

# COVID-19WorkplaceSafety Framework

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# DEPARTMENT OF ENERGY COVID-19 Workplace Safety Framework

COVID-19 Workplace Safety Framework	
Purpose	
Scope and Applicability	
COVID-19 Coordination Team	
Principles	
Vaccination	Д
Vaccine-Related Leave	
Leave for Recovery from Vaccine	
Leave to Accompany a Family Member	5
Health and Safety Requirements	5
COVID-19 Hospital Admission Levels	
Mask-Wearing	
Signage and Online Notice of Mask-Wearing Requirements	
Screening Testing	
Symptom Screening	
Post-Exposure Precautions	
Isolation and Post-Isolation Precautions	
Official Travel	
Leave Related to Isolation and Travel	
Contact Tracing	
Meetings, Events, and Conferences	
Confidentiality	
Workplace Operations	15
Planning and Preparation	15
Environmental Cleaning	
Hygiene	
Visitors	
Improving Ventilation and Air Filtration	
Facilitating Physical Distancing and Avoiding Crowding	
Collective Bargaining Obligations	
Exceptions	
DOE COVID-19 Hotline Response Team	
COVID-19 Reporting	

# DEPARTMENT OF ENERGY COVID-19 Workplace Safety Framework

## Purpose

The health and safety of all Federal employees, onsite contractor employees, and individuals interacting with the Federal workforce are of paramount concern for the Administration. The Federal Government and the Department of Energy (Department or DOE) are committed to addressing essential work requirements and ensuring a workplace consistent with best public health practices.

As set forth in the January 20, 2021, Executive Order 13991 "*Protecting the Federal Workforce and Requiring Mask-Wearing*," 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". This Framework 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; OMB memorandum 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; <u>Safer Federal Workforce Task Force COVID-19</u> <u>Workplace Safety: Agency Model Safety Principles</u>, updated September 15, 2022;, 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.

This Framework outlines the requirements to protect the health and safety of the workforce in DOE facilities and for the safe accomplishment of the DOE mission in a COVID-19 environment. The Framework is a living document that will be updated as needed to account for changing COVID-19 conditions, Safer Federal Workforce Task Force guidance, <u>Exceptions</u>, and CDC guidance.

## Scope and Applicability

This Framework replaces the *DOE COVID-19 Workplace Safety Framework*, revised on January 5, 2023, and provides overall DOE requirements and guidance for associated DOE site/facility plans. DOE will update site/facility plans as appropriate to ensure compliance with this overarching COVID-19 Workplace Safety Framework.

The safety principles in this Framework document apply to Federal employees, contractor employees, and any others entering or working at DOE sites/facilities. The principles presented here establish a minimum level for workplace safety and are developed consistent with current Safer Federal Workforce and CDC guidance and established public health best practices, based on evolving understanding of the pandemic. These principles will be reassessed over time, as conditions warrant. This document is not meant to be exhaustive, and additional DOE program or site/facility controls will be developed as needed. DOE site/facility safety plans will build upon these principles and be tailored as appropriate for mission requirements and facility status and will be reviewed by the cognizant DOE Departmental Element.

For DOE Headquarters, the Office of Management and the Office of the Chief Human Capital Officer are responsible for reviewing and updating the plan for the National Capital Region (NCR). This Plan applies to all DOE elements within the NCR. For DOE sites that have Management and Operating (M&O) or prime contractors that have previously developed and implemented site/facility plans, these plans will be updated accordingly, and each cognizant DOE Departmental Element will review these plans, as appropriate. Departmental Elements are expected to satisfy applicable Federal collective-bargaining and labor-management relations obligations before finalizing site/facility plans. For DOE sites/facilities outside of the NCR that are not co-located with M&O or other prime contractors, each site/facility will either

review and update its existing plan or develop a site-specific plan if one does not exist. The cognizant DOE Departmental Element will review these plans.

## COVID-19 Coordination Team

On January 20, 2021, DOE established a COVID-19 Coordination Team that reports directly to the Secretary of Energy through the DOE Chief of Staff. This executive leadership team is composed of representatives from several of the complex-wide components of DOE and keeps Heads of Departmental Elements (HDEs) and other DOE leadership apprised of issues. Departmental Elements maintain line management authority and are responsible for monitoring site/facility plans and considering potential changes to site/facility plans to remain in compliance with any revisions to this Framework or other new guidance.

The COVID-19 Coordination Team is responsible for establishing, implementing, and monitoring compliance with the health and safety requirements specified in this Framework as well as coordinating with appropriate agency programmatic and acquisition staff regarding the application of safety protocols to contractor employees. The team meets regularly to review this Framework and to consider potential revisions and updates based on emerging guidance and any other operational needs. Decisions are coordinated with cognizant site security officials, as appropriate. For privately owned facilities leased by the Federal Government, the team coordinates with the General Services Administration (GSA), where appropriate, and the lessor's designated representative. The Framework is broadly communicated to employees as updates are made and the most current version is posted on DOE's externally-facing website as well as the internal Energy Hub.

## Principles

- The health and safety of DOE Federal and contractor employees are of paramount importance and guide all actions for employees to reenter DOE facilities.
- This Framework aligns with the Safer Federal Workforce Task Force's <u>guidance</u>, including the Task Force's Model Agency COVID-19 Safety Principles.
- Pursuant to Executive Order 13991, this Framework also aligns with <u>CDC COVID-19 guidance</u>.
- Where a locality has imposed additional requirements related to COVID-19 that are more protective than those set forth in this Framework, those requirements should be followed in DOE buildings, in DOE-controlled indoor worksites, and on DOE land in that locality.
- Plans and protocols will consider contingencies to prepare for potential new developments. The Department will reference Safer Federal Workforce Task Force and CDC guidance and monitor the <u>COVID-19 Hospital Admission Levels</u> for each DOE site/facility to reassess and inform decisions as conditions warrant.

