



## **COVID-19 Operational Guidance for Food and Meat Processing Facilities and Workplaces with Assembly Lines Updated June 4, 2020**

### **1. Purpose**

This guidance document provides parameters for food and meat processing facilities and manufacturing facilities (collectively, “facilities”) to protect their workers and reduce the transmission of COVID-19.<sup>1</sup>

### **2. Background**

COVID-19 is a respiratory illness that can be spread from person-to-person. The virus is transmitted by respiratory droplets when someone coughs, sneezes, or speaks near another person. A person who is within 6 feet of someone with COVID-19 can become infected. A person who is not having symptoms can transmit COVID-19. Employers, including manufacturing and food and meat processing facilities, are responsible for maintaining a safe workplace and healthy work environment for their workers and, to that end, must take necessary measures to protect their workers.

### **3. Role and Responsibility of the Department of Public Health and Local Health Departments**

Pursuant to the Department of Public Health Act, 20 ILCS 2305/2, and the Illinois Control of Communicable Diseases Code, 77 Ill. Adm. Code 690, the Illinois Department of Public Health (IDPH) and certified local health departments have the authority and responsibility to investigate and control infectious disease outbreaks, including the COVID-19 pandemic.

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<sup>1</sup> For purposes of this guidance document, the term “workers” should be understood to include not only a facility’s employees, but also any temporary laborers as defined by the Illinois Day and Temporary Labor Services Act, 820 ILCS 175/5 that are assigned to the facility.

- The Centers for Disease Control and Prevention (CDC) has issued general [guidance](#) to employers on reducing the risk of transmission as well as [guidance](#) to Meat and Poultry Processing Workers and Employers.
- IDPH and local health departments may provide specific suggestions on how to reduce risk to workers from acquiring COVID-19, including holding teleconferences to review the situation at the facility and providing suggestions for risk reduction.
- IDPH and local health departments can assist businesses with issues relating to worker access to COVID-19 testing, when necessary.
- IDPH and local health departments may conduct onsite visits to identify any areas in need of improvement in a facility's response to COVID-19.
- Local health departments are responsible for interviewing COVID-19 positive workers and identifying close contacts of that worker, with assistance from the employer for close contacts within the workplace.
- Per the Illinois Control of Communicable Disease Code, 77 Ill. Adm. Code 690, facilities are required to respond to and collaborate with IDPH and their local health department. This includes allowing visits to the facility for an assessment and responding to requests for information including, but not limited to:
  - The employer's current practices to reduce risk to workers;
  - A complete list of workers;
  - A complete list of workers who have called off sick, broken down by date; and
  - Reports within 24 hours of any worker-related COVID-19 cases, including deaths from COVID-19, that the facility has identified, to the local health department.

#### **4. COVID-19 Infection Control Plan for the Facility**

Facilities should immediately develop and implement an infection control plan to address necessary strategies to protect workers and all other individuals who come into the plant while maintaining continuity of operations. Facilities should consider using the Infection Prevention and Control Assessment Tool for Processing Facilities During the COVID-19 Pandemic (attached as Exhibit A) and the COVID-19 Health and Safety Checklist for Processing Facilities (attached as Exhibit B) before any cases occur to identify areas that may need increased attention. The facility may want to consider hiring a consultant to develop a suitable plan. The infection control plan should include the following topics.

## **A. Screening Workers**

Facilities should screen all workers as follows:

- Screen and monitor, workers including fever checks and symptom checks.
  - Perform pre- and post-shift monitoring.
  - Do not rely on fever checks only. A significant number of the confirmed COVID-19 cases in Illinois do not report a fever.
  - Ask workers about symptoms but do not rely only on worker self-reporting. COVID-19 symptoms may include the following: fever (100.4° or above), cough, new shortness of breath, sore throat, new loss of sense of taste or smell.
  - Ask workers if they have family members who have tested positive for COVID-19 or are otherwise experiencing symptoms of COVID-19.
- Facilities should ask workers to complete IDPH's [recommended self-monitoring tool](#).
- Facilities should set up a location outside to perform symptom screening in a manner that allows for social distancing and proper hygiene.
- Facilities must not allow workers who are currently evidencing any COVID-19 symptoms to enter the workplace until they have self-isolated at home for 10 days plus 3 days without fever and are also feeling well.
- Facilities should remind workers to immediately report to their supervisor if they get sick during a shift.

