



COVID-19 RE-OCCUPANCY EXPOSURE CONTROL PROGRAM



**Rosslyn Business Improvement District
Arlington, VA 22209**

Prepared For:

Rosslyn Business Improvement District
1911 N. Fort Myer Drive
Suite LL-10
Arlington, VA 22209

Hillmann Project Number: V3-12367

May 7, 2020

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COVID-19 REOCCUPANCY EXPOSURE CONTROL PROGRAM

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Arlington, VA 22209



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1.0 EXECUTIVE SUMMARY

1.1 General

This Re-Occupancy Exposure Control Program has been developed for the Rosslyn Business Improvement District located in Arlington, VA 22209. This program addresses best practices to incorporate when preparing facilities and suites to provide a clean, safe work facility prior to re-occupancy by personnel, customers, and/or tenants. The program outlines general information regarding COVID-19, preparation of the indoor environment and water management system, recommended ongoing social distancing best practices, the proactive/preventative cleaning methods to reduce potential COVID-19 transmission, the reactive cleaning methods to be utilized in the event a person(s) with a confirmed case of COVID-19 or Persons Under Investigation (PUI), and the recommended personal protective equipment (PPE) associated with Re-Occupancy and cleaning.

This COVID-19 Re-Occupancy Exposure Control Program is intended to be used as a guidance to property management, janitorial/housekeeping staff and cleaning/remediation contractor and should be modified based on updated guidance from the CDC, WHO, and other health organizations. Social distancing, cleaning and remediation activities should be performed in a manner that prevents the cross contamination of the coronavirus to areas outside suspected or confirmed impacted areas. The health and safety of the workers must be protected during daily operations, cleaning and remediation activities.

It is important that knowledge of generally accepted characteristics of the COVID-19 virus and means to contain or eliminate the virus from an environment be understood. In addition, since knowledge of this new virus is continually evolving, it is equally important to continually review and understand updated information as it is disseminated from industry and government health officials. As updated information and directives are disseminated, requirements and recommendations of this program may need to be updated. This program relies upon currently available information from the CDC, WHO and, where applicable, state and local governmental regulations, which are themselves still collecting data and refining their recommendations, as a guide to best practices to minimize exposure and reoccupy buildings. Current health officials' understanding of the specific characteristics of the COVID-19 virus are:

- COVID-19 does not affect all individuals in the same way. Some individuals become seriously ill while others develop cold like symptoms which abate over a relatively short period of time. Accordingly, some infected individuals will not be aware they are infected, and could thus spread the virus.
- COVID-19 appears to be highly contagious. According to the WHO, “The COVID 19 virus spreads primarily through droplets of saliva or discharge from the nose when an infected person coughs or sneezes...” Talking and breathing can also release droplets and particles.

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- Testing of individuals has been limited to date, though efforts continue to improve.
- Infected individuals may potentially ‘contaminate’ a recently cleaned area and therefore, a guarantee or warranty of a ‘virus free’ area is not possible

Therefore, it is important to understand that the use of this Program will not eliminate the possibility that occupants may become infected.

This protocol has been developed solely for use by the Client in the management of the specified building or premises. It is not intended to be used by any other party(ies) or for any other purpose. It is not intended to be used by individuals in their domestic setting or for any activities outside of the specified building/premises.

1.2 Coronavirus Disease 2019 (COVID-19)

What is it? Coronavirus disease 2019 (COVID-19) is a respiratory illness that can spread from person to person. The virus that causes COVID-19 is a novel (new) coronavirus (SARS CoV-2) that was first identified during an investigation into an outbreak in Wuhan, Hubei Province, China.¹

Symptoms: Patients with COVID-19 have had mild to severe respiratory illness with symptoms of fever, cough and shortness of breath.¹ Most people (about 80%) recover from the disease without needing special treatment. Around 1 out of every 6 people who gets COVID-19 becomes seriously ill and develops difficulty breathing. Older people, and those with underlying medical problems like high blood pressure, heart problems, obesity or diabetes, are more likely to develop serious illness.²

How Does It Spread? The virus is thought to spread mainly from person-to-person between people who are in close contact with one another (within about 6 feet) via respiratory droplets produced when an infected person coughs or sneezes. It may also spread by contact with items contaminated with SARS-CoV-2 and then touching their mouth, nose or possibly eyes, however this not thought to be the primary way the virus spreads. Current evidence suggests that novel coronavirus may remain viable for hours to days on surfaces.

