accordance with the BNL ROOP. On-site maximum staffing density gradually increased from ~250 staff members to ~700 staff members. The primary goal of Phase 1 activities was to prepare the conventional and scientific infrastructure for the future re-entry of additional staff members.

On July 6, 2020, BNL successfully transitioned to Phase '2' of its recovery in accordance with the ROOP. On-site maximum staffing density was authorized to increase to 1,200 staff members. The primary goal of Phase 2 activities has been to maintain and operate (in a limited status) BNL's scientific facilities and user facilities.

During the summer of 2020, the regional COVID-19 conditions on Long Island were very good. On September 22, 2020, a "Refined Phase 2" plan was approved, which was envisioned to gradually increase on-site staffing by 200 to a new level of 1,400 individuals<sup>1</sup>.

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<sup>1</sup> We were not expecting that 1,400 would be a continuous on-site staffing plan. It was a peak staffing, primarily during simultaneous operational activities at both RHIC and NSLS-II. At many times, staffing was envisioned to typically still be ~1,000.

However, in early October 2020, Laboratory management noticed an uptick in regional cases. As a result, BNL did not increase on-site staffing, but pulled back to about 900 staff members on site. In hindsight, October 2020 through April 2021 marked the ‘second wave’ of COVID-19 cases for NY and Long Island.

In July 2021, the rate of COVID-19 transmission across the country began to increase again. On July 28, 2021, DOE issued “Revised Requirement for Mask Wearing in DOE Buildings and Leased Spaces”. This was followed with guidance provided by the Safer Federal Workforce Task Force on July 29, 2021, titled “COVID-19 Workplace Safety: Agency Model Safety Principles”. And lastly, DOE issued additional COVID-19 guidelines on August 4, 2021, aligned with the expectations outlined by the Safer Federal Workplace Task Force. The requirements within these communications are now captured in the DOE Framework.

Recovery planning was coordinated through the BNL Office of Emergency Management (OEM). Detailed Directorate-level recovery plans have been grounded in restoration of the science mission in a graded, incremental approach over time.

The BNL approach is agile and has been informed by:

- The DOE Framework;
- Federal guidelines (e.g., from the White House, and the Centers for Disease Control and Prevention [CDC]);
- State and regional guidelines (from Executive Orders and NYS Department of Health, Suffolk County Department of Health Services); and
- Consideration of local conditions at BNL (determined by the Occupational Medicine Clinic [OMC]).

As Federal/DOE or Local/ NYS guidelines are updated they will be reflected at the *BNL Resumption of Operations and Coronavirus Resources* website:

<https://www.bnl.gov/COVID19/>.

This Plan will guide operational status and response and is sustainable for as long as needed to protect BNL staff. Key guiding principles, across all operational phases, include the following:

- Maintaining low risk of COVID-19 transmission at BNL by providing reasonable assurance of a low probability of staff being infected with COVID-19 while on site, and that staff returning on site are not actively infected with COVID-19.
- Enabling optimal BNL productivity.

## Scope and Applicability

This plan applies to the BNL site, facilities, DOE (except where noted), Brookhaven Science Associates (BSA) employees, subcontractors, and guests/users performing work on site. This

plan builds upon the ROOP, and its development resulted in a comprehensive review of the mission-critical work being performed in person or on site.

This plan supersedes BNL's COVID-19 Workplace Safety Plan Rev 7.

This document is primarily focused on application of U.S. Centers for Disease Control and Prevention (CDC) and Occupational Safety and Health Administration (OSHA) guidelines to the Federal workplace. The principles presented here establish a minimum level for workplace safety and are aligned with the CDC guidance and established public health best practices, based on evolving understanding of the pandemic. Principles will be reassessed over time as conditions warrant. This document is not meant to be exhaustive, and additional program or site/facility controls will be developed as needed. The BNL Plan builds upon these principles and will be adjusted as appropriate for mission requirements.