Screeners should wear appropriate personal protective equipment (PPE). There should be at least 6 feet between the screener and the worker being screened. If the screener needs to be within 6 feet of a worker, the screener should wear gloves, a gown, face shield, and a face mask. Facilities should ensure protocols for screeners protect them from becoming infected. Consultation with an occupational health group is encouraged.

## **B. Case Identification and Contact Tracing**

As soon as a worker has been diagnosed with COVID-19, the facility should perform the following actions:

- The worker's workstation and tools should be thoroughly cleaned and disinfected.
- The worker should isolate at home for 10 days plus 3 days fever free and feeling well and the facility should not require a note from a health care provider to clear the worker's return to work.
- The facility and the local health department should work together to conduct contact tracing within the workplace.

Although CDC [guidance](#) provides that workers in critical infrastructure jobs may be permitted to work following a potential exposure to COVID-19, provided they remain asymptomatic, have not had a positive test result, and additional precautions are implemented, facilities must understand the following:

- The worker in close contact with an infected person can transmit the virus to other people for up to 48 hours prior to developing symptoms. A person who never develops symptoms can also transmit the virus.
  - Workers in close contact with coworkers who test positive for COVID-19 should be carefully monitored for symptoms and be sent home immediately if symptoms start while they are at work.
  - The facility should follow the health and safety measures provided in this guidance to reduce the risk of transmission.
- The facility may decide that it is best that workers in close contact with coworkers who test positive for COVID-19 stay home to self-quarantine for 14 days.

### **C. Testing for COVID-19**

Testing for COVID-19 is an essential strategy in the public health response. Testing will:

- Provide data regarding the occurrence of COVID-19 among workers; and
- Allow facility managers to identify which workers have tested positive.

IDPH and local health departments can assist with increasing testing capacity and with identifying methods for testing symptomatic workers, such as setting up tents outside of the facility and working with local healthcare providers or requesting assistance from IDPH in linking facilities to companies that can provide testing for the facility. If workers sign appropriate release forms, then laboratory results can be provided to both the local health department and the employer.

At this time, the type of COVID-19 test recommended by the CDC and IDPH is a molecular test (or polymerase chain reaction or “PCR” test), in which a nasal and throat swab is taken and tested for COVID-19.

- A positive test means that the person is a confirmed case and should remain isolated as directed by the local health department.
- A negative test means that the worker was not infected at the time the sample was collected. However, that does not mean the person will not become sick. The test result only means the person did not have COVID-19 at the time of testing.

Serologic testing—which involves testing blood for the presence of COVID-19 antibodies—in the future may help establish whether someone who has been infected has developed protective immunity against the virus.

#### **D. Health and Safety Committee**

Facilities should convene a health and safety committee comprised of labor-management representatives to discuss recommendations, workplace protections and rights, and actions for implementation to support infection control procedures. Facilities should assign a qualified workplace coordinator to lead their COVID-19 prevention response. The following are considerations for such a committee:

