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

As of March 30, 2020 (Version 3)

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I.   Background

Food production facilities, distributors, retailers and wholesalers are part of our nation's "critical infrastructure" and must remain operational to feed the country. Inconsistent approaches to reacting to an individual, particularly manufacturing personnel, who test positive for COVID-19, have the potential to jeopardize our food system. This document recommends a consistent approach in how a company can continue operations in the event an individual has tested positive or is potentially exposed, given the global COVID-19 pandemic and high transmissibility of this respiratory virus from person to person. This guidance is not intended to replace or supersede federal, state, or local guidance or authority. It highlights key recommendations from the Centers for Disease Control and Prevention (CDC) and the Occupational Safety and Health Administration (OSHA) on:

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

Note: CDC and OSHA guidance may be changing, and rapidly, as more is learned, and that the most up-to-date information is available at the CDC COVID-19 website: https://www.cdc.gov/coronavirus/2019-nCoV/index.html; and OSHA Guidance on Preparing Workplaces for COVID-19 website: https://www.osha.gov/Publications/OSHA3990.pdf

II.   Steps To Be Taken When An Employee Tests Positive For COVID-19 Or Is Presumed Positive Based on Symptoms Associated With COVID-19

Food manufacturing facilities, distribution centers, wholesale and retail outlets should consider the following as they prepare for the potential that an employee may test positive for COVID-19 or is presumed positive based on disease symptoms.

- For an individual who has symptoms associated with COVID-19 (i.e., fever, cough, and/or shortness of breath) or has tested positive for COVID-19:
    - If the employee is onsite at the facility, send the employee home immediately;
    - If the employee is at home, do not permit the employee to come to work
- Employees who have **not been tested but show symptoms** of acute respiratory illness are recommended to stay home and be excluded from work until they are free of fever (100.4° F [38.0° C] or greater using an oral thermometer), and any other related symptoms (i.e., cough and/or shortness of breath) for at least 3 days (72 hours), without the use of fever-reducing or other symptom-altering medicines (e.g. cough suppressants) AND at least 7 days have passed since symptoms first appeared.
    - Employees should notify their supervisor
    - Encourage the employee to contact their local health department and seek medical attention upon initial appearance of symptoms
- Employees **with a COVID-19 positive test* who have stayed home (home isolated)** may be able to return to work under the following conditions:
    - **If employee will not have a test** to determine if they are still contagious, they may be able to return to work after these three things have happened:
        - no fever for at least 72 hours since recovery (that is three full days of no fever without the use medicine that reduces fevers) AND
        - other symptoms have improved (for example, when cough or shortness of breath have improved) AND
        - at least 7 days have passed since symptoms first appeared
    - **If employee will be tested** to determine if they are still contagious, they may be able to return to work after these three things have happened:
        - no longer have a fever (without the use medicine that reduces fevers) AND

- other symptoms have improved (for example, when cough or shortness of breath have improved)
AND
- received two negative tests in a row, 24 hours apart. Doctor should follow [CDC guidelines](#)

*For the most current CDC recommendations, see:
[CDC's What To Do if You are Sick](#)

- Contact other relevant third parties who may have been exposed
- Make an OSHA record/report if required. OSHA's recent guidance says such a report is required if:
  - There is a confirmed (tested positive) case of COVID-19;
  - It is contracted due to employee performing work-related duties; and,
  - It meets other standards for OSHA reporting (for example, more than one day away from work, or medical treatment beyond first aid)
- Clean and disinfect surfaces to limit employee exposure. (see Cleaning and Disinfection Guidelines section below)
- Because transmission occurs from person to person, a facility/location does not need to shut down as a result of an employee, visitor, or other individual testing positive for COVID-19 if the steps above are followed and the ill and potentially exposed individuals are appropriately addressed

III. **Steps To Be Taken When An Employee/Visitor/Customer Is Exposed (In Close Contact) With An Individual Who Is Positive For COVID-19**

- Identify potentially exposed individuals (e.g., those that were in close contact with the infected individual). Unless advised by local authorities, other individuals in the facility should not be considered high risk for infection, do not require special treatment, and may continue working as normal (after surfaces are cleaned and disinfected, as described below).
  - Close contact is defined by CDC as:
    - within approximately 6 feet (2 meters) of a COVID-19 case for a prolonged period; close contact can occur while caring for, living with, visiting, or sharing a healthcare waiting area or room with a COVID-19 case; OR,
    - having direct contact with infectious secretions of a COVID-19 case (e.g., being coughed on)
  - Short term exposure, such as walking past someone, is not "close contact"
  - In accordance with Health Insurance Portability and Accountability Act (HIPAA) requirements, inform individuals of potential exposure