## Vaccination

Vaccination is the most effective tool we possess to protect public health, the health of our workforce, and DOE's ability to accomplish its critical work in the context of COVID-19.

Consistent with CDC guidance, DOE's COVID-19 workplace safety protocols do not vary based on vaccination status or otherwise depend on vaccination information. DOE sites/facilities are to take no action to require, request, or collect vaccination status information from any individual—including current employees, potential employees, contractor employees, visitors to agency facilities, or in-person attendees at agency-hosted meetings, events, and conferences—for the purposes of implementing DOE COVID-19 workplace safety protocols.

DOE sites/facilities must continue to preserve their vaccination information collection systems and the

information collected to date from employees in accordance with the Federal Records Act and other records requirements. Furthermore, it is important to preserve this information as COVID-19 workplace safety protocols may change in the future, or collection of this information from Federal employees may otherwise need to resume.

#### Vaccine-Related Leave

Federal employees are strongly encouraged to be up to date with COVID-19 vaccines, including recommended boosters. The time an employee spends obtaining any FDA-authorized COVID-19 vaccine doses (including travel time) is covered under administrative leave.

DOE authorizes employees to take up to four hours of administrative leave to travel to the vaccination site, complete any COVID-19 vaccine dose, and return to work—for example, up to eight hours of administrative time for employees receiving two doses. If an employee needs to spend less time getting the vaccine, only the needed amount of administrative leave should be granted. DOE requires employees taking longer than four hours to document the reasons for the additional time (e.g., they may need to travel long distances to get the vaccine). Employees may not be credited with administrative leave or overtime work for time spent getting a vaccine dose outside their tour of duty. Employees should obtain advance approval from their supervisor before being permitted to use administrative leave for COVID-19 vaccination purposes.

## Leave for Recovery from Vaccine

Federal employees will be granted up to 2 workdays of administrative leave if an employee has an adverse reaction to any COVID-19 vaccine dose that prevents the employee from working (i.e., no more than 2 workdays for reactions associated with a single dose). If an employee requests more than 2 workdays to recover, the employee may take other appropriate leave (e.g., sick leave) to cover any additional absence.

#### Leave to Accompany a Family Member

Federal employees will be granted up to 4 hours of administrative leave per dose to accompany a family member (as defined in OPM's leave regulations, see 5 CFR 630.201) who is receiving any COVID-19 vaccine dose.

- DOE grants leave-eligible employees up to four hours of administrative leave per dose—for example, up to a total of twelve hours of leave for a family member receiving three doses—for each family member the employee accompanies.
- If an employee needs to spend less time accompanying a family member who is receiving the COVID-19 vaccine, DOE grants only the needed amount of administrative leave.

## **Health and Safety Requirements**

#### COVID-19 Hospital Admission Levels

The CDC has replaced COVID-19 Community Levels with <u>COVID-19 Hospital Admission Levels</u>, which measure the impact of COVID-19 illness on health and healthcare systems and inform the appropriate prevention strategies to utilize at a given time. CDC provides county-level data showing the COVID-19 Hospital Admission Levels for each county in the United States, as determined by CDC.

DOE sites/facilities must utilize that data in determining the COVID-19 Hospital Admission Levels for a given facility by looking to the COVID-19 Hospital Admission Levels for the county in which the facility is located. For Headquarters facilities, Washington, DC and Montgomery County, MD will be used as appropriate to determine COVID-19 Hospital Admission Levels. DOE sites/facilities must review the COVID-19 Hospital Admission Levels for the covID-19 Hospital Admission Levels as appropriate to admission Levels on a weekly basis, to determine any changes that should be made to COVID-19 workplace safety protocols for the upcoming week.

In addition, to be consistent with Safer Federal Workforce Task Force guidance, where a locality has imposed additional requirements related to COVID-19 that are more protective than those set forth in Safer Federal Workforce Task Force guidance, sites/facilities must follow those additional local requirements in Federal buildings, in Federally controlled worksites, on Government-operated transportation conveyances, and on Federal land in that locality. For example, if a locality has imposed mask-wearing requirements for indoor facilities, DOE sites/facilities must apply those requirements in Federal facilities, even if not otherwise required under agency mask-wearing protocols.

DOE Site/Facility COVID-19 Safety Protocols DOE sites/facilities require all individuals to	When COVID-19 Hospital Admission level is <b>LOW</b> NO (mask-wearing	When COVID-19 Hospital Admission level is <b>MEDIUM</b> NO (mask-wearing	When COVID-19 Hospital Admission level is <b>HIGH</b>
wear a high-quality mask or respirator (such as N95) regardless of vaccination status.	optional)	optional)	YES
Where DOE sites/facilities have established serial screening testing programs and/or point- in-time screening testing requirements for certain identified high-risk settings, screening testing is implemented for individuals enrolled in the program or subject to the requirement, regardless of vaccination status.	NO	YES	YES
DOE sites/facilities require <b>symptom screening</b> self-checks for all individuals prior to entry to Federal facilities.	YES	YES	YES
DOE sites/facilities instruct all asymptomatic individuals known to be exposed to COVID-19 to wear a high-quality mask or respirator (such as an N95), take other post-exposure precautions, and watch for symptoms for 10 full days after exposure, consistent with CDC guidance – instead of at-home quarantine and regardless of vaccination status. DOE sites/facilities require individuals exposed to COVID-19 to be tested at least 5 full days (ideally, on or after day 6) after their last exposure.	YES	YES	YES
DOE sites/facilities instruct all individuals with probable or confirmed COVID-19 to follow DOE <b>isolation protocols</b> and take other precautions consistent with CDC guidance.	YES	YES	YES
DOE sites/facilities make and maintain improvements to indoor ventilation and air filtration to the maximum extent feasible.	YES	YES	YES
DOE sites/facilities post signage encouraging individuals, regardless of vaccination status, to consider <b>physically distancing themselves from</b> <b>others and avoiding crowding</b> in indoor common areas, meeting rooms, and high-risk settings in Federal facilities.	NO	YES	YES

The Department follows Safer Federal Workforce Task Force and CDC guidance and will implement updated guidance as it becomes available.

