

# COVID-19 SITE PROGRAM CHECKLIST

NAME: \_\_\_\_\_

DATE: \_\_\_\_\_

COMPANY: \_\_\_\_\_

TIME: \_\_\_\_\_

LOCATION: \_\_\_\_\_

## COVID-19 COORDINATOR

YES    NO    N/A

Has a COVID-19 Coordinator been selected for each worksite?

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List name(s) of Pandemic Safety Officer:

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## PROCESS & PROCEDURES

YES    NO    N/A

Have employees been given a copy of the COVID-19 Program?

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Have employees been briefed on the workplace controls that are in place?

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Are employees aware of the symptoms of COVID-19?

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Have employees been instructed to stay home if they are sick?

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## SELF CERTIFICATION

YES    NO    N/A

Is there a system in place for all employees and visitors to self-certify that they do not have COVID-19 symptoms?

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Is there a system in place to check all employees and employee's temperature as they enter the building (if required)?

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Is there a system in place to inform employees who may have been potentially exposed to COVID-19 while maintaining confidentiality?

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## SANITATION & HYGIENE

YES    NO    N/A

Has routine cleaning been performed on all frequently touched surfaces (workstations, telephones, handrails, doorknobs, etc.)?

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Have specific cleaning procedures been developed to prevent damage to equipment?

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Are EPA-approved products being used for disinfectant?

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Are disposable wipes provided for employee use on commonly used surfaces?

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Are doors propped open when possible to avoid repeated contact?

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Are employees instructed to wipe down the interior grab bars, steering wheel, control knobs with disinfectant wipes prior to use and wash their hands after using equipment?

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# COVID-19 SITE PROGRAM CHECKLIST

## SANITATION & HYGIENE CONT.

List company specific areas that need to be wiped down regularly or before/after each use:

### PERSONAL HYGIENE

YES    NO    N/A

Are tissues and no-touch disposal receptacles provided to employees?

Is soap and water provided near every bathroom and sink?

Is there alcohol based sanitizer that is at least 60% alcohol provided and placed in multiple convenient places?

Are employees instructed to wash their hands once per hour?

Are posters hung to encourage hand hygiene?

### SOCIAL DISTANCING

YES    NO    N/A

For interior work, are occupant levels determined and enforced?  
(2,000 ft<sup>2</sup> = 4 workers plus 1 worker for each 500 ft.<sup>2</sup>) None for exterior.

Number of workers allowed inside for this project = \_\_\_\_\_

Is the work schedule modified to promote social distancing including (start/stop times, break times, and lunch times)?

Have large gathering areas have been eliminated?

Are employees encouraged to drive to the workplace in a single occupant vehicle?

Are meetings limited to 10 people or held via conference calls?

### PERSONAL PROTECTIVE EQUIPMENT (PPE)

YES    NO    N/A

Are all employees are wearing face masks while in the workplace?

Are there adequate supplies of face masks or respirators?

Are employees instructed not to share face masks or respirators?

Are employees washing hands thoroughly after removing Personal Protective Equipment and prior to leaving the workplace?

SIGNATURE: \_\_\_\_\_