## Principles

- The health and safety of BSA employees, subcontractors, and guests/users are of paramount importance and guide all actions at BNL facilities.
- The Plan aligns with the DOE Framework and will be revised as necessary to account for any superseding or additional guidance.
- A structured, orderly process will be used for employees to safely reenter DOE facilities, based on the needs the Laboratory and the health and safety of the workforce. The Laboratory will utilize telework and flexible work schedules for reentry and post-reentry.
- CDC-recommended and optional practices, including enhanced entrance screening, social distancing, and workplace protocols will be used, as practical and appropriate, to lower risk.
- Plans and protocols will consider contingencies to prepare for potential new developments. The Laboratory will use CDC guidelines to reassess and inform decisions as conditions warrant.
- COVID-19 vaccines are designed to save lives and prevent illness and are integral to dramatically reducing the number of cases and helping to defeat COVID-19. Vaccines will no longer be required for BSA staff, but are still strongly encouraged as they reduce the risk of infection and are very effective at preventing severe COVID-19 illness, hospitalization, and death.
- This Plan continues to leverage the advantages of teleworking to help reduce onsite staffing density as one of the risk mitigation tools for the BNL workforce.

## Operating Status

BNL is currently in “Normal Operations with Telework” in accordance with the timeline included in this Plan. BSA Position Categories are described later in this Plan.

Operational Status	Approximate Daily Number of Personnel Onsite	BSA Position Categories Onsite
Normal Operations	2000+	Site-based, Telework, Remote (as needed)
Normal Operations with Telework	1250 - 2000	Site-based, Telework
Limited Operations with Maximum Telework	450 - 1250	Site-based, Telework
Essential Mission-Critical Operations	250 - 450	Site-based
Min-Safe Standby Status	~200	Site-based

## Approach to Reentry

In addition to ensuring the health and safety of BSA and contractor employees, BNL’s approach to reentry and the post-reentry work environment was focused on mission accomplishment and sustainability. Since the beginning of the pandemic, BNL’s portfolio of risk mitigation controls (e.g., social distancing, masking, hygiene, vaccination, and staff density control) has been very effective. About 2% of the COVID-19 cases experienced by BNL staff have involved the possibility of a workplace transmission. The BNL risk mitigation approach incorporates values to shape a future workplace that achieves a reduced carbon footprint, improves recruitment and retention, reduces facility costs, and creates a better work - life balance without negatively impacting mission delivery. BNL is committed to creating a flexible and agile workforce that is better able to respond to local and world events and that highlights DOE’s core values and principles of diversity, equity, inclusion, and accessibility. BNL’s decisions will consider the impact on local communities.

The COVID-19 pandemic forced changes to our work environment. Many BNL employees and contractors have learned how to perform the functions of their job in a new way during a difficult time, meeting the challenges head-on. BNL has demonstrated that we have been able to carry out our missions effectively. Accordingly, we now have an opportunity to revisit how we were operating prior to the pandemic and leverage lessons learned during the pandemic to integrate telework and remote work into our workforce plans.

BNL has conducted an orderly reentry to the workplace through a phased return to the physical workplace based on the work category and key duties of an employee’s position as defined below.

## Reentry and Position Work Categories

BNL's approach to reentry is aligned with the principles set forth in the DOE Framework.

BNL has conducted an orderly reentry to the workplace, where BSA employees have returned in a staged manner to the physical workplace. Our approach allows management and supervisors to determine the right mix of onsite and telework work for their offices based on their mission needs and in accordance with DOE's values.

At this time, positions are divided into three main work categories:

- **Site-based Employee:** Most or all key duties must be performed onsite (e.g., regular access to secure information, site operations, project oversight, site safety and security activities), including onsite mission essential scientific research and national security activities (e.g., Primary Mission Essential Function activities).
- **Telework Employee:** Some key duties or work activities are required to be performed onsite (e.g., intermittent access to secure information, onsite inspections, improved efficiency of mission essential work). Must have an approved Telework agreement.
- **Remote Work Employee:** Most or all key duties can be performed effectively and efficiently from a remote location. Must have an approved Remote Work Agreement.

These work categories have been further refined and expanded for purposes of reentry planning and timelines, as explained below.

## Reentry Timeline

BSA has completed its reentry to the workplace but has maintained additional flexibility during periods of High Community Levels.

The return dates for BSA staff were approximately 30 days after the return dates for DOE staff in similar work categories. The timeline used for specific reentry is outlined below.

Position Category	Return Date	Category Descriptions
Site-based	For those not currently working onsite, Monday March 7, 2022	Most or all key duties must be performed onsite
Telework Employee	Monday, March 14, 2022, for their onsite work	Some key duties are required to be performed onsite
Remote Work Employee	Any time after March 28, 2022, as required by the directorate	Most or all key duties can be performed offsite

## Health and Safety Requirements

### *Vaccinations*

Effective May 22, 2023, BSA employees are no longer required to be fully vaccinated, but vaccines are still strongly encouraged as they reduce the risk of infection and are very effective at preventing severe COVID-19 illness, hospitalization, and death.