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2.0 INDOOR ENVIRONMENTAL CONDITIONS

Buildings have been at minimal or no occupancy over a period of several weeks while occupants have been required to shelter-in-place at home. Normal building operations have been altered in response to this change, including, but not limited to, shortened HVAC operational times, lessened housekeeping in tenant spaces, increased surface cleaning in common areas, change of cleaning/disinfection chemicals, and significantly reduced domestic water usage.

In order to prepare the building to return average occupancy, Hillmann has created the following recommendations based on guidance from the CDC, WHO, OSHA, and ASHRAE.

2.1 Physical Building Condition

A general walk-through should be conducted to determine the current condition of the building and identify necessary actions to prepare the building for occupancy. Inspection elements of the walk-through should include the state of current housekeeping; including the presence of surface dust, old/rotten food items, trash, and pest infestations.

Visual indicators for potential moisture and microbial issues, such as water staining, condensation, standing water, and suspect microbial growth should be noted. Area with unusual or foul odors should be noted and investigated.

As cleaning products have been substituted for disinfectant to combat COVID19, facilities should review proper storage, label, mixing (where applicable) of these products. Adjustment and updates to the facility Community Right to Know Program and reporting should be completed. To ensure proper usage and chemical safety, information on these products should be included in the facility's Hazard Communication Program (OSHA Standard 1910.1200) and communicated to applicable personnel.

2.2 Heating Ventilation and Air Conditioning (HVAC) Systems

2.2.1 General HVAC Considerations:

Disease transmission is complex and transmission through the HVAC system must be considered. The American Society of Heating Refrigeration and Air Conditioning Engineers (ASHRAE) has stated “Transmission of SARS-CoV-2 through the air is sufficiently likely that airborne exposure to the virus should be controlled. Changes to building operations, including the operation of heating, ventilating, and air-conditioning systems, can reduce airborne exposures.” Inspections, monitoring and modifications to a properly functioning HVAC system can reduce airborne infectious disease transmission by:

- Isolating high-risk areas and making use of room pressure differentials to minimize air-flow from high-risk areas to low-risk areas.

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- Confirming effective particle filtration within the central air handlers to minimize cross contamination.
- Increasing the Outdoor Air (OA) ventilation rate (dilution).
- Temporary discontinuation of lower ventilation rates associated with energy conservation programs.

Please note, some non-HVAC strategies such as, encouraging employees to work at home, the prompt identification of employees with influenza-like symptoms, and community source controls and personal hygiene, (i.e. proper sneeze/cough etiquette), are thought to be more effective than HVAC interventions.

HVAC systems can also contribute to the transmission of airborne infectious disease in some circumstances. Proper maintenance of the HVAC system in response to the nature of the infectious disease outbreak is a critical elements of an effective HVAC management system. Monitoring of infectious disease outbreak and transmission routes must be closely followed by tracking and reviewing US CDC and WHO guidance as they are updated. Only those chemical products specifically approved by the US EPA for usage within an HVAC system should be utilized.

The building management and engineers should follow best practice standards and guidelines such as those specified in the American Society of Heating Refrigeration and Air Conditioning Engineers (ASHRAE) standards and guidelines. These include ASHRAE 62.1-2019 Ventilation and Acceptable Indoor Air Quality, ASHRAE 55-2017 Thermal Environmental Conditions for Human Occupancy, if applicable ASHRAE 170 Ventilation of Health Care Facilities, and ASHRAE Indoor Air Quality Guide (2009).

