



# Novel Coronavirus (COVID-19) and Our Essential Industry

Managing and Sustaining your Organization amidst the COVID-19 Pandemic

Report No. 1, March 23<sup>rd</sup> 2020

## ***Preface***

The current landscape across the globe in the midst of the COVID-19 Pandemic has left nearly every individual, business and community in an unprecedented position, torn between the need for extreme measures to slow the spread of COVID-19 and the need to continue providing for the critical needs of their families, customers, and community. Our industry is facing a constantly evolving struggle as many lines of service are seeing tremendous downturn. The buildings and structures that typically require cleaning, restoration and remediation services are either empty (e.g., non-essential businesses that have been shut down by local government), or they are now occupied full time or are essential businesses (e.g., homes, health care facilities, temporary living spaces) as our communities go into self-isolation and are mandated to exercise social distancing. Public perception further accelerates our loss in demand as customers do not want services in their homes in fear of exposure to COVID-19.

The Institute of Inspection, Cleaning and Restoration Certification (IICRC), the Restoration Industry Association (RIA), and the contributors to this document are working to help the members of our industry provide essential services in this rapidly evolving and ever-changing landscape, without interruption. We are advocating for the awareness necessary with federal, provincial, and local governments to help them understand the essential nature of your business<sup>1</sup>. This document has been written with the understanding that your emergency services are indeed an essential service, and to help you manage the concerns, fears and heightened awareness for infection control as you continue to provide your essential services to your customers and community.

*Note that the term COVID-19 is used throughout this document to refer to the current, ongoing pandemic, an outbreak of SARS-CoV-2, the virus responsible for the COVID-19 disease.*

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<sup>1</sup> [https://www.restorationindustry.org/resource/resmgr/RIA-IICRC\\_Joint\\_Letter-Exec.docx](https://www.restorationindustry.org/resource/resmgr/RIA-IICRC_Joint_Letter-Exec.docx)

**Abstract**

Although COVID-19 creates significant risk and complication, the demand for emergency service in the Restoration, Remediation and Cleaning industry will not stop. Your teams have been called upon to clean up the aftermath of countless disasters, from small to large, at every hour of the day and every day of the year. Understanding the facts related to the risks posed by COVID-19 to you and your staff is critical as you work to sustain your business operations and serve the public during this pandemic. The suggestions in this document have been prepared in collaboration with the Institute of Inspection, Cleaning and Restoration Certification (IICRC) and the Restoration Industry Association (RIA). It is intended to provide you and your employees with a summary of the information available at the time of this publishing.

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***ATTENTION:*** This document is not a standard, and is not intended to replace the guidance, orders, regulations and laws available from Federal, State, Provincial or other jurisdictions. Please refer to the Helpful Links and Resources section at the end of this document for a list of some of these authorities. All information and suggestions follow basic concepts described by the CDC.

*IICRC acknowledges the indisputable fact that CDC is the first and best source for instructions, methods, and determination of risk. It is also important to note that this document is specific to the implementation of processes addressing the risk of exposure to and spread of COVID-19, and thus the assessment of risk referred to is specific to the hazard of exposure and spread of COVID-19. Be aware that other hazards may exist and still be present, including the group known as P.A.L.M.S. (Pandemic/PCBs, Asbestos, Lead/Legionella, Mold/Metals, Silica/Safety/Sustainability). Because other hazards exist, a proper and complete hazard assessment is still a vital part of your overall safety and health processes. However, the assessment of risks other than COVID-19 is beyond the scope of this document.*

*The organizations and contributors that participated in developing this document make no representations, warranties or guarantees as to the accuracy or completeness of any information contained herein, or that following the suggestions in this document will result in compliance with any applicable laws, rules or regulations or produce satisfactory or complete performance in relation to the particular project to which the reader applies these suggestions. Given the rapidly developing nature of the COVID-19 pandemic, such information is rapidly changing. Readers are urged to stay current with developing information as it becomes available.*

***ATTENTION:*** This document will be continually reviewed throughout this pandemic, and new information will be added as frequently as practical. Please refer to [www.iicrc.org](http://www.iicrc.org) and [www.restorationindustry.org](http://www.restorationindustry.org) for updates to this document, and continue to monitor the information available from your federal, provincial, state and local health departments, agencies and other regulatory bodies.