Should an employee wish to be vaccinated, the BNL Resumption of Operations and Coronavirus Resources web page provides information on where to get a vaccine.

Employees are no longer eligible for administrative leave if they decide to get a vaccination or booster.

### *Subcontractor Employees, Guests, and Users*

In connection with court orders that have been entered concerning Executive Order 14042, Ensuring Adequate COVID Safety Protocols for Federal Contractors, DOE has notified contractors that it will take no action to enforce the clause implementing requirements of Executive Order 14042, absent further written notice from DOE. These requirements may be subject to future change depending on the outcome of ongoing litigation and the receipt of updated guidance from the Office of Management and Budget.

Based on this guidance from the DOE, BSA no longer requires subcontractors, users, or guests to be vaccinated or show proof of a negative COVID test.

### *Levels of Community Transmission*

In applying COVID-19 workplace safety protocols connected to levels of community transmission in Suffolk County, BNL must reference the [COVID-19 Community Levels | CDC](#).

BNL assesses community levels in Suffolk County at least weekly to determine proper mask-wearing requirements. When the community level of increases from “LOW” or “MEDIUM” to “HIGH,” BNL will implement more protective safety protocols consistent with CDC guidelines and guidance from the Safer Federal Workforce Task Force as soon as operationally feasible.

### *Face Masks*

CDC has provided county-level data showing the COVID-19 Community Level for each county in the United States. For Federal facilities in the United States, agencies should utilize that data in determining the COVID-19 Community Level for a given facility by looking to the COVID-19 Community Level for the county in which the facility is located. Where a locality imposes more protective pandemic-related safety requirements, those requirements should be followed in Federal facilities within that locality.

### ***When the COVID-19 Community Level is LOW or MEDIUM in Suffolk County***

Masks **are not required** on the BNL site or within BNL facilities, regardless of vaccination status. Staff have the option to wear a mask when it is not required.

The OMC Manager may require masks at the OMC if the number of cases on the BNL site warrant extra protection for staff and visitors to the OMC.

***When the COVID-19 Community Level is HIGH in Suffolk County***

Masks ***are required*** on the BNL site and within BNL facilities, regardless of vaccination status.

***General Mask Requirements***

Individuals who are required to wear a mask must wear a mask that covers the nose and mouth and is in accordance with current CDC and OSHA guidance. The Lab Hierarchy of Face Coverings (in order from most effective to least effective) is:

1. KF94 and KN95 Masks (Not N95)
2. Surgical Masks that are at least 3-ply.
3. Cloth masks (including gaiters) over a disposable surgical-type mask to enhance their fit and provide multi-layer protection.

KF94 and KN95 masks provide the best protection against COVID-19. These masks are not respirators, but provide superior protection as compared to cloth masks and surgical masks.

When KF94 or KN95 masks are not available for use, the next best option is a surgical mask. Surgical masks are multilayered masks, typically with ear loops. For these surgical masks to be effective, you must follow the Centers for Disease Control (CDC) recommendation to tie knots in the ear loops and fold down the corners of the mask to eliminate gaps between the mask and cheeks.

Cloth face coverings, including gaiters, will no longer be acceptable as face coverings for use on the Lab site unless used in conjunction with a surgical mask (i.e., "double-masking," with a surgical mask worn underneath the cloth face covering).

As mask guidance evolves, BSA may modify the list of approved masks.

When an individual is required to wear a face mask, masks must be worn in any indoor spaces, including common areas or shared workspaces (e.g., open floorplan office space, cubicle embankments, hallways, garages, conference rooms, or other workspaces) even when physically distant. Masks must also be worn outdoors in crowded settings or during outdoor activities that involve close contact with other people. When required, face masks must be worn in all in-person meetings and are required at staffed security checkpoints. Security Police Officers may direct individuals to lower or temporarily remove their masks to verify identity. Masks, when required, must be worn inside government-owned vehicles.

Exceptions to wearing a mask for non-vaccinated or vaccinated employees, when required, may include:

- 1) Mask removal when alone in an office with floor-to-ceiling walls and the door shut (Note – cubicles with partial walls are considered public spaces and require masking);
- 2) Mask removal when the individual is the sole occupant in a government-owned vehicle.

