Warehousing/Trade and Logistics

I. Workforce Protection
   a. **Install hand sanitizing dispensers or make sanitizer available at entrances and in common areas**
   b. Establish sign-in stations or check points for employees with health questionnaire on symptoms
   c. Encourage employees to self-identify and report symptoms before returning to work
   d. **Perform deep disinfection of stored goods between shifts (i.e., mechanical sprayer / thermal foggers)**

II. Employee Protection
   a. **Ensure enough masks available for all employees that are in contact with other people (including office workers, warehouse workers unable to social distance, and customer facing shipping and delivery workers), as well as sufficient quantities of soap, hand sanitizer, gloves as necessary**
   b. Have employees plan on working remotely when and where possible, and encourage employees to stay home if sick or caring for a family member
   c. **Acquire uniforms to supply employees with enough uniforms to be able to wear a clean uniform each shift**
   d. Restructure shifts, reducing overlap and staggering break times to ensure social distancing once employees return
   e. **Barriers between all workstations**
   f. Divide critical function teams with groups alternating work in-office or using satellite sites

III. Non-employee Protection
   a. **Place signs notifying visitors, other non-employees of strict PPE requirements (i.e., masks for all visitors); ensure signs are posted in multiple languages (English, Spanish, Creole)**
   b. Use supplier and customer networks to inform non-employees of new safeguarding protocols
   c. Streamline visiting process and communicate to employees, including no-contact warehouse pickups and no in-person supplier/distributor meetings

IV. Business Process adaptations
   a. **Mark with arrows entry and exit points, creating one-way circulation paths inside warehouses**
   b. Ensure acquisition of enough equipment to be able to limit workers from sharing; institute policies to sanitize equipment where sharing of equipment is unavoidable
   c. Institute protocols for touchless paperwork, including acquiring tablet computers, or setting guidelines for employees to use their own emails or mobile phones if necessary
   d. Change and/or upgrade site HVAC filters (per OSHA guidance)

e. Remove public seating areas, if possible, and enforce distancing through signaling
f. Acquire necessary technology to enable adoption of contactless payment mechanisms (e.g., credit cards) for delivery and drop-offs

V. Employer-led public health interventions
a. **Establish trainings for all personnel in new operating protocols and modifications to existing codes of conduct to deal with Covid-19 issues**
b. **Post CDC signage in publicly trafficked locations emphasizing measures to "Stop the Spread of Germs" (CDC) and exercise social responsibility (e.g., hygiene)**
c. Design work group shifts to ensure easier tracking and tracing, and design no-overlap shifts
d. Acquire contactless (or regular, with heavy sanitization protocols) thermometers for daily employee check in monitoring of temperatures
e. Evaluate the need for testing program for high risk employees (e.g., frequent contact with customers or suppliers; travel between sites; direct contact delivery)

VI. Industry-wide safeguards
a. **Clean and disinfect multi-touch equipment like handgrips carts, steering wheels, pallet trucks, etc. every time a user changes and after each shift**
b. **Wash hands or use hand sanitizer between deliveries** and utilize alternative delivery options to minimize personal contact (i.e. pick up and drop off locations) and touchless paperwork and confirmations
c. Acknowledge in writing the review and understanding of relevant industry association and union organizations guidelines, including capability checklists and reference to WHO, DOH and CDC guidelines
d. **Establish protocol to immediately disclose infection to state DOH bodies and procedure to safeguard store (e.g., deep cleaning)**
e. Setup clear reporting protocols based on leading (e.g., thermometer temp spikes, thermal scanning spikes, increased absenteeism) and lagging indicators (e.g., staff health visits above pre-defined rate, community spread in retailer locale)