- Develop policies that encourage sick workers to stay at home without fear of reprisals and communicate such policies to workers.
- Implement interim leave policies to accommodate workers who are sick.
- Adopt a policy that requires workers who test positive and are symptomatic to stay home for 10 days plus 3 days without fever and feeling well. If a worker tests positive and is asymptomatic they should stay home for 10 days after the positive sample was tested. Refer to the [CDC's Interim Guidance for Implementing Safety Practices for Critical Infrastructure Workers Who May Have Had Exposure to a Person with Suspected or Confirmed COVID-19](#).
- Do not provide incentives for work attendance or penalize workers for taking time off for testing for COVID-19 or illness related to COVID-19.
- Designate a safety team, with designated team leaders, who can share relevant information with workers and convey worker concerns back to management. Instruct workers on how to report symptoms. With appropriate social distancing, this team may meet with their designated workers on a daily basis. Facilities should use auditors to assess daily any compliance issues with COVID-19 procedures.
- The committee should consider the fact that workers at higher risk for serious illness include older adults and people of any age with chronic medical conditions. Policies and procedures addressing high risk workers should be made in consultation with occupational medicine and human resources professionals.

#### **E. Social Distancing and Other Administrative Controls**

Pursuant to Executive Order 2020-38, Section 5, facilities must ensure that workers are adhering to social distancing, which includes maintaining at least six feet of physical distance between individuals at all times to the greatest extent feasible, washing hands with soap and water for at least twenty seconds as frequently as possible or using hand sanitizer, covering coughs or sneezes (into the sleeve or elbow, not hands), regularly cleaning high-touch surfaces,

and not shaking hands. Maintaining six feet between workers is a critical step in reducing the risk of the spread of COVID-19, especially because individuals can transmit the virus in the 48 hours prior to the onset of symptoms.

Facilities should evaluate all areas for social distancing, including staggering access to certain areas, such as:

- Break room, meal room, and similar shared spaces
  - Consider staggering meals and breaks to decrease the number of people on break at the same time.
  - Consider using tape to mark the areas where workers may sit or stand in cafeteria to ensure compliance with social distancing.
  - Consider removing some seating from meal and break rooms to ensure workers do not sit within six feet of each other.
  - Weather permitting, consider adding picnic tables or tents outside for social distancing during breaks and meals.
  - Develop a protocol for how workers can safely store their personal protective equipment (PPE) while eating.
- Bathrooms
  - Consider making portable toilets available.
- Processing lines
  - Stagger shifts, start times, and break times as feasible to prevent congregating.
  - Reduce production line staffing to the extent feasible to minimize close worker contact. Adjust line speed to allow workers to maintain distance. Wherever it is not feasible to maintain a distance of six feet between workers in a production line, workers should be separated by barriers and be provided PPE including, at a minimum, face masks.
  - Group workers and assign those groups to the same shift with the same coworkers. This will simplify tracing of close contacts at work.
  - Operate only essential lines and shut down non-essential lines.
- Locker rooms
  - Consider assigning lockers to workers in each shift and ensuring that assigned lockers are six feet away from each other. Alternatively, consider staggering the use of the locker room to ensure workers are six feet away from each other.

- Facilities should provide cleaning supplies and allot enough time for workers to clean their assigned lockers each shift.
- Entrances and exits
  - Designate one-way entrances and exits in and out of the facility.
  - Mark distances six feet apart where workers may stand in line when waiting to clock in or out, conduct health assessments, wait for transportation, and other areas where workers normally congregate.
  - Ensure that any biometric device or other timekeeping system that requires workers to touch a common surface, such as a screen or keypad, is cleaned routinely. A touch-free process is ideal. In addition, hand sanitizer or disinfecting wipes should be located next to the timekeeping system for worker use before and after clocking in or out.
  - Provide workers with enough time to clock in and clock out to ensure that PPE is appropriately donned and doffed, lockers and equipment are thoroughly cleaned, and lines do not form.
- Tool rooms
  - Disinfect tools between use when used by multiple workers.