- o Working with local authorities and the individuals' health care providers, consider if it is appropriate to take one of the following actions:
  - at a minimum, based on community transmission in that area, individual health factors, and other risk factors, consider self-monitoring for symptoms (e.g., cough, sore throat, shortness of breath and/or fever of 100.4° F [38.0° C] or greater using an oral thermometer) associated with COVID-19. https://www.cdc.gov/coronavirus/2019-ncov/community/guidance-business-response.html
  - If symptoms arise, contact their local health department and physician to determine next steps
  - In consultation with local authorities and depending on the circumstances of exposure, consider the option of staying home for up to 14 days since the time they may have been exposed or may have come in close contact with an infected individual
- Clean and disinfect surfaces to limit employee/visitor/customer exposure. (see Cleaning and Disinfection Guidelines section below)

***The following can be helpful in assessing risk:**
- Estimation of the asymptomatic ratio of novel coronavirus infections. March 2020. International Journal of Infectious Diseases - https://www.ijidonline.com/article/S1201-9712(20)30139-9/pdf)
- CDC COVID-19 Symptoms (https://www.cdc.gov/coronavirus/2019-ncov/symptoms-testing/symptoms.html)
- Interim U.S. guidance for Risk Assessment and Public Health Management of Persons with Potential COVID-19 (https://www.cdc.gov/coronavirus/2019-ncov/php/risk-assessment.html)

In the CDC Risk Assessment "Interim US Guidance for Risk Assessment and Public Health Management of Persons with Potential Coronavirus Disease 2019 (COVID-19) Exposures: Geographic Risk and Contacts of Laboratory-Confirmed Cases" the CDC notes "some personnel fill essential (critical) infrastructure roles within communities. The Department of Homeland Security identifies Essential Critical Infrastructure Workforce at https://www.cisa.gov/publication/guidance-essential-critical-infrastructure-workforce. Based on the needs of individual jurisdictions, **and at the discretion of state or local health authorities, these personnel may be permitted to continue work following potential exposure to SARS-CoV-2 (either travel-associated or close contact to an individual who has tested positive for COVID-19),** provided they remain asymptomatic. Personnel who are permitted to work following an exposure should self-

monitor under the supervision of their employer's occupational health program including taking their temperature before each work shift to ensure they remain afebrile. On days these individuals are scheduled to work, the employer's occupational health program could consider measuring temperature and assessing symptoms prior to their starting work. Exposed healthcare personnel who are considered part of critical infrastructure should follow existing CDC guidance."

IV.   Cleaning and Disinfection Guidelines

- As soon as an employee is identified that has tested positive for COVID-19 or has symptoms associated with this virus, clean and sanitize the facility according to CDC guidance at https://www.cdc.gov/coronavirus/2019-ncov/community/organizations/cleaning-disinfection.html
- Existing sanitation standard operating procedures (SSOPs) including cleaning and disinfection processes for food contact surfaces and processing equipment should serve to mitigate the SARS-CoV-2 hazard and the potential spread of SARS-CoV-2. With that said, other surfaces in the facility environment that are not routinely targeted in SSOPs may need to be targeted if the infected individual is known to have or could have come in close contact with them
- EPA registered disinfectants should be used
  - There is a list of EPA-registered "disinfectant" products for COVID-19 on the Disinfectants for Use Against SARS-CoV-2 list that have qualified under EPA's emerging viral pathogen program for use against SARS-CoV-2, the coronavirus that causes COVID-19
  - **IMPORTANT**: Check the product label guidelines for if and where these disinfectant products are safe and recommended for use in food manufacturing areas or food establishments
- Special attention should be paid to high contact surfaces such as: doorknobs, touch screens, control panels, time clocks, tabletops, breakroom/cafeteria facilities, handrails, handwashing stations, and restroom facilities

V.   Disposition of Food

- There is currently no evidence to support that the SARS-CoV-2 virus can be transmitted to humans through food or food packaging materials
- If practical, however, any packaging that has been in close contact with an individual who has symptoms associated with COVID-19 or has tested positive for COVID-19, could be wiped down with sanitizer

- The FDA does not anticipate that food will need to be held, recalled or withdrawn from the market due to possible exposure to SARS-CoV-2 through a person that has tested positive for the COVID-19 virus that works a food facility https://www.fda.gov/food/food-safety-during-emergencies/food-safety-and-coronavirus-disease-2019-covid-19

American Beverage Association

AFFI American Frozen Food Institute

Beer Institute

American Bakers Association

cba Consumer Brands Association

CRA Corn Refiners Association

FMI The Food Industry Association

Global Cold Chain Alliance®

IDFA International Dairy Foods Association

IFDA international foodservice distributors association

NAMA Bringing convenience to life.®

NBWA National Beer Wholesalers Association

NCA National Confectioners Association

National Chicken Council

National Fisheries Institute

NGA National Grocers Association

NMPF National Milk Producers Federation

NAMI North American Meat Institute

North American Millers' Association NAMA

PTNPA Since 1939

Snacking. Nutrition. Convenience. SNAC International

the Sugar association

United Fresh Produce Association