Taking into account the diversity of DOE's mission objectives and operations, the following requirements set the minimum threshold for health and safety and must be included in all DOE site/facility plans. Where DOE has sites/facilities in the same geographic region but are managed by different DOE Departmental Elements, Federal officials shall coordinate as practicable.

#### Mask-Wearing

When the COVID-19 Hospital Admission Level is HIGH in a county where a DOE site/facility is located, pursuant to EO 13991 and consistent with CDC guidance, DOE sites/facilities must require individuals including employees, contractor employees, and visitors who are 2 years or older, to wear a "high-quality" mask indoors in the facility, regardless of their vaccination status. This includes when Federal employees are interacting with members of the public as part of their official responsibilities.

When it is required that individuals wear a "high-quality" <u>mask or respirator</u> when COVID-19 Hospital Admission Levels are HIGH, and when individuals are instructed to wear a "high-quality" mask or respirator for post-exposure and post-isolation precautions (see below), high-quality masks or respirators include respirators that meet U.S. or international standards (e.g., N95, KN95, KF94), masks that meet a standard (e.g., ASTM), or "procedure" or "surgical"-style masks. DOE sites/facilities should otherwise avoid limiting the types of masks that can be worn by individuals in Federal facilities.

When individuals are required to wear a "high-quality" mask or respirator (such as an N95) in Federal facilities, DOE site/facility mask-wearing protocols should reflect that:

- Masks and respirators should be well-fitting and worn consistently and correctly (over mouth and nose).
- Masks or respirators should be worn in any common areas or shared workspaces (including open floorplan office space, cubicle embankments, and conference rooms).
- Individuals do not need to wear masks or respirators when outdoors.

DOE sites/facilities may provide for limited exceptions to mask-wearing, such as when an individual is alone in an office with floor to ceiling walls and a closed door, or for a limited time when an individual is eating or drinking and maintaining distance from others. Masked individuals may be asked to lower their masks briefly for identification purposes in compliance with safety and security requirements.

Nothing in CDC or Safer Federal Workforce Task Force guidance precludes an individual from wearing a mask if the individual so chooses when the Hospital Admission Level is LOW or MEDIUM. Should a DOE site/facility identify unique operational circumstances in certain workplaces that may require other or additional prevention measures, they must consult with DOE COVID-19 Coordination Team who will engage the Safer Federal Workforce Task Force regarding exceptions, per the Exceptions section below.

## Signage and Online Notice of Mask-Wearing Requirements

To be consistent with Safer Federal Workforce Task Force guidance, DOE sites/facilities need to post and update physical signs and post information online on agency websites making clear what mask-wearing requirements apply in each Federal facility.

When the COVID-19 Hospital Admission Level is HIGH in a county where a Federal facility is located, facilities must post physical signs providing notice of the requirement for all individuals to wear a highquality mask or respirator (such as N95) indoors in the facility pursuant to EO 13991.

When the COVID-19 Hospital Admission Level is LOW or MEDIUM in a county where a Federal facility is located, facilities should post physical signs providing notice that mask-wearing is optional and should not otherwise require individuals to wear a mask, except where required by Federal, State, Tribal, territorial, or local laws, rules, regulations, or existing collective bargaining agreements.

## Screening Testing

To be consistent with Safer Federal Workforce Task Force guidance, DOE will not implement COVID-19 serial or point-in-time screening testing in Federal facilities, or for other settings, roles, and functions within Federal facilities, without first consulting with the DOE COVID-19 Coordination Team and the Safer Federal Workforce Task Force.

#### Serial Screening Testing

Following consultation with the DOE COVID-19 Coordination Team, which will coordinate with the Safer Federal Workforce Task Force and DOE legal counsel for review of a request, specific DOE sites/facilities may establish COVID-19 serial screening testing programs for employees (or employees and onsite contractor employees) working in high-risk settings within Federal facilities. For the purposes of this guidance, and consistent with Safer Federal Workforce Task Force and CDC guidance, high-risk settings include certain Federal facilities—or certain specific settings within Federal facilities—where (1) COVID-19 transmission risk is high, and (2) the population present onsite is at high risk of severe outcomes from COVID-19 or there is limited access to healthcare. Examples of such settings provided by CDC include, "High-risk congregate settings, such as assisted living facilities, correctional facilities, and homeless shelters, that have demonstrated high potential for rapid and widespread virus transmission to people at high risk for severe illness" and "Settings that involve close quarters and that are isolated from healthcare resources (e.g., fishing vessels, wildland firefighter camps, or offshore oil platforms)."

When a site/facility identifies a potential high-risk setting, they must consult with the DOE COVID-19 Coordination Team to confirm that the setting is high-risk and that establishing a serial screening testing program and requiring point-in-time screening testing in the facility would be consistent with CDC and Safer Federal Workforce Task Force guidance. When serial screening testing is implemented, sites/facilities must not differentiate among individuals on the basis of their vaccination status, pursuant to EO 13991 and consistent with CDC guidance.