2.2.3 Re-Occupancy Ventilation and HVAC Operation:

- Contact supply vendors and confirm access and delivery (if applicable) for critical supplies, such as filters.
- Visually inspect units HVAC coils, pans, and insulation and conduct general HVAC maintenance throughout facility, including parking garage fans, to confirm equipment is operational. Any required cleaning and maintenance shall be conducted in accordance with National Air Duct Cleaners Association (NADCA) protocols.
- Inspect and confirm all exhaust systems (e.g. restroom, parking garage, fitness centers, kitchen/restaurant) are operating appropriately. Critical exhaust systems should be operating two hours before and two hours after typical occupancy.
- Replace/upgrade air filters of the central air system to a Minimum Efficiency Reporting Value (MERV) of 13, or the highest compatible with the filter rack and HVAC unit. To reduce the

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potential for air by-pass, the filter edges should be sealed. Filters should be replaced 24 hours before Re-Occupancy.

- Increase outdoor air dampers to maximum capacity, preferably to 100% and especially during mild weather, to ‘flush out’ the building. Open outdoor air dampers at minimum, four hours before Re-Occupancy. Modifications on outdoor air capacity will require adjustment during extreme weather, but should continuously be set to the maximum capacity that is feasible.
- Operate the HVAC system at the typical schedule utilized during normal occupancy for a minimum of 72 hours prior to reopening. Consider an increased operation schedule to maximize benefits associated with increased filtration and ventilation, preferably 24/7 if possible. A typical schedule should include outside air at approximately 20% of supply air makeup.
- For sensitive areas consider adding portable room air cleaners equipped with HEPA or high-MERV filters.
- Confirm that the overall building is operating at pressure differential that is positive relative to the exterior.
- Review HVAC preparations with tenants and discuss any contractual agreements regarding tenant supplemental units.

Cleaning and disinfection of indoor air may be a concern for tenants, occupants, and building management. At this time, the CDC has not issued an official statement with regard to air sanitization systems and products. While these systems or products may have potential benefits, it should be understood that many have potential negative health effects and may cause more harm than good and a comprehensive evaluation is required prior to any alteration. Currently, there have been no published studies showing effectiveness of air sanitization against SARS-CoV-2 specifically.

- Ultra violet germicidal irradiation systems have been long used in hospital and healthcare settings to assist in breaking down particles in the air and on surfaces that potentially carry infectious disease. Systems can additionally be installed in HVAC systems that irradiate the small airborne particles containing microorganisms as the air flows over the condensate coils or through the ducts. Some published studies of the health benefits of applying ultra violet systems in ducts of HVAC systems outside of health care facilities. Ultra violet light can cause damage to plastics, human skin, and eyes so additional safety precautions are required by maintenance personnel. UVGI devices should be reviewed and considered during future renovations or capital improvements, particularly in high volume areas.
- Bipolar Ionization is another air purification system used in buildings. Bipolar ions are introduced into the air source supplied into the space. The ions saturate the space and can

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interact with contaminants and VOCs suspended in air and on surfaces. The ion effect and benefits are continuous as long as the air supply is providing air to the space continuously. The bi-polar ionization destroys the surface of the virus limiting its infectivity. Byproducts of converting VOCs can be formaldehyde, aldehydes, acetone and other potentially harmful substances. These systems can be expensive to operate due to high energy consumption, and the Bipolar Ionization tubes must be replaced every 2 years.

- Ozone fogging or ozone machines are occasionally used by remediation and restoration contractors for cleaning, disinfection, and odor control. While ozone can has the potential to effectively disinfect the air and surfaces within a space, it is extremely harmful to human health. The EPA has reported there is a variety of health effects associated with high levels of ozone and it should never be utilized in an occupied space even by a properly trained technician. It is not a recommended cleaning or disinfection methodology.

Prior to installation of any new system, or alteration of an existing one, a full inspection should be conducted to ensure it is operating as intended, that proper filtration is being utilized, and that interior items like fins/ coils/ drain pans/ interior insulation are clean and free of dirt and debris.

2.3 Indoor Air Quality

Potential indoor air quality concerns should be addressed prior to Re-Occupancy, on a routine schedule, and if complaints occur thereafter. This includes monitoring to ensure common indoor air parameters and contaminants are within recommended and regulatory limits.