In addition, facilities should:

- Identify ways to physically separate workers from each other in all areas of the facility, such as the use of strip curtains or plexiglass barriers.
- Adapt workstations to minimize close contact of workers.
- If shuttle buses are used to bring workers to a work site, ensure workers observe appropriate social distancing and wear face masks on the bus and that the shuttle buses are regularly cleaned and disinfected, especially door handles, handrails, and seatbelts. The number of people in each vehicle should be limited. Persons should wash hands thoroughly before entering and immediately after exiting the vehicle.
- Use visual cues (e.g. floor markings or signs) to show 6 feet separation.
- Consult with a mechanical engineer to ensure adequate ventilation of worker areas. Refrain from using fans that blow air from one worker to another. Ensure that fans blow clean air if fans are used in the facility. Remove personal cooling fans to prevent transmission of COVID-19 while taking steps to reduce any heat related hazards.
- If there is employer-provided housing, separate COVID-19 positive workers from asymptomatic workers.

- Limit visitors to those essential to business operations and restrict where visitors can go within the facility.

## **F. Personal Protective Equipment (PPE)**

Facilities should:

- Provide workers with the necessary PPE and replace when necessary.
- Require that workers wear masks.
  - Masks should fit snugly over the nose and mouth.
  - Masks should be secured with ties or ear loops and have multiple layers of fabrics.
  - Workers should avoid touching the front of the mask and should not allow the mask to hang around the neck.
  - The mask should allow breathing without restriction.
  - Once masks become wet or contaminated, they should be replaced.
  - When masks are removed for lunch, the mask should be put on a paper towel with the exterior side down until putting the mask back on.
- Train workers on how to properly don and doff PPE to prevent contamination or the transfer of infected materials.
- Stress good hand hygiene after gloves or facial coverings are removed.
- Train workers to avoid touching their faces, including eyes, nose, and mouth until after they have washed their hands.
- Consider using face shields in addition to masks. Face shields are considered to be PPE and source control. Face shields can be attached to helmets but are not considered a substitute for eye protection. Face shields can minimize contamination of masks. Face shields need to be cleaned and disinfected after each shift and kept in a clean location. A face shield should wrap around the side of the wearer's side of the face and extend below the chin.

## **G. Cleaning, Disinfecting, and Sanitizing**

Facilities should:

- Disinfect "high touch surfaces" in production areas with products meeting the Environmental Protection Agency's criteria for use against COVID-19 and approved under the facility's sanitation standard operating procedures. High touch surfaces



include, but are not limited to, doorknobs, light switches, shared equipment, toilet handles, sink faucets, clock in/out areas, vending machines, and tools.

- Ensure handwashing stations are readily available, with access to soap, clean water, and single use paper towels for handwashing. Provide no-touch receptacles when possible.
- When handwashing stations are not available, provide alcohol-based hand sanitizers containing an alcohol content of at least 60% ethanol or 70% isopropanol.
- Monitor to ensure cleaning and disinfecting is being done routinely and that proper handwashing practices are being followed.
- Perform enhanced cleaning and disinfection after persons with suspected or confirmed COVID-19 have been in the facility.
- Develop a protocol for sanitizing hard hats, face shields, and other PPE at the end of the shift.

## **H. Education**

Facilities should provide ongoing training and education to their workers about the COVID-19 pandemic, including the transmission, symptoms, information about testing, necessary safety precautions, the steps the facility is taking to mitigate the spread of COVID-19, and anti-retaliation laws.

- The training should be consistent with CDC and IDPH guidance and should emphasize the importance of workers staying home when sick.
- The training should educate workers about where they can get tested, how to inform their employer if they test positive for COVID-19, procedures for returning to work after the 14-day self-isolation period, and benefit time available to workers for getting tested and staying home if infected.
- The training should be provided on an on-going basis to account for developments in COVID-19 guidance. It should be easy to understand, include accurate and timely information, and be available in languages appropriate to preferred language(s) spoken or read by the workers. Refer to the CDC's website for guidance materials that are available in a variety of languages.
- Employers should consider literacy issues when providing training.
- Such training can be provided via various methods, including:
  - On televisions in the workplace or via text message;
  - From team leaders;
  - On easy to understand posters with pictures about symptoms, proper handwashing, and disease transmission;
  - Videos of donning and doffing of PPE.