When COVID-19 Hospital Admission Levels are MEDIUM or HIGH, asymptomatic individuals (without a known exposure to someone with COVID-19 within the past 10 days) who are enrolled in a serial screening testing program established for agency-identified high-risk settings should be tested at least twice weekly for any week during which they work onsite or interact in person with members of the public as part of their job duties in that agency-identified high-risk setting.

Testing may be conducted at a Federal facility or offsite. The test can be both self-administered and selfread by the employee as long as the employee certifies as to when they took the test and that they received a negative result.

#### Point-in-Time Screening Testing

Following consultation with the DOE COVID-19 Coordination Team who will coordinate with the Safer Federal Workforce Task Force and DOE legal counsel on review of the request, a DOE site/facility may establish COVID-19 point-in-time screening testing requirements for onsite contractor employees and visitors accessing identified high-risk settings within Federal facilities (as earlier defined herein), as well as for in-person attendees at agency-hosted meetings, events, or conferences taking place in high-risk settings within Federal facilities or high-risk non-Federal settings, when COVID-19 Hospital Admission Levels are MEDIUM or HIGH in the county where the facilities with those high-risk settings are located. Once a site/facility has identified potential high-risk settings, they must consult the DOE COVID-19 Coordination Team to confirm that those settings are high-risk and that conducting point-in-time screening testing in those facilities would be consistent with CDC and Safer Federal Workforce Task Force guidance.

## Symptom Screening

To be consistent with Safer Federal Workforce Task Force guidance, all employees and contractor employees working onsite and all visitors to DOE sites/facilities must complete symptom screening before entering the DOE site/facility. In addition, all employees must complete symptom screening prior to interacting with members of the public in person as part of their official responsibilities. Symptom screening can be self-conducted and does not need to be verified by site/facility personnel.

If a Federal employee, contractor employee, or visitor has fever or chills, or if they have other new or unexplained symptoms consistent with COVID-19 such as new or unexplained onset of cough, shortness of breath, or difficulty breathing, new or unexplained loss of taste or smell, or new or unexplained muscle aches, they *cannot* enter a Federal workplace. If an individual suspects that they have COVID-19, such as *having* new or unexplained COVID-19 symptoms, but they do not yet have test results, they should not enter a DOE site/facility and should get tested if they have not already done so.

Pursuant to EO 13991, any individual, regardless of vaccination status, who develops fever, chills, or other new or unexplained symptoms consistent with COVID-19, or who tests positive for COVID-19, while onsite at a DOE site/facility during the workday *must* immediately wear a "high-quality" mask or respirator (such as an N95) and promptly leave the DOE site/facility. Pursuant to EO 13991 and consistent with CDC guidance, individuals who disclose that they have tested positive for COVID-19 to follow protocols on isolation.

#### Post-Exposure Precautions

If an asymptomatic individual has a known exposure to someone with COVID-19, consistent with CDC recommendations, the individual is able to enter DOE sites/facilities or interact with members of the public in person as part of their official DOE responsibilities.

Pursuant to EO 13991 and consistent with Safer Federal Workforce Task Force and CDC guidance on <u>post-exposure precautions</u>, individuals who are known to have been exposed to someone with COVID-19, regardless of their vaccination status, must:

- Wear a <u>high-quality'' mask or respirator</u> (such as an N95) while indoors at a DOE site/facility or interacting indoors with members of the public in person as part of their official DOE responsibilities as soon as possible after notification of exposure and continue to do so for 10 full days from the date they were last known to have been exposed;
- Take <u>extra precautions</u>, such as avoiding crowding and physically distancing from others, when they know they are around people who are <u>more likely to get very sick</u> from COVID-19 while onsite at a DOE site/facility or interacting with members of the public in person as part of their official DOE responsibilities, for 10 full days from the date they were last known to have been exposed; and
- Watch for <u>COVID-19 symptoms</u> for 10 full days from the date they were last known to have been exposed.

For purposes of calculating the 10 full days, day 0 is the day of their last known exposure to someone with COVID-19, and day 1 is the first full day after their last known exposure.

As part of site/facility testing protocols, and pursuant to EO 13991 and consistent with CDC guidance, employees and contractor employees who are known to have been exposed to COVID-19 and are onsite at a DOE site/facility or interacting with members of the public in person as part of their official DOE responsibilities must be tested for current infection with a viral test at least 5 full days after their last known exposure (ideally, on or after day 6). The test can be both self-administered and self-read by the employee if the employee certifies as to when they took the test and that they received a negative result. If the individual tests negative, then pursuant to EO 13991 and consistent with CDC guidance, the individual must continue to follow the above precautions for 10 full days from the date they were last known to have been exposed. If they test positive, or if they at any time develop COVID-19 symptoms, they must follow protocols on isolation.

If the individual that has been known to be exposed to COVID-19 is not working onsite at a DOE Site/Facility or interacting with members of the public in person as part of their official DOE responsibilities within 10 days of the known exposure, then they are not required to be tested.

If the individual who has been known to be exposed to COVID-19 has *already* tested positive for COVID-19 with a viral test within the previous 30 days and subsequently recovered and remains without COVID-19 symptoms, then they do not need to get tested after a known exposure. If the individual who had been known to be exposed to COVID-19 has already tested positive for COVID-19 with a viral test within the previous 31-90 days and subsequently recovered and remains without COVID-19 symptoms, then they should be tested using a viral antigen test.

## Isolation and Post-Isolation Precautions

Any individual with probable or confirmed COVID-19, regardless of their vaccination status, must not enter a DOE site/facility or interact with members of the public in person as part of their official DOE responsibilities, consistent with Safer Federal Workforce Task Force and CDC guidance on isolation, and monitor their symptoms.