- Consider conducting testing for baseline indoor air quality parameters including but not limited to: temperature, relative humidity, carbon monoxide, carbon dioxide, ozone, hydrogen sulfide, particulate matter 2.5 and 10 (dust), formaldehyde, and total volatile organic compounds.
- Testing parameters should take into consideration the types of disinfectant products utilized within a space. The disinfectant products may vary compounds that are potential irritants to occupants with regard to odors and symptoms of headaches or sinus and respiratory systems.
- Ensure that plumbing traps are full to block sewage related odors and gases. Foul odors and gases should be investigated and addressed immediately.
- Inspect that sewage ejection systems are operational and adequately maintained.

2.4 Water System Management

Maintain water systems with the adequate temperature, inspections and disinfections as needed per the facilities water maintenance and management program.

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2.4.1 Domestic Water Systems

- Drain and flush water heaters and ensure the temperature is set to at least 120°F. Higher temperatures can further reduce the risk of Legionella growth, but ensure that measures to prevent scalding are taken when the water heater temperature is set to >130°F.
- Flush the water system:
 - Flush hot and cold-water lines through all points of use (e.g.- showers, sink faucets).
 - Ensure all P and U-traps on the plumbing drains are wet.
 - Flush all cold-water outlets and drinking fountains for a minimum of four (4) minutes. All faucets and systems should be flushed for 5 to 10 minutes per CDC guidelines.
 - Pasteurize the hot water system by raising the water heater temperature to a minimum of 70°C (158°F) for 24 hours and then flushing each outlet for 20 minutes. It is important to flush all taps with the hot water. Exercise caution to avoid serious burns from the high-water temperatures used in the thermal disinfection process.
- After the water system has returned to normal usage, ensure that the risk of Legionella growth is minimized by regularly checking water quality parameters such as temperature, pH, chlorine and disinfectant levels and keeping up to date with your water management policies and procedures.
- Sampling for Legionella and other water quality measures may be warranted based on deficiencies noted when checking of water quality parameters or the water management program.

2.4.2 Non-Potable Water Systems

- Drain, clean, and refill all decorative water features, such as fountains. Be sure to follow any recommended manufacturer guidelines for cleaning.
- Ensure that cooling tower equipment (e.g. drift eliminators, spray nozzles, pump systems, bleed off systems, treatment chemical points) and basins are free of visible slime, algae or biofilm prior to use.
- Ensure cooling towers are running with fans on and operational. Continue to maintain inspections, disinfections and necessary testing as required to be completed as per the facility's water management program and in compliance with other applicable federal, state and local regulations.

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- Cooling towers that have been offline or idle for an extended period of time (>5 days), as a best practice, should be drained and undergone disinfection and/or hyperhalogenation by an approved water treatment company. Additionally, Legionella testing is recommended. Documentation should be maintained of the cooling tower procedures conducted.

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3.0 PROACTIVE CLEANING AND DISINFECTION

3.1 Proactive & Reactive Cleaning and Disinfection

Preventative operation methods and proactive cleaning should be continued to be instituted until otherwise directed by federal, state and local government. Facilities that did not have preventative operation methods and proactive cleaning should have such procedures instituted immediately and well before Re-Occupancy.

Upon being notified of a potential or known visitation within the building by a COVID-19 impacted individual, please complete the checklist in Appendix A *COVID-19 RESPONSE CHECKLIST*.

Reactive cleaning and disinfection methods (detailed in *Section 3.0 Reactive Cleaning & Disinfection*) should be utilized if a person(s) with a confirmed case of COVID-19, or a person(s) with reasonably suspected contact with a confirmed case, has occupied the building. In addition to following the recommendations of *Section 3.0 Reactive Cleaning & Disinfection*, cleaning and remediation should be conducted in accordance with all CDC and WHO recommendations, and applicable federal, state, and local regulations.

Finally, it is important to maintain a strong channel of communications with the various Unions and Vendors that may be operating within the building, as many have established programs to protect their members and employees.