## Summary of Suggested Procedures

This is a list of the procedures that are discussed in greater detail in this document. Refer to this abbreviated list for an overview of these suggestions. Before employing these suggestions, read through the full discussion and references provided for each in the balance of this document. These abbreviated suggestions contain further information, processes and considerations later in the document.

### **Suggestions for Protecting Workers**

#### *Prioritize your Work*

1. Minimize field trips to emergency services and critical workflow requests
2. Prioritize projects and services to those where response time is essential
3. Consider which projects and services have the greatest potential to serve/protect the community
4. If called upon for disinfection of COVID-19, refer to the document [HERE](#).

#### *Perform a Risk Assessment on Staff, Roles and Responsibilities*

1. Move administrative staff to remote, work from home settings
2. Assign essential work that requires on site activity to those that are not in high risk groups
3. Provide training on guidance for personal and public safety to staff
4. COVID-19 affected staff should stay home, contact their health provider
5. Identify a protocol for how you will inform/handle if team member has COVID-19 infection
6. Follow recovery guidance from CDC for recovered COVID-19 individuals.
7. Prepare your work environment in accordance with OSHA and CDC for essential business

#### *Protect your Field Staff and the Public at all times, and for any service or emergency response:*

1. Ask for information regarding occupant exposure to COVID-19 prior to initiating work
2. Ensure field staff are equipped with adequate cleaning, hand washing and disinfection resources
3. Train employees on proper use and selection of personal protection equipment (PPE)
4. Use at minimum: disposable N95 respirators, disposable gloves, eye or face protection
5. Wear disposable gloves that are not likely to tear or become compromised given the task
6. Evaluate possible PPE substitutions carefully to ensure a similar level of protection

#### *Supplemental protection, depending upon the job task:*

1. Follow CDC guidance for the specific facility type
2. Wear NIOSH approved respiratory protection and other PPE as needed
3. Wear face protection if needed to avoid touching the face
4. Apply disinfectants to touch points in the service vehicles at the beginning and end of each job
5. Apply disinfectants to tools and instruments used on the job site before removing gloves
6. When leaving the work area, implement appropriate personal decontamination
7. To the extent possible, obtain signatures on documents electronically to avoid contact.

## Suggestions for Protecting Workers

The Centers for Disease Control (CDC), the US Occupational Safety and Health Administration (OSHA), the World Health Organization (WHO) and other authorities provide up to date recommendations and procedures to minimize the risk of contracting and spreading COVID-19. Keep up to date as the information evolves, and experts gain a better understanding how COVID-19 is spread. Use official resources such as the World Health Organization at [www.WHO.int](http://www.WHO.int) and the Centers for Disease Control at [www.CDC.gov](http://www.CDC.gov).

### Prioritize your Work:

To minimize the exposure of your work force, the first line of defense is to adopt social distancing behavior. This means reducing the number of times your organization requires employees to be in contact with one another and the customers you serve. Employers should consider the following:

1. Minimize field trips to emergency services and critical workflow required visits (i.e., postpone all non-essential or non-emergency work).
2. Prioritize projects and services to those where response time is essential to the successful project outcome.
3. Consider which projects and services have the greatest potential to serve and protect the greatest number of individuals in your community.
4. If called upon for disinfection of COVID-19, read and understand the currently available resources. Refer to the *Best Practices for Decontamination of Coronavirus* section later in this document for a list of currently available resources.

### Perform a Risk Assessment on Staff, Roles and Responsibilities on the Project

The goal of risk assessment is to identify and mitigate the potential risks of exposure of your staff to COVID-19. The actions needed will vary depending upon the job tasks associated with their essential work. An assessment of risk is a critical part of managing potential exposure. Risks should be prioritized, and mitigation actions based on that prioritization. The assessment should follow the workflow, from beginning of the day to end of day, from start of task to end of task. And, it is important to be dynamic and fluid and adjust to changes in personnel, situation, and advisories that will come from public health and government officials.