This includes people who have an initial positive diagnostic viral test for COVID-19, regardless of whether or not they have symptoms, and people with symptoms of COVID-19, including people who are awaiting test results or have not been tested.

To be consistent with Safer Federal Workforce Task Force guidance, individuals who tested positive for COVID-19 and never developed symptoms are allowed to return to working onsite at a DOE site/facility or interacting with members of the public as part of their official DOE responsibilities after 5 full days following their positive COVID-19 test (day 0 being the day the individual was tested).

To be consistent with Safer Federal Workforce Task Force guidance, individuals who tested positive for COVID-19 and had symptoms are allowed to return to working onsite at a DOE site/facility or interacting with members of the public as part of their official DOE responsibilities after 5 full days from the onset of symptoms (day 0 being the day of symptom onset), once they are fever-free for 24 hours without the use of fever- reducing medication and their other symptoms are improving. Note that loss of taste and smell may persist for weeks or months after recovery and need not delay the end of isolation.

If an individual had moderate illness (if they experienced shortness of breath or had difficulty breathing) or severe illness (they were hospitalized) due to COVID-19, or they have a weakened immune system, then to be consistent with Safer Federal Workforce Task Force guidance, the individual should be advised to delay returning to working onsite at a DOE site/facility or interacting with members of the public as part of their official DOE responsibilities for a full 10 days. If an individual had severe illness or has a weakened immune system, they should consult their healthcare provider before ending isolation. If an individual is unsure if their symptoms are moderate or severe or if they have a weakened immune system, the individual should talk to a healthcare provider for further guidance.

To be consistent with Safer Federal Workforce Task Force guidance, DOE sites/facilities should not use a test-based approach to determine when, after having tested positive for COVID-19 and isolated, an individual can return to working onsite at a DOE workplace or interacting with members of the public as part of their official duties, absent an exception approved by the Secretary following consultation with the DOE COVID-19 Coordination Team and the Safer Federal Workforce Task Force.

Once an individual has returned to working onsite at a DOE site/facility or interacting with members of the public as part of their official DOE responsibilities after having tested positive for COVID-19 and isolated consistent with Safer Federal Workforce Task Force and CDC guidance on isolation, then pursuant to EO 13991 and consistent with CDC guidance, the individual must continue to take precautions consistent with CDC guidance for at least 10 full days after their first day of symptoms, or after the date of a positive viral test for asymptomatic individuals, including wearing a "high-quality" mask or respirator (such as an N95) when around others, avoiding eating and drinking around others, avoiding environments such as dining facilities, gyms, or other places where they might need to be unmasked around others, and avoiding being around people who they know are at high risk for severe disease from COVID-19.

As it relates to mask-wearing after returning from isolation, individuals can opt to take two viral antigen tests authorized by the FDA to detect current COVID-19 infection, starting as early as day 6. With two sequential negative tests 48 hours apart, the individual may remove their mask sooner than day 10. If either of their antigen test results are positive, the individual should continue taking antigen tests at least 48 hours apart until they have two sequential negative results. This may mean that the individual would continue wearing a mask and testing beyond day 10.

If at any point their COVID-19 symptoms recur or worsen, an individual again may not enter a DOE site/facility or interact with members of the public as part of their official DOE responsibilities, restarting at day 0, consistent with EO 13991 and CDC recommendations on isolation and associated protocols.

## **Official Travel**

There are no Government-wide limits on official travel (i.e., travel conducted under an official travel authorization) regardless of an individual's vaccination status. The Safer Federal Workforce Task Force has issued extensive travel guidance that is located at <u>Travel | Safer Federal Workforce</u>.

Federal and contractor employees, regardless of vaccination status, must utilize the normal DOE travel policies and organizational approval processes for official domestic and international travel. In approving official travel, DOE sites/facilities should:

- Inform the traveling individual that CDC recommends that individuals make sure they are up to date with COVID-19 vaccines before travel;
- Recommend that the traveling individual consider being tested for current infection with a viral test as close to the time of departure as possible (no more than 3 days) before travel;
- Instruct the traveling individual to adhere strictly to CDC guidance for domestic and international travel before, during, and after official travel;
- Instruct the traveling individual to check their destination's COVID-19 Hospital Admission Level before traveling, and to wear a high-quality mask or respirator (such as an N95) while on-duty and around others indoors at their destination, if the COVID-19 Hospital Admission Level in the county where their destination is located is HIGH;
- Instruct the traveling individual to make sure they understand and follow all travel restrictions put in place by State, Tribal, local, and territorial governments; and
- Advise the traveling individual to prepare to be flexible during their travel, as restrictions, policies, and circumstances may change during their travel.

#### Travel for Individuals with Known Exposure

For asymptomatic individuals who have had a known exposure to someone with COVID-19 within the past 10 days, DOE sites/facilities may approve official travel consistent with DOE's travel policies. If the individual remains without COVID-19 symptoms before traveling, then pursuant to EO 13991 and

consistent with CDC guidance, the individual must, in addition to other standard pre-travel instructions related to COVID-19:

- Wear a "high-quality" mask or respirator (such as an N95) the entire time they are on-duty and around others indoors for the full duration of their travel that falls within the 10 full days after their last known exposure;
- Not travel on public transportation such as airplanes, buses, and trains if they will not be able to wear a high-quality mask or respirator (such as an N95) when around others indoors for the full duration of their travel within the 10 full days after their last known exposure; and
- Follow other aspects of post-exposure protocols, including the requirement for individuals with a known exposure to be tested for COVID-19 after 5 full days following their last known exposure (ideally, on or after day 6). Please note that this testing may need to occur while the individual is traveling, and that sites/facilities do not need to require that employees wait for the results of this post-exposure diagnostic test to undertake official travel, including return travel.