3.2 Preparation for Re-Occupancy & Continuous Cleaning and Disinfection

During ongoing occupancy, increased standard and routine cleaning of high touch surface should occur regularly in common areas (Level 1 or Level 2). Upon being notified of the potential or known visitation to the property by a COVID-19 impacted individual, Level 3 or Level 4 cleaning should be enacted immediately.

- Level 1: Proactive and Routine Cleaning:**

Cleaning performed by custodial staff utilizing disinfectants on the EPA List N: Disinfectants for Use Against SARS-CoV-2. Standard cleaning areas, in addition to high touch and frequently touched non-porous surfaces, within building common areas and active tenant spaces should be routinely disinfected during the day. Basic level of personal protective equipment (PPE) is required. The frequency of cleaning should be based on property type and occupancy levels.

- Level 2: Enhanced Routine Cleaning:**

Level 2 cleaning shall be performed by trained and equipped custodial staff with basic hazard and PPE training utilizing EPA List N: Disinfectants for Use Against SARS-CoV-2. To be

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conducted in building common areas or tenant areas during times where potential viral contamination is increased or suspected; based on the occupancy levels and regional prevalence of SARS-CoV-2 virus in the community.

3.3 Perform Proactive Cleaning:

- Routinely, at least daily, standard cleaning and cleaning of all frequently touched surfaces in the workplace, such as workstations, countertops, and doorknobs should occur. Use disinfectants on the EPA List N: Disinfectants for Use Against SARS-CoV-2 and follow the directions on the manufacturer label. Never dry wipe/clean a surface. Always utilize HEPA vacuums for fabrics and carpets.
- Provide disposable wipes so that commonly used surfaces (e.g. door knobs, keyboards, remote controls, desks, elevator buttons) can be wiped down by employees before each use.
- This cleaning may be conducted by typical housekeeping personnel, utilizing proper PPE for the cleaning solutions they are utilizing. Additional training for typical housekeeping and janitorial personnel on new disinfectants and proper PPE should occur prior to all cleaning and disinfecting activities.
- Based on the occupancy levels and regional prevalence of SARS-CoV-2 virus in the community, or during times where potential viral contamination is increased or suspected, common areas or tenant areas and high touch surfaces should undergo enhanced routine cleaning. This cleaning shall be performed by trained and equipped custodial staff with basic hazard and PPE training utilizing EPA List N: Disinfectants for Use Against SARS-CoV-2.

3.4 Occupant / Employee / Tenant Communication

- Actively encourage sick occupants/employees to stay at home.
- Isolate occupants/employees with influenza-like symptoms from other occupants/employees and send them home as soon as feasible.
- Emphasize staying at home and proper sneeze/cough etiquette with signage throughout the building, especially in the restrooms, elevators, break/lunch rooms and high-traffic areas.
- Occupants/employees that are caring for family members with confirmed COVID-19 should notify their supervisor and employer and be encouraged to stay at home.

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4.0 BEST PRACTICES FOR ONGOING OCCUPANCY

Until the risk of illness due to COVID-19 transmission is significantly reduced and social distancing requirements/guidance are relaxed, how people operate and occupy buildings will have to be altered to limit the potential transmission of the virus. The way people move into, through and utilize the building must be adjusted to maximize physical spacing between occupants throughout the workday. The following guidelines are presented with the below general considerations in mind. Additional alteration and requirement specific to certain buildings may be required.