- The materials should include updated content to ensure workers pay attention.
- Facilities should maintain copies of all materials used for training purposes while this guidance is in effect.
- Facilities should reinforce training and best practices by posting signage in common areas.

### **I. Workers' Rights**

The Occupational Safety and Health Act of 1970 prohibits employers from retaliating against workers for raising safety or health concerns. In Illinois, workers may also raise workplace concerns with the Attorney General's Workplace Rights Bureau (844-740-5076 or [workplacerrights@atg.state.il.us](mailto:workplacerrights@atg.state.il.us)).

### **J. Voluntary Shutdown**

Facilities should consider voluntarily shutting down their operations when any of the following circumstances are present:

- Increasing COVID-19 infection rates amongst facility workers;
- An inadequate number of workers to safely perform work;
- An inability to maintain social distancing spacing requirements of at least six feet between workers; or
- An inadequate supply of PPE.

### **K. Involuntary Shutdown**

A facility that does not comply with the Department of Public Health Act, 20 ILCS 2305, and applicable regulations may pose a public health risk requiring closure by a local health department pursuant to the Control of Communicable Diseases Code. 77 Ill. Adm. Code 690.1330. The Attorney General's Office or local State's Attorney may assist the local health department in bringing an enforcement action if the facility does not comply with the closure order. See 77 Ill. Adm. Code 690.1340.

## L. References and Resources

Centers for Disease Control and Prevention, *Meat and Poultry Processing Workers and Employers*, <https://www.cdc.gov/coronavirus/2019-ncov/community/organizations/meat-poultry-processing-workers-employers.html>

Centers for Disease Control and Prevention, *Interim Guidance for Businesses and Employers to Plan and Respond to Coronavirus Disease 2019 (COVID-19)*, <https://www.cdc.gov/coronavirus/2019-ncov/community/guidance-business-response.html>

Centers for Disease Control and Prevention, *If You Are An Essential Critical Worker Who Has Been Exposed to COVID-19*, [https://www.cdc.gov/coronavirus/2019-ncov/downloads/Essential-Critical-Workers\\_Dos-and-Donts.pdf](https://www.cdc.gov/coronavirus/2019-ncov/downloads/Essential-Critical-Workers_Dos-and-Donts.pdf)

Centers for Disease Control and Prevention, *Interim Guidance for Implementing Safety Practices for Critical Infrastructure Workers Who May Have Had Exposure to a Person with Suspected or Confirmed COVID-19*, <https://www.cdc.gov/coronavirus/2019-ncov/community/critical-workers/implementing-safety-practices.html>

IDPH's Business and Organization Guidance, <https://www.dph.illinois.gov/topics-services/diseases-and-conditions/diseases-a-z-list/coronavirus/business-guidance>

*Food Industry Recommended Protocols When Employee/Visitor/Customer Tests Positive for COVID-19*, April 1, 2020, [http://www.afdo.org/resources/Documents/COVID19/2020-04-01%20FBIA%20COVID19\\_Case%20Recommended%20Protocols%20V4.pdf](http://www.afdo.org/resources/Documents/COVID19/2020-04-01%20FBIA%20COVID19_Case%20Recommended%20Protocols%20V4.pdf)

*Emergency Prevention Measures to Achieve Physical (Social) Distancing in Food Manufacturing Facilities as Related to COVID-19*, March 31, 2020, <https://www.idfa.org/wordpress/wp-content/uploads/2020/04/2020-03-31-Emergency-Preventions-Measures-for-Physical-Distancing-in-Food-Manufacturing-as-Related-to-COVID-19.pdf>

Illinois Control of Communicable Diseases Code, 77 Ill. Adm. Code 690, <http://ilga.gov/commission/jcar/admincode/077/07700690sections.html>

U.S. Department of Labor, Occupational Safety and Health Administration COVID-19 webpage, <https://www.osha.gov/SLTC/covid-19>