If the individual develops COVID-19 symptoms after official travel has been approved, then pursuant to EO 13991 and consistent with CDC guidance, the individual must not undertake further official travel, including under a previously approved travel authorization, and instead follow protocols consistent with the Safer Federal Workforce Task Force guidance on travel for individuals with COVID-19 symptoms (see next section).

#### Travel for Individuals with COVID-19 Symptoms or a Positive COVID-19 Test

Pursuant to EO 13991 and consistent with CDC guidance, official travel (i.e., travel conducted under an official travel authorization) may not be approved for individuals who have COVID-19 symptoms and are waiting for an initial diagnostic viral test result, and for individuals who have tested positive for COVID-19 for at least 5 full days after their first day of symptoms or after the date of the initial positive diagnostic viral test for asymptomatic individuals.

If an individual who tested positive for COVID-19 has returned to working onsite at a DOE site/facility or interacting with members of the public as part of their official DOE responsibilities (once they are fever-free for 24 hours without the use of fever-reducing medication and their other symptoms are improving), then official travel may be approved for the individual. Pursuant to EO 13991 and consistent with CDC guidance, the individual must, in addition to other standard pre-travel instructions related to COVID-19:

- Wear a "high-quality" mask or respirator (such as an N95) the entire time they are on-duty and around others indoors for the full duration of their travel that falls within the period they are otherwise required to wear a high-quality mask or respirator after ending isolation, consistent with Safer Federal Workforce Task Force guidance;
- Not travel on public transportation such as airplanes, buses, and trains if they will not be able to wear a high-quality mask or respirator (such as an N95) when around others for the full duration of their travel that falls within the period they are otherwise required to wear a high-quality mask or respirator after ending isolation, consistent with Safer Federal Workforce Task Force guidance; and
- Follow other aspects of post-isolation protocols.

If after official travel has been approved, the individual's COVID-19 symptoms recur or worsen, then pursuant to EO 13991 and consistent with CDC guidance on isolation, the individual may not undertake further official travel, including under any previously approved travel authorization, and again may not enter a DOE site/facility or interact with members of the public as part of their official DOE responsibilities, restarting at day 0 of isolation protocols.

#### In-progress Travel for Individuals with COVID-19 Symptoms or a Positive COVID-19 Test

If the individual has probable or confirmed COVID-19 after official travel began (i.e., travel conducted under an official travel authorization), then pursuant to Executive Order 13991 and consistent with CDC guidance, the employee must follow isolation protocols and not undertake further official travel, including return travel, for at least 5 full days after their first day of symptoms, or after the date of the initial positive diagnostic viral test for asymptomatic individuals. The Department will cover all costs associated with travel and lodging expenses, as well as the cost of any diagnostic testing, in these circumstances, to the extent permitted by the Federal Travel Regulation.

Once the individual is fever-free for 24 hours without the use of fever-reducing medication and their other symptoms are improving, then the employee can proceed with undertaking further travel, including return travel. Pursuant to Executive Order 13991 and consistent with CDC guidance on isolation, the individual must, in addition to other standard pre-travel instructions related to COVID-19:

- Wear a "high-quality" mask or respirator (such as an N95) the entire time they are on-duty and around others indoors for the full duration of their travel that falls within the period they are otherwise required to wear a high-quality mask or respirator after ending isolation, consistent with Safer Federal Workforce Task Force guidance;
- Not travel on public transportation such as airplanes, buses, and trains if they will not be able to wear a high-quality mask or respirator (such as an N95) when around others for the full duration of their travel that falls within the period they are otherwise required to wear a high-quality mask or respirator after ending isolation, consistent with Safer Federal Workforce Task Force guidance; and
- Follow other aspects of post-isolation protocols.

If at any point prior to their return travel the individual's COVID-19 symptoms recur or worsen, agencies must instruct the individual to not undertake further official travel, including return travel, and to not enter a Federal facility or interact with members of the public as part of their official responsibilities, restarting at day 0 of isolation protocols, consistent with Executive Order 13991 and CDC recommendations on isolation and the protocols set forth by their agency. The Department will cover all costs associated with travel and lodging expenses, as well as the cost of any diagnostic testing, in these circumstances, to the extent permitted by the Federal Travel Regulation.

#### Leave Related to Isolation and Travel

The Safer Federal Workforce Task Force has issued guidance on leave for Federal employees related to isolation and travel that can be found at <u>Leave | Safer Federal Workforce</u>.

In all situations, Federal 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. Federal 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. Federal employees are reminded that making a false statement to the Department regarding isolation matters could result in disciplinary action, up to and including removal from Federal service. DOE may ask for additional information if necessary to confirm notification of an employee having tested positive for COVID-19, including if there is reason to believe the employee requested leave under false pretenses. If requested, DOE will comply with any applicable Federal laws, including requirements under the Privacy Act and Rehabilitation Act of 1973.

If the employee is unable to telework because they are too sick to telework, or the employee is ineligible for telework and is sick, employees may request sick leave or may also request accrued annual leave and

other forms of paid or unpaid leave in this situation as appropriate.

## Contact Tracing

In accordance with CDC and Safer Federal Workforce Task Force guidance, contact tracing is not required. Site/facility contact tracing efforts, if any should be done in collaboration with, and in support of the contact tracing programs of local health departments, as applicable. Site/Facility Workplace Safety Plans should include site procedures and protocols to implement infection control and workplace safety efforts once informed of a case of COVID-19, as appropriate.