4.1 General Considerations

- Employees, tenants and occupants should be instructed to stay home if they have been diagnosed with COVID-19, or have any symptoms of the virus or any cold. Those who have been in close proximity to other symptomatic individuals should also be encouraged to remain at home and self-quarantine. Sick employees should follow CDC recommended guidelines. Employees should not return to work until the criteria to discontinue home isolation are met, in consultation with healthcare providers and state and local health departments.
- All personnel entering the facility must wear face protection. Establish signage to clearly convey this requirement at all entrances. Notify building tenants of this requirement prior to enforcement.
 - If N95 and similar types of masks are not available, a reusable face shield or cloth face covering that can be decontaminated may be an acceptable method of protection. Cloth face coverings are being promoted by the CDC to allow for supplies of traditional face masks (N95s, etc.) to be reserved for healthcare personnel. Cloth face coverings can be made from breathable household items. According to the CDC, children under the age of 2 years old and anyone having trouble breathing should not wear a face mask or face covering.
 - Note that N95 are tight fitting, negative pressure respirators that are regulated under OSHA. Therefore, employers may not provide employees with these respirators unless they have a Medical Surveillance Program, a Respiratory Protection Program, and fit test each employee.
- Communicate and coordinate with tenants and staff to stagger shift start and break times in a manner that evens out the flow and ebb of occupants utilizing elevators and building egresses.
 - Consult with tenants on their general plan to reoccupy suites and projected number and schedule of when employees will be entering the building. Provide them with Appendix C of this Program to assist in their preparation.
 - Discuss with tenants the exact date the building will be reopened and any daily timeframes where the building is closed for access to the tenants.
- Allow stairwell usage as an alternative to elevators.
- Post signage encouraging frequent hand-washing, mouth coverings, and proper cough/ sneeze etiquette.

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- Reduce occupancy of establishments in accordance with local and state regulations and orders.
- Be cognizant that increased cleaning operations, and chemicals utilized, may potentially negatively impact indoor air quality. Ensuring proper outside air levels in supplied air is important to dissipate odors and provide adequate fresh air.

4.2 Building Lobby and Elevators

Control the flow of traffic to promote proper social distancing. Walk the area(s) and review floor plans to identify and mitigate potential ‘choke points’ where people would naturally come into close contact as they travel through the facility.

Controlling traffic flow may be accomplished by:

- Clearly marking entry and exit doors. If possible, have a gap between the two doors so that people going in opposite directions do not come into close proximity to each other.
- Entry and exit turnstiles should be set up and clearly marked to direct traffic entering and exiting. If possible, have a gap between the two so that people going in opposite directions do not come into close proximity to each other.
- Retail and dining tenants that have direct egress to outdoor should be prevented from entering building common areas to reduce traffic in these areas.
- Clearly mark visitor and delivery entrances.
- Security / Welcome Desk settings may require alteration to prevent close contact. Consider creating setting-specific queues and use of clear plexiglass shields to separate visitors from building personnel.
- Separate or remove lobby furniture to ensure proper social distancing. Any furniture remaining must be cleaned routinely as part of the enhanced cleaning protocol; considered temporary replacement to non-porous furniture. Fabric furniture should be cleaned via HEPA vacuuming.
- Create a clear exit/walkway pathway from the elevators with the use of stanchions with ropes/belt barriers, floor tape, signage or similar.
- Alter the elevator door closing interval to allow more time for people to fully depart before people enter. Consider having security personnel control the amount of people allowed in each elevator cab.
- Reduce the allowable number of people in elevator cabs to ensure proper social distancing. Consider the size of the elevator to determine a proper load while maintaining six-foot social distancing.
- Mark floors with stop points and six-foot spacing intervals to prevent crowding. Consider floor markings for crowd flow.

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- Place signage in high visibility locations to direct traffic, areas to stop and wait elevator to clear before entering, etc.
- Consider placing hand sanitization and disinfectant wipe stations in prominent areas to encourage their usage by occupants. Hand sanitizer should contain a minimum of 60% alcohol. Disinfectant wipes should be approved on the EPA List N: Disinfectants for Use Against SARS-CoV-2.
- Place additional waste receptacles adjacent to entrances to collect disposable gloves and masks.

4.3 Facility and Tenant Deliveries

Continued closure of sit-down eateries, restaurants and local parks will likely increase the volume of food deliveries. Create or alter a standard delivery policy that limits movement of outside delivery personnel through a building. Consider setting policies that limit the allowable volume of deliveries per tenant.

- Smaller/ individual orders should have a centralized collection area intended to limit personnel contact and prevent delivery personnel from accessing the building. Occupants should collect orders at the location thereby restricting delivery drivers from entering the building. Occupants should encourage delivery drivers to call before arrival to reduce occupants from lingering in common areas while waiting for food deliveries.
- Require that tenants to schedule larger scale catering events in order to minimize the flow of delivery personnel and usage of freight elevators. This can be accomplished by requiring tenants to schedule such events ahead of time and established time slots for this purpose.