- 3) Intermittent removal when eating/drinking -- masks may be removed for a limited time if one is at least six feet from another individual.
- 4) Conducting work utilizing controls and/or personal protective equipment identified in a job hazards analysis or similar evaluation if the COVID-19 risk is factored into the analysis and the controls identified as part of that analysis are implemented.
- 5) Conducting work where the hazards associated with wearing the mask (e.g., straps getting caught in machinery, heat stroke, etc.) are greater than the risks with not wearing a mask if the COVID-19 risk is factored into the job hazards analysis and the controls identified as part of that analysis are implemented; and
- 6) Individuals who have a medical or religious reason why they cannot wear masks. Exemptions to the face mask policy will be considered in accordance with existing Equal Employment Opportunity Commission (EEOC) guidance. BSA staff should work with their Human Resources Manager to request an exemption.

### **Mask Protection Guidance**

- Choose a mask with a nose wire.
- Use a fitter or brace to improve the seal of your face covering.
- Check that it fits snugly over your nose, mouth, and chin by cupping your hands around the outside edges of the mask and feeling for air flow.
- Add layers of material
  - Use a cloth mask that has multiple layers of fabric.
  - Wear a disposable mask underneath a cloth mask – but DO NOT combine two disposable masks.
  - The cloth mask should push the edges of the disposable mask against the face.
- Knot and tuck ear loops of three-ply disposable masks.
  - Knot the ear loops of a three-ply face mask where they join the edge of the mask.
  - Fold and tuck the unneeded material under the edges.
  - Video instructions are available <https://youtu.be/UANi8Cc71A0>

### **Respiratory Protection**

We remind BNL personnel that face coverings are not respirators or PPE. They are also not the kind of masks worn by health care workers (e.g., N-95). OSHA guidance states that for low-exposure risk, such as workers whose jobs do not require contact with people known to have or suspected of having COVID-19, or do not have frequent close contact (i.e., within six feet for a total of 15 minutes or more over a 24-hour period) with the general public or other workers, a multi-layer face covering provides adequate protection.

For employees who must work in medium, high, or very high exposure risk settings, where it is not possible to maintain social distancing and the hierarchy of controls (i.e., elimination,

substitution, engineering, and administrative) do not reduce the risk of exposure, respiratory protection may be used.

A hazard assessment of the work must be performed as required by the BNL Respiratory Protection Program - Program Description. If a respirator is required for the work, the requirements of the BNL Personal Protective Equipment and Respirator Subject Area must be followed, including training, medical evaluation, and fit testing. The Environment, Safety & Health Representative (ESHR) can be contacted to assist with the hazard assessment.

This guidance does not replace the need for PPE in medical, radiological areas, or other settings, as determined by work planning and control.

It is advised to wash or replace face coverings regularly. Guidance on making, wearing, and washing face coverings can be found on the CDC website at:

<https://www.cdc.gov/coronavirus/2019-ncov/prevent-getting-sick/about-face-coverings.html>.

For any questions about these requirements, contact the ESHR or the Safety & Health Services Division at Ext. 4056.

### ***BSA's COVID-19 Screening Program***

In accordance with the guidance released by the Safer Federal Workforce Task Force on February 28, 2022, and updated on August 12, 2022, the DOE and BSA will no longer conduct screening testing based on locality transmission rates or vaccination status.

### ***Contact Tracing***

In accordance with CDC and Safer Federal Workforce Task Force guidance, contact tracing is not required. However, BNL performs contact tracing in accordance with CDC guidelines to help identify, track, and manage work-related close contacts of COVID-19 cases. The OMC's medical staff takes the lead in the process of case identification, contact tracing, and all required reporting of cases and contacts. OMC staff perform contact tracing by warning these exposed individuals (contacts) of their potential exposure as rapidly and sensitively as possible.

In case investigation, once informed of a case of COVID-19, OMC staff will work with the affected individual to help identify everyone who has had close contact during the timeframe of potential infectiousness. OMC staff performing contact tracing works with managers and supervisors to verbally notify coworkers who may have been in contact with an individual diagnosed with COVID-19 to provide these individuals with more information to help in monitoring themselves for signs or symptoms and quarantining themselves, if appropriate.

OMC contact tracers collaborate with and support the contact tracing programs of local health departments to help identify, track, and manage contacts of COVID-19 cases, in accordance with local public health mandates.

To promote transparency and safety, BNL notifies line management by providing a COVID-19 Task Force Situation Report (typically weekly) about confirmed COVID-19 cases, consistent with local and Federal privacy and confidentiality regulations and laws. Line management then shares this information with their workforce.