Disclosures of COVID-19 cases should be made to local public health officials as required or necessary to provide for the public health and safety of DOE employees and contractor employees in accordance with local public health mandates, and any applicable Federal laws, including requirements under the Privacy Act and Rehabilitation Act of 1973.

#### Meetings, Events, and Conferences

For DOE-hosted meetings, events, and conferences, there are no Government-wide restrictions, and sites/facilities do not need to first seek approval of the Secretary, regardless of the expected number of inperson participants or local COVID-19 Hospital Admission Levels.

All in-person attendees at any meetings, conferences, or events hosted by DOE must comply with relevant COVID-19 safety protocols, including as it relates to any masks-wearing when COVID-19 Hospital Admission Levels are HIGH, pursuant to EO 13991 and consistent with CDC guidance.

As noted above, DOE has paused asking in-person attendees at DOE-hosted meetings, events, and conferences to provide information about their COVID-19 vaccination status, where COVID-19 safety protocols at the meeting, event, or conference location do not vary based on vaccination status. This is true regardless of COVID-19 Hospital Admission Levels.

When COVID-19 Hospital Admission Levels are MEDIUM or HIGH and if a DOE site/facility wants to establish point-in-time screening testing for their event, they must consult with the DOE COVID-19 Coordination Team who will coordinate with DOE legal counsel the Safer Federal Workforce Task Force to review the request.

## Confidentiality

All medical information collected from personnel, including vaccination information, test results, and any other information obtained as a result of testing and symptom monitoring, will be treated confidentially in accordance with applicable laws and policies on confidentiality and privacy, and will be accessible only by those with a need to know in order to protect the health and safety of personnel. The DOE COVID-19 Hotline Response Team will direct all questions relating to personal medical data to an appropriate point of contact.

The COVID-19 Coordination Team and the DOE COVID-19 Hotline Response Team will consult DOE's Senior Agency Officials for Privacy on matters related to the collection and handling of personally identifiable information and identify a point of contact for all questions relating to personal medical information.

Generally, in accordance with the Rehabilitation Act of 1973, Americans with Disabilities Act, and with privacy laws, managers and supervisors may not specifically disclose the identity of an individual who has or may have COVID-19 or provide information, such as the specific location of the individual's workstation, which will allow other employees to identify the individual. Supervisors may ask the individual for consent to share their identity information with those whom they have been in close contact. Even if an individual consents to such disclosure, identifying information is only to be provided to those who have a need to know.

The COVID-19 Hotline Response Team or the site individuals will work with managers and supervisors to verbally (vice email) notify coworkers who may have been in close contact with an individual diagnosed with COVID-19 to provide these employees more information to help when monitoring themselves for signs or symptoms and quarantining themselves, if appropriate. Again, the information provided about any individual's health should be minimized as much as possible.

## **Workplace Operations**

## Planning and Preparation

The Department will continue to follow CDC, OSHA, and the Safer Federal Workforce Task Force guidance applicable to the Federal workplace. The principles presented here establish a minimum level for workplace safety and are aligned to current CDC guidance and established public health best practices, based on evolving understanding of COVID-19 workplace safety. Principles will be reassessed over time, as conditions warrant, and as new guidance is issued. This document is not meant to be exhaustive, and additional program or site/facility controls will be developed as needed, in consultation with the DOE COVID-19 Coordination team, DOE legal Counsel, and, as necessary and consistent with guidance on exceptions, the Safer Federal Workforce Task Force and the Secretary. Site/Facility plans should align with these principles to the extent possible but may be adjusted as appropriate for mission requirements and changing CDC or public health guidance.

## Environmental Cleaning

Enhanced cleaning in common use/high touch/high density spaces, such as lobbies, restrooms, elevators, and stairwells will continue to be performed. Office space that is in regular use will be cleaned regularly, and in accordance with CDC guidelines. Wipes, gloves, and EPA-approved disinfectants will continue to be made available for individuals to wipe down their workstation and related personal property. Physical barriers such as plexiglass shields may continue to be used where appropriate.

In accordance with CDC and GSA guidelines, if a person who has 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 unless it will not be occupied for the subsequent 3 days. If more than 24 hours has passed since the person has been in the space, regular cleaning is sufficient. Judgement should be used in identifying the appropriate scope of the cleaning and in cleaning industrial and radiological work areas.

Site/Facility plans must ensure procedures and processes are in place that determine the scope of any workplace or area closures related to cleaning and disinfecting requirements.

## Hygiene

Hand sanitizer stations will continue to be available at building entrances and throughout workspaces, and must contain hand sanitizer, with at least 60 percent alcohol and be manufactured in accordance with the requirements of the US Food and Drug Administration (FDA). DOE sites should ensure that the hand sanitizer is not on the FDA's do not use list.

Personnel are encouraged to wash their hands with soap and water or use hand sanitizer or alcohol- based hand rubs frequently. To reinforce the importance of hygiene, signage is required at all DOE sites/facilities.

Each Site/Facility plan must have procedures and processes for disinfecting shared tools, equipment, and common work surfaces (e.g., workbenches, laboratory spaces, desks). Disinfectant wipes will continue to be provided by the DOE or the contractor, as appropriate.

#### Visitors

Visitors must comply with all relevant CDC guidance, including wearing a mask, when appropriate. In areas

of HIGH Hospital Admission Levels, all visitors must wear masks.