4.4 Loading Dock and Freight Elevators

Require scheduling of deliveries through the loading dock to prevent gatherings and backups. When necessary, require delivery personnel to wait outside the building until sufficient space and access is available.

- Expand allowable delivery hours to lessen and stagger the load of occupancy. Encourage evening or off-peak delivery hours.
- Place hand sanitizations and disinfectant wipe stations in accessible areas and encourage their use.
- Require delivery personnel to wear face coverings and disposable gloves (fresh upon arrival). Place waste receptacles within loading dock areas.
- Freight elevators require enhanced cleaning of high touch surfaces. Conduct following usage by outside vendors and visitors immediately.

4.5 Mail Rooms

- Employees should wear disposable gloves and face coverings when handling mail and packages.

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- Incoming packages should be kept in a specific area and then wiped with disinfecting wipes before being distributed to the intended recipient.
- Horizontal surfaces throughout a mail room should be part of the enhanced cleaning service being conducted in the building or by the tenant.

4.6 Engineering and Back of House Areas

- Building staff and vendors should wear face coverings when in close proximity to other people, and when working on air handling equipment.
- Building staff and vendors should wear gloves and face coverings when changing air filters.
- Ensure proper 6-foot social distancing in offices, hallways, locker rooms, and restrooms.
- Encourage frequent hand washing and place hand sanitization stations in frequently traveled areas.

4.7 Tenant Occupied Floors - Common Areas and Restrooms

- If necessary, ensure there is a clear exit/walkway pathway from the elevators with the use of stanchions with ropes/belt barriers, floor tape or similar.
- Alter the elevator door closing interval to allow more time for people to fully depart before people enter.
- Mark floors with stop points and spacing intervals to prevent crowding.
- Limit the number of people who may ride an elevator to ensure proper social distancing. Consider the size of the elevator in determining a proper load while maintaining six-foot social distancing.
- Place signage in high visibility locations to direct traffic, areas to stop and wait elevator to clear before entering, etc.
- Consider placing hand sanitization and disinfectant wipe stations in prominent areas to encourage their usage by occupants. Hand sanitizer should contain a minimum of 60% alcohol. Disinfectant wipes should be approved on the EPA List N: Disinfectants for Use Against SARS-CoV-2.
- Consider limiting urinal usage if six-foot social distancing without barriers is not possible.

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4.8 Public Restaurants

Public Restaurants should only be operational where allowed by local jurisdiction, and in accordance with those regulations.

- **Local/ State requirements are evolving and may be more stringent than those proposed below. Be sure to routinely check with the Health Department.**
- Thoroughly detail-clean and sanitize entire facility, especially if it has been closed. Focus on high-contact areas that would be touched by both employees and guests. Do not overlook seldom-touched surfaces. Follow sanitizing material guidance to ensure it's at effective sanitizing strength and to protect surfaces.
- Avoid all food contact surfaces when using disinfectants.
- Between seatings, clean and sanitize table condiments, digital ordering devices, check presenters, self-service areas, tabletops, and common touch areas. Single-use items should be discarded. Consider using rolled silverware and eliminating table presets.
- Remove lemons and unwrapped straws from self-service drink stations.
- Clean and sanitize reusable menus. If you use paper menus, discard them after each customer use. Implement procedures to increase how often you clean and sanitize surfaces in the back-of-house. Avoid all food contact surfaces when using disinfectants.
- Check restrooms regularly and clean and sanitize them based on frequency of use.
- Make hand sanitizer readily available to guests. Consider touchless hand sanitizing solutions.

4.8.1 Social Distancing Guidelines for Public Restaurants

The following additional social distancing guidelines are recommended for Public Restaurants to prevent illness of their employees and customers:

- Update floor plans for common dining areas, redesigning seating arrangements to ensure at least six feet of separation between table setups. Limit party size at tables to no more than the established “maximum approved” as recommended by CDC or approved by local and state government. Where practical, especially in booth seating, physical barriers are acceptable. Consider a reservations-only business model or call-ahead seating to better spaced diners.
- Any social distancing measures based on square footage should take into account service areas as well as guest areas.
- Establish areas for take-out pickup and related wait lines. Remind those people and any suppliers that you have internal distancing requirements.