Effective March 14, 2022, DOE modified its requirements for reporting (to DOE) of COVID-19 confirmed cases. Cases that need to be reported and tracked now include:

- The numbers of onsite active confirmed cases (those cases where an individual has been onsite in the 10 days prior to onset of symptoms or testing positive or within the 5 days after onset of symptoms or testing positive), including total confirmed cases (since March 2020), and deaths shall be reported every Monday.
- All deaths associated with COVID-19 must be reported to the DOE COVID-19 Hotline within one business day. An anonymized summary narrative will be requested for each death associated with COVID-19.

All BNL personnel that test positive for COVID-19 will report their case to the OMC by calling x3670.

### **Travel**

The Safer Federal Workforce Task Force has issued extensive travel guidance that is located at [Travel | Safer Federal Workforce](#). This includes but is not limited to guidance if an employee develops probable or confirmed COVID-19 while on official or local travel and if a federal employee has come in close contact with someone who has confirmed COVID-19 while on official or local travel.

Regardless of vaccination status, BSA employees cannot go on official travel if they have an active case of COVID-19. Employees are to adhere strictly to CDC, state, and local guidelines before, during, and after travel, regardless of whether the travel is personal or for official business. The CDC has provided guidance on travel for fully vaccinated people.

BSA employees, regardless of vaccination status, can go on official travel using the normal organizational approval processes. Official domestic and international travel for employees will be conducted in accordance with applicable CDC guidance and the January 21, 2021, Executive Order Promoting COVID-19 Safety in Domestic and International Travel.

Approval to travel varies when employees have had a known close contact with someone who has COVID-19:

- If BSA employees are not “up to date” with vaccination requirements and are recommended to quarantine for 5 days after the close contact, they may not go on official travel for the 5 days after the close contact pursuant to Executive Order 13991 and consistent with CDC guidance. Please see the Safer Federal Workforce Task Force FAQs on travel for additional guidance on how to proceed regarding approval to travel on days 6 – 10.

- If BSA employees are “up to date” with vaccination requirements and therefore not recommended by the CDC to quarantine after exposure but have not had confirmed COVID-19 within the previous 90 days, they may only go on mission critical travel during days 1 – 5 after the close contact. They may go on official travel through the normal organizational approval processes to travel on days 6 – 10 provided the individual tests negative no more than 1 day before travel and wears a high-quality mask when around others for the duration of the travel that falls within the 10 days after the last close contact.
- If BSA employees are “up to date” with vaccination requirements and therefore not recommended by the CDC to quarantine after exposure and have had confirmed COVID-19 within the previous 90 days, they may go on official travel through the normal organizational approval processes to travel on days 1 – 10 provided the individual wears a high quality mask when around others for the duration of the travel that falls within the 10 days after the last close contact .

For domestic travel, BSA employees must follow CDC guidance, in addition to state, federal, and local requirements during travel. They must also monitor their symptoms after travel. If symptoms develop, they must isolate themselves and notify the OMC.

For international travel, prior to arrival in the United States, all air passengers coming to the United States, including U.S. citizens and fully vaccinated people, are required to follow CDC guidance before they board a flight to the United States.

BSA employees may use their travel card for payment of COVID-19 tests recommended or required prior to or following travel. The travel costs for required COVID tests may be reimbursed as a miscellaneous travel expense. If a traveler cannot use the travel card due to a blockage on the card, the traveler can be reimbursed via the travel voucher, with a receipt for the test.

### **Symptom Monitoring**

As part of BNL’s effort to prevent or reduce the spread of COVID-19 on site, we have implemented the following controls:

#### **Screening**

People with COVID-19 have reported a wide range of symptoms – ranging from mild symptoms to severe illness. Employees should maintain awareness of their personal health, including COVID-19 symptoms that may appear two to 14 days after exposure to the virus. Anyone can have mild to severe symptoms. Individuals with any of the following symptoms may have COVID-19 and must not report to work. Instead, they should consult with their personal physician and must inform the OMC if they test positive for COVID-19:

- Fever or chills
- Cough
- Shortness of breath or difficulty breathing
- Fatigue
- Muscle or body aches
- Headache

- New loss of taste or smell
- Sore throat
- Congestion or runny nose
- Nausea or vomiting
- Diarrhea

### ***Quarantine and Isolation***

Effective August 2022, CDC updated its quarantine and isolation guidance and removed the requirement to quarantine after an exposure to COVID-19.