#### Improving Ventilation and Air Filtration

To be consistent with Safer Federal Workforce Task Force guidance, DOE sites/facilities need to make and maintain improvements to indoor ventilation and air filtration throughout DOE sites/facilities to the maximum extent feasible, regardless of COVID-19 Hospital Admission Levels. In consultation with occupational safety and facilities experts as appropriate, DOE sites/facilities should consider making use of portable air cleaners with high-efficiency particulate air (HEPA) filters in indoor common areas and meeting rooms, particularly where ventilation or air filtration is otherwise challenging to improve, where crowding cannot be avoided, or in high-risk settings. For more information, see Environmental Protection Agency's <u>Clean Air in Buildings Challenge</u> for potential steps to improve indoor air quality, as well as CDC guidance on ventilation in buildings.

## Facilitating Physical Distancing and Avoiding Crowding

To be consistent with Safer Federal Workforce Task Force guidance, when COVID-19 Hospital Admission Levels are MEDIUM or HIGH, DOE sites/facilities must post signage encouraging individuals, regardless of vaccination status, to consider avoiding crowding and physically distancing themselves from others in indoor common areas, meeting rooms, and high-risk settings in Federal facilities. Pursuant to EO 13991, CDC guidance for physical distancing in specific settings, including healthcare and high-risk congregate settings, must be followed, as applicable.

When COVID-19 Hospital Admission Levels are MEDIUM or HIGH, DOE sites/facilities can consider establishing occupancy limits for indoor common areas and meeting rooms in Federal facilities, and in high-risk settings within Federal facilities, where necessary, including where ventilation and air filtration is challenging to improve or crowding cannot otherwise be avoided.

## Collective Bargaining Obligations

Consistent with the policy to support collective bargaining, DEs are reminded to satisfy any applicable collective bargaining obligations under 5 U.S.C. Chapter 71 and are strongly encouraged to communicate regularly with employee representatives on COVID-19 workplace safety matters. DOE sites/facilities should engage with employee unions at their earliest opportunity as they adjust COVID-19 workplace safety plans, protocols, and policies, and otherwise satisfy any applicable collective bargaining obligations under the law, if any, at the earliest opportunity, including on a post-implementation basis, where appropriate.

DOE Sites/facilities should also review existing collective bargaining agreements (CBAs) to assess whether these updated COVID-19 workplace safety protocols conflict with existing CBA provisions. To the extent that conflicting CBAs provisions exist, it is strongly encouraged to bring the CBA into compliance with these updated COVID-19 workplace safety protocols at the earliest opportunity permitted under the law.

## Exceptions

EO 13991 directs that agencies, as appropriate and consistent with applicable law, require compliance with CDC guidance with respect to wearing masks, maintaining physical distance, and other public health measures by: on-duty or onsite Federal employees; onsite Federal contractors; and all persons in Federal buildings or on Federal lands. EO 13991 also provides that heads of agencies may make categorical or case-by-case exceptions to the extent that doing so is necessary or required by law, and consistent with applicable law. Sites/facilities must consult with the DOE COVID-19 Coordination Team regarding requests for exceptions. The COVID-19 Coordination Team will consult with the Safer Federal Workforce Task Force prior to the submission of any requests to the Secretary.

If there are implementation challenges or operational circumstances that may require other or additional prevention measures beyond those set forth in Safer Federal Workforce Task Force guidance, or otherwise

require workplace safety protocols that differ from Safer Federal Workforce Task Force guidance unless for reasons of following setting-specific CDC guidance, requests must be submitted to the COVID-19 Coordination Team for discussion and approval with the Safer Federal Workforce Task Force. Pursuant to EO 13991, Federal agencies must follow CDC guidance related to certain settings where different or additional layers of prevention are recommended by CDC (e.g., travel and the indoor transportation corridor, schools, health care settings, congregate settings, and correctional facilities). Where there is a conflict with more general Safer Federal Workforce Task Force or CDC guidance, DOE sites/facilities must follow the setting-specific CDC guidance.

## **DOE COVID-19 Hotline Response Team**

Where COVID-19 cases may be work-related or require contact tracing and/or cleaning, the DOE COVID-19 Hotline Response Team protocols will be used across the DOE complex for handling reports of COVID-like symptoms and confirmed cases. Field sites will be responsible for following established DOE-wide protocols, and where applicable, managing the site/facility cases, and providing recommendations to site staff. For DOE HQ, the COVID-19 Hotline Response Team will triage potential onsite work-related cases and follow up on cases at Headquarters.

The COVID-19 Hotline is available for reporting cases as well as for answering questions. The COVID-19 Hotline can be reached by calling 202-586-2683 (202-586-COVD) or by emailing the COVID-19 mailbox at <u>COVID-19inquiries@hq.doe.gov</u>. Emails with personal information should be sent using Entrust.

## COVID-19 Reporting

Employees only need to report COVID-19 cases if they have been on-site at a government facility, at a government-sanctioned event, or on official travel within the 10 days prior to onset of symptoms or testing positive or within the 5 days after onset of symptoms. These are cases that may be work-related or may be appropriate for contact tracing or cleaning. Determinations of whether a case is work-related, or whether contact tracing or cleaning are appropriate, will be made at the site level.

Reporting of weekly COVID cases to the DOE COVID-19 Hotline has been paused along with the posting of weekly COVID summary data. All deaths associated with COVID-19 must still 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. Sites may use the COVID-19 Hotline's application to track cases at their site. If/when weekly reporting is resumed, programs and sites will be notified and will follow established protocols for reporting the status of COVID cases to the <u>DOE COVID-19 Hotline</u> (or a field office or agency component designee).

To promote transparency and safety, sites will notify their workforce about confirmed COVID cases, as relevant and appropriate, consistent with local and Federal privacy and confidentiality regulations and laws. Depending on the circumstances and such factors as the size of the site, notifications will be made by contacting individuals or by issuing broader messages.