1. Move administrative staff to remote, work from home settings. Provide guidance and resources such as available from the Centers for Disease Control and World Health Organization for how to effectively manage home isolation and working from home. Consider that most of these individuals are not accustomed to working at home and will require guidance in establishing a homework site. Begin each day with a team meeting to ensure productive interaction and communication occurs, and provide a written work from home or telecommunication policy for your employees.
2. Apply administrative controls to reduce potential for exposure. This will include assigning essential work that requires on site activity to those that are not in high risk groups.
3. Employers shall provide training on personal and public safety to those that will be called upon to work with others, and should include those individuals working in your physical work location (e.g., warehouses, shops, offices, supply areas)<sup>2</sup>. This may include staggered work reporting times and social distancing at worksites (e.g., maintaining a distance of at least 6 feet between individuals).

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<sup>2</sup> <https://www.osha.gov/Publications/OSHA3990.pdf>

Apply social distancing even in work vehicles, either by spacing, wearing personal protective equipment (at minimum respirator and gloves) or avoid carpooling.

4. If any of your personnel or their family members are known or suspected to be infected with COVID-19, or are showing symptoms identified by the World Health Organization or Centers for Disease Control that are common to COVID-19 infection, they should stay home, contact their health provider, inform their employer, and should not be working or interacting with your staff or the public.
5. Identify a protocol for how you will inform team members of a positive identification of COVID-19 amongst your staff. Also, provide for measures that should be taken to mitigate spread of infection amongst staff in the event of positive infection. All protocols should be written to achieve the goal of preventing your staff from the need for self-isolation, thereby allowing you to continue your business operations.
6. Individuals that have recovered from COVID-19 should practice self-quarantine as recommended by the CDC before returning to work<sup>3</sup>. This instruction from the CDC is likely to change as new information is obtained regarding the recovery from COVID-19. It is therefore imperative that you remain current on the guidance on this topic.
7. Prepare your work environment in accordance with OSHA and CDC guidelines for any essential staff that must continue to physically appear at your place of business<sup>4</sup>.

### Protect your Field Staff and the Public

For essential work activities that require staff to perform duties in the field, more specific controls and training should be deployed to minimize risk.

A full, site specific hazard assessment is still a critical part of your safety and health program and required by law<sup>5</sup>. The hazard assessment shall be certified by the employer's designated, qualified and competent staff member<sup>6</sup>. The suggested information, personal protection and methods below are in addition to the identification, evaluation, prevention and control of other job site hazards. For the purpose of this document, the risk assessment being discussed are the risks associated with COVID-19 exposure.

An important requirement being implemented by many contractors is ensuring Training in Infectious Disease Occupational Control Methods / Infectious Disease Control in accordance with OSHA 29 CFR 1910.1030 and Protective Equipment Level "C" and "D". The OSHA HAZWOPER may be a requirement for individuals involved in many of the services provided in a national state of emergency (29 CFR 1910.120).

At all times, and for any service or emergency response:

1. Ask for information regarding occupant exposure to COVID-19 prior to initiating work. This can be accomplished during initial contact (e.g., phone call) and updated upon arrival. *Note: public health officials are now beginning to recommend that all individuals are treated as potential carriers of COVID-19.*
2. Ensure field staff are equipped with adequate cleaning and disinfection resources. Active field staff should wash hands frequently with soap and water, and for a minimum of 20 seconds. Use disposable disinfectant wipes when hand washing is not possible. If necessary, use hand sanitizer

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<sup>3</sup> <https://www.cdc.gov/coronavirus/2019-ncov/hcp/disposition-in-home-patients.html>

<sup>4</sup> <https://www.osha.gov/Publications/OSHA3990.pdf>

<sup>5</sup> <https://www.osha.gov/shpguidelines/hazard-identification.html>

<sup>6</sup> <https://www.osha.gov/laws-regs/regulations/standardnumber/1910/1910.132>

with a minimum of 60% alcohol. Designate a specific location at the job site for hand washing, and ensure the designated location is properly cleaned before and after daily work activities.