Any individual who has COVID symptoms per the CDC guidelines or tests positive, will not be allowed onsite consistent with and in compliance with local laws and regulations. Individuals will also need to follow CDC guidelines with respect to travel, mask wearing, and getting tested. Individuals should contact their health care provider and follow their instructions, if different than the CDC guidelines. Unless advised otherwise by a health care provider, health department official, or site occupational medical official, a person with suspected or confirmed COVID-19 may return to work in accordance with the CDC guidelines.

Any individual who has been exposed to someone who has COVID-19 or has been exposed to someone who tested positive does not need to quarantine but must follow the [CDC guidelines for exposure](#). If the exposure is potentially work-related, an individual must follow the site guidelines for reporting COVID-19 cases and/or work-related accidents, injuries, and illnesses. On-site testing may be available.

### ***Leave Related to Close Contacts, Isolation, and Travel***

The Safer Federal Workforce Task Force has issued extensive leave guidance related to close contacts, isolation, and travel that can be found at [Leave | Safer Federal Workforce](#).

In all situations, employees who are eligible to telework and are subject to CDC isolation requirements will be required to take leave or telework for the duration of the CDC isolation period before they are allowed to return to the workplace, as well as follow any applicable testing guidance. BSA employees who are not telework eligible must work with their management on an appropriate work status for the duration of the CDC isolation period to mitigate impacts to the mission of their office to the greatest extent possible; otherwise, WSL is provided. Employees are reminded that making a false statement to BNL regarding close contact, quarantine or isolation matters could result in disciplinary action, up to and including removal from service.

If an employee is subject to CDC isolation and the employee is unable to telework because they are too sick to telework, or the employee is ineligible for telework and is sick, weather and safety leave cannot be used. Employees request may use sick leave or may also request accrued annual leave and other forms of paid or unpaid leave in this situation as appropriate.

### ***Confidentiality***

BNL medical and support personnel involved in the process of case identification, contact tracing and all required reporting of cases and contacts take care to assure the confidentiality of cases

and of their medical information. The nursing and medical staff of the OMC take the lead in this process. In identifying and interviewing contacts, the name of the case is not identified except where the case has given their express permission to do so when needed as an aid in determining who is a case. Records of staff's test results become a part of their confidential health record. In notifying building occupants, departments, or the workforce in general of the occurrence of a case, care is taken not to divulge any details that would serve to identify an individual.

Identifiable case information is transmitted to BNL's local health department, the Suffolk County Department of Health Services (SCDHS), as per public health regulations to facilitate contact tracing and assurance of isolation and quarantine. Case information is transmitted directly via secure fax from OMC medical personnel to public health personnel at the SCDHS's Communicable Diseases unit.

As required, cases are reported to DOE HQ's COVID-19 tracking unit in de-identified fashion through a secure portal to the eDARs database.

## **Workplace Operations**

### ***Physical Distancing***

In accordance with CDCs guidance, and consistent with guidance from the Safer Federal Workforce Task Force, BSA staff, Federal employees, contractors, guests/users, and visitors entering or working at BNL are no longer required to maintain a physical distance of at least six feet. Floor markings, one-way walkways, reconfiguration of workspaces or office assignments, and other mitigation strategies may continue to be implemented to minimize interactions. In addition, consistent with Safer Federal Workforce Task Force guidance, when Community Levels are at MEDIUM or HIGH, the digital sign at the laboratory entrance will be used to encourage individuals, regardless of vaccination status, to consider physically distancing themselves from others and avoiding crowding in indoor common areas, meeting rooms, and high-risk settings while onsite. BSA will continue to use the Monday Memo, or other communication methods, to communicate current controls.

### ***Environmental Cleaning***

BNL Custodial Staff performs routine cleaning of common spaces in occupied buildings in accordance with CDC guidelines. This includes common/high use/high touch spaces such as kitchens, rest rooms, door handles, lobbies, stairwells, etc. In addition, all staff are encouraged to performed additional cleaning of common areas between custodial visits. Staff are also expected to regularly clean their office spaces, tools, vehicles, equipment, and personal property used on site. Cleaning supplies and protective equipment (e.g., wipes, gloves, and EPA-approved disinfectants) are made available to all staff. Guidance documents for proper use of cleaning/disinfection products are made available to all staff.