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- Post signage at the entrance that states that no one with a fever or symptoms of COVID-19 is to be permitted in the restaurant.
- Limit contact between waitstaff and guests. Where face coverings are not mandated, consider requiring waitstaff to wear face coverings (as recommended by the CDC) if they have direct contact with guests.
- If practical, physical barriers such as partitions or Plexiglas barriers at registers are acceptable.
- Use technology solutions where possible to reduce person-to-person interaction: mobile ordering and menu tablets; text on arrival for seating; contactless payment options. Clean such devices between each customer usage.
- Provide hand sanitizer for guests to use, including contactless hand sanitizing stations, and post signs reminding guests about social distancing. Thank them for their patience as you work to ensure their safety.
- Try not to allow guests to congregate in waiting areas or bar areas. Design a process to ensure guests stay separate while waiting to be seated. The process can include floor markings, outdoor distancing, waiting in cars, etc. Consider an exit from the facility separate from the entrance. Determine ingress/egress to and from restrooms to establish paths that mitigate proximity for guests and staff.
- Where possible, workstations should be staggered so employees avoid standing directly opposite one another or next to each other. Where six feet of separation is not possible, consider other options (e.g., face coverings) and increase the frequency of surface cleaning and sanitizing.

Note: Face coverings may be required by government officials and/or restaurant operators to mitigate the distancing gap. If not mandated, face coverings are recommended by CDC and, when worn, they should be cleaned daily according to CDC guidance.

- Limit the number of employees allowed simultaneously in break rooms.
- With larger staffs, use communication boards to or digital messaging to convey pre-shift meeting information.

4.9 Cafeterias and Food Serving Areas

Cafeterias and Food Serving Areas should only be operational where allowed by local jurisdiction, and in accordance with those regulations.

Items requiring consideration include:

- Place hand sanitization stations at each entrance.
- Managing lines to keep customers at least six feet apart.
- Removal and/or redistribution of seating to ensure six-foot social distancing.

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- Tables/counters should be cleaned by each person upon completion of usage. Instructional signage and appropriate disinfection wipes should be provided.

4.10 Childcare Facilities

Childcare Facilities should only be operational as permitted by state and/or local authorities, and in accordance with applicable regulations and executive orders.

- **Local/ State requirements are evolving and may be more stringent than those proposed below.** Be sure to routinely check with the applicable state or local agency that has jurisdiction over COVID-19 related operational restrictions.
- Thoroughly clean and sanitize the entire facility, especially if it has been closed. Focus on high-contact areas that would be touched by both employees and customer. Do not overlook seldom-touched surfaces. Ensure that sanitizing products are utilized in accordance with manufacturer's instructions, including minimum contact times. This will help to maximize the product's sanitizing strength and ensure that surfaces are effectively disinfected.
- Routinely clean and disinfect surfaces and objects that are frequently touched. This may include cleaning objects/surfaces not ordinarily cleaned daily (e.g., doorknobs, light switches, classroom sink handles, countertops). Clean with the cleaners typically used. Use all cleaning products according to the directions on the label. For disinfection, most common EPA-registered household disinfectants should be effective.
- Develop and implement procedures to check for COVID-19 illness signs and symptoms of children and employees daily upon arrival, as feasible.
- If feasible, implement enhanced screening for children and employees who have recently been present in areas of high transmission, including temperature checks and symptom monitoring.
- Encourage anyone who is sick to stay home.
- Plan procedures to undertake in the event that children or employees get sick during the day.
- Monitor child and employee absences and have a pool of trained substitutes and flexible leave policies and practices. For family child care, if feasible, have a plan for a substitute caregiver if a provider or a family member in the home gets sick
- Properly utilize ventilation systems including increased introduction of fresh air into indoor spaces. The following are examples of ways to maximize staff/customer's exposure to fresh air:
 - Encourage outdoor activity and classes