3. Train employees on proper use and selection of personal protection equipment (PPE)<sup>7</sup> before employees start a project or task they are unfamiliar with. Many employees will be asked or required to utilize PPE that are not familiar with its proper use, or the intent and purpose of the PPE in regards to protection from COVID-19. One mistake can be dangerous. For example, employees should implement hand washing procedures each time disposable gloves are removed, and training should include demonstration for how to properly turn gloves inside out during removal. Written instruction alone will not be sufficient.
4. Field staff should use disposable N95 respirators, disposable gloves (e.g., latex, nitrile, vinyl) and eye protection (e.g., goggles, face mask). Additional PPE based on task and location may be necessary.
5. Wear disposable gloves that are not likely to tear or become compromised given the task. Consider double gloving to increase durability and reliability of protection, or wearing puncture resistant gloves (e.g., leather, nylon) as a top layer when needed. Clean gloves frequently while working with disinfecting wipes. Discard gloves and wash hands after cleaning and disinfecting tools and equipment used at the job site, but before entering the work vehicle.
6. The availability of many traditional PPE items is significantly limited, and many jurisdictions are mandating that any available supplies be reserved for the healthcare and first responder industries. When faced with limitations for acquiring traditional PPE inventory, other items capable of providing the intended protection may be necessary as a substitution. Evaluate possible substitutions carefully to ensure it will provide a similar level of protection, and consider how you will manage existing inventory to maximize its use in light of these limitations.

Note that according to OSHA, “Workers required to use PPE must be trained. This training includes when to use PPE; what PPE is necessary; how to properly don (put on), use, and doff (take off) PPE; how to properly dispose of or disinfect, inspect for damage, and maintain PPE; and the limitations of PPE. Applicable standards include the PPE ([29 CFR 1910.132](#)), Eye and Face Protection ([29 CFR 1910.133](#)), Hand Protection ([29 CFR 1910.138](#)), and Respiratory Protection ([29 CFR 1910.134](#)) standards. The OSHA website offers a variety of [training videos](#) on respiratory protection<sup>8</sup>.”

Supplemental protection, depending upon the job task and your assessment of risk:

1. Follow CDC guidance for the specific facility type for each project, such as schools, churches, daycares, business offices<sup>11</sup>.
2. Wear NIOSH approved respiratory protection and other personal protection equipment (PPE) depending upon the results of your risk assessment for the job and the tasks performed using the guidance provided by OSHA. Provide appropriate training on the use and limitations of respiratory protection and your company’s written respiratory protection plan and required fit testing. Ensure that workers and temporary workers are following your updated, written hazardous communication program<sup>12</sup>. HCS 2012

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<sup>7</sup> <https://www.osha.gov/laws-regs/regulations/standardnumber/1910/1910.132>

<sup>8</sup> <https://www.osha.gov/SLTC/covid-19/controlprevention.html>

<sup>11</sup> <https://www.cdc.gov/coronavirus/2019-ncov/community/>

<sup>12</sup> [https://www.osha.gov/FedReg\\_oshapdf/FED20120326.pdf](https://www.osha.gov/FedReg_oshapdf/FED20120326.pdf)

3. Evidence suggests that transmission of COVID-19 may also occur through mucous membranes (e.g., eyes, nose, mouth). Touching the face should be avoided when possible. PPE such as respiratory protection and eye protection can help prevent touching the face.
4. Apply disinfectants touch points in the service vehicles at the beginning and end of each job using an EPA approved product on List N<sup>13</sup>, in accordance with the label instructions.
5. Apply disinfectants to tools and instruments used on the job site before removing disposable gloves using an EPA approved product on List N, in accordance with label instructions.
6. When leaving the work area, implement appropriate personal decontamination including removal of PPE, washing hands, etc.
7. To the extent possible, obtain signatures on documents electronically to avoid contact. If using physical forms, use appropriate disinfectants on pens and documents.