In response to a suspected or confirmed COVID-19 case on-site, Custodial staff work with the OMC, Line Management, and Facility Management to determine cleaning/disinfection needs. In accordance with CDC and General Services Administration guidelines, if a person who has been sick or tested positive for COVID-19 has been in a facility within the last 24 hours, the spaces

occupied by that person should be cleaned and disinfected. If more than 24 hours has passed since the person has been in the space, cleaning is sufficient. If more than three days have passed since the person was in the space, no additional cleaning is necessary. Judgement should be used in identifying the appropriate scope of the cleaning and in cleaning industrial and radiological work areas. Each case is evaluated separately for operational impact, access concerns, equipment type, and health and safety concerns. The appropriate cleaning/disinfection processes and procedures are then initiated.

### ***Hygiene***

Wall-mounted hand sanitizer stations have been placed throughout the site in the high traffic common areas (e.g., main entrances, lobbies) of occupied buildings. In addition, portable hand sanitizers (e.g., hand pumps, travel-sized bottles) have been placed throughout workspaces and made available to all staff. All provided hand sanitizer is FDA-approved, with at least 60 percent ethanol.

Personnel are encouraged to wash their hands with soap and water or use hand sanitizer or alcohol-based hand rubs frequently. Signs reinforcing the importance of hygiene have been posted in buildings/building entrances throughout the site.

Staff are also required to clean shared tools, vehicles, equipment, workspaces, and common work surfaces (e.g., computers, tables, desks, workbenches, etc.). Cleaning supplies and protective equipment (e.g., wipes, gloves, and EPA-approved disinfectants) are made available to all staff. Guidance documents for proper use of cleaning/disinfection products are made available to all staff.

### ***Ventilation and Air Filtration***

To the maximum extent feasible, and with consideration of current guidance from the CDC, indoor ventilation will be optimized to increase the proportion of outdoor ventilation, improve filtration, and reduce or eliminate recirculation. Where technically practicable, and depending on the availability of funds, continued action will be taken to improve engineering controls such as improving Minimum Efficiency Reporting Value (MERV) filter efficiency ratings and sealing of filters. Space heaters, desk fans and other devices that provide air movement inside a space are to be eliminated to the extent practicable. If needed, work should be relocated to room/buildings with better ventilation characteristics.

### ***Guests, Users, and Visitors***

The BNL digital sign at the laboratory entrance will be used to notify visitors of the current mask requirements. In areas of HIGH Community Levels, all visitors must wear masks when in BNL facilities.

### ***Meetings, Events, and Conferences***

Regardless of the Community Level, no approval is required for in-person meetings, conferences, or events that will be attended by more than 50 participants. In-person attendees in areas of HIGH Community Levels must wear a high-quality mask in public indoor settings. Regardless of

Community Levels, vaccination information or proof of negative COVID-19 tests for meeting attendees is not required nor requested.

### ***Elevators***

Assessments will continue to be performed to determine the safe occupancy level of elevators to ensure social distancing, and signage detailing the requirements will be posted near the entrances. The use of stairs by those who are physically able is strongly encouraged.

Our current custodial program includes regular cleaning and disinfecting of elevator touch points daily or on a modified building service schedule based on occupancy, or lack thereof. This includes cleaning of brightwork, lass, and fingerprints inside and out. Additional cleaning utilizing electrostatic spraying equipment is carried out on an as needed basis.

### ***Shared Spaces***

Assessments will continue to be performed to determine the safe occupancy level of shared spaces such as elevators, conference rooms, auditoriums, and cafeterias and the requirements will be posted near the entrances. Other visual markers will be installed to promote physical distancing within common spaces, and furniture should be removed.

### ***Special Considerations for Summer Camp***

The BERA Summer Recreation Camp will be held onsite in FY23 and will fall under the requirements of this Plan. The following principles will be followed:

- Camp counselors and lifeguards will be a mix of full time BERA staff and term recreational staff.
- To the extent possible, activities will be steered outdoors.
- Should a child declare themselves to not feel well, or exhibit COVID symptoms, camp staff will immediately separate the child from others and contact the parent for pickup.
- Should a child test positive, BSA will follow the protocols used by the local area school districts.
  - Since contact tracing in this type of environment is difficult, all parents of campers will be notified when a positive case exists. The parents will be given instructions on monitoring for symptoms and not to attend camp when exhibiting symptoms.

BSA will monitor the camp program and will implement additional controls as necessary.