## Best Practices for Disinfection of COVID-19

If your organization is being called upon to disinfect spaces or structures that are suspected to have been contaminated with COVID-19, it is paramount that you are fully aware of the resources available, the risks associated with infection, and the business related risks you should consider before accepting the project. Organizations and institutions that are actively providing guidance include:

- United States Centers for Disease Control (CDC)
- United States Environmental Protection Agency (EPA)
- United States Occupational Safety and Health Administration (OSHA)
- Health Canada (and appropriate Provincial Agencies)
- World Health Organization (WHO)
- Institute of Inspection, Cleaning and Restoration Certification (IICRC)
- Restoration Industry Association (RIA)
- American Industrial Hygiene Association (AIHA)
- American Society of Safety Professionals (ASSP)

The Restoration Industry Association, in partnership with the Institute of Inspection, Cleaning and Restoration Certification and several industry stakeholders, has recently produced an article on the topic, titled *Preliminary Report for Restoration Contractors Assisting Clients with COVID-19 Concerns*, and you can find a copy of the document [\[here\]](#). The jointly written publication provides a summary of the guidance from many of the organizations listed above, and can serve as a base line for disinfection services.

When working with COVID-19 infected job sites, It is important to train all workers on the true risks associated with exposure, to include cross contamination that can occur if measures are not taken to prevent it. The steps necessary will vary depending upon the tasks performed by the individual, but may include PPE removal and disposal techniques, shoe protection protocols, etc.

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<sup>13</sup> <https://www.epa.gov/pesticide-registration/list-n-disinfectants-use-against-sars-cov-2>



## Acknowledgements

### Primary Authors

The writing, peer review and consensus process associated with this document was coordinated by **Brandon Burton**, IICRC Standards Chairman, Next Gear Solutions VP of Technical Application, and the principal of BIEC Consulting. The primary authors each contributed directly to specific sections of this document, in addition to providing overall review. These authors include: **Scott Armour**, MS Health Science, Armour Applied Science, IICRC S520 Standard Vice Chair; **James Lee Senter**, Dryit.ca CEO, IICRC Standards Vice Chairman; **Graham Dick**, Genesis Restoration CEO, IICRC S410 Infection Control Consensus Body Chairman; **Mark Drozdov**, IICRC Board of Directors, Vice Chair IICRC S410 Infection Control Consensus Body.

### Peer Reviewers and Contributors

This document is under a continuous peer review, and will be updated regularly. Updated editions will be distributed through the IICRC and the RIA. Contributions and peer review in this first edition were provided by the following individuals and organizations:

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## Helpful Links and Resources

Center for Disease Control (CDC):

[www.cdc.gov](http://www.cdc.gov)

CDC Guidance for Specific Facility Types (e.g., Schools, Churches, Daycares, Business Offices):

<https://www.cdc.gov/coronavirus/2019-ncov/community/>

World Health Organization:

[www.who.int](http://www.who.int)

John Hopkins University Coronavirus Resource Center:

<https://coronavirus.jhu.edu/>

OSHA guidance on infection and exposure control:

<https://www.osha.gov/SLTC/covid-19/controlprevention.html>

OSHA, *Guidance on Preparing Workplaces for COVID-19*

<https://www.osha.gov/Publications/OSHA3990.pdf>

US Department of Health and Human Services, *Coronavirus Disease 2019 Risk Assessment and Public Health Management Decision Making*:

<https://www.cdc.gov/coronavirus/2019-ncov/downloads/public-health-management-decision-making.pdf>

Government of Canada, *Coronavirus disease (COVID-19): Outbreak Update*

<https://www.canada.ca/en/public-health/services/diseases/2019-novel-coronavirus-infection.html>

Australian Government Department of Health, *Coronavirus (COVID-19) Resources*

<https://www.health.gov.au/resources/collections/novel-coronavirus-2019-ncov-resources>

UK Government, *Coronavirus (COVID-19): Guidance*

<https://www.gov.uk/government/collections/coronavirus-covid-19-list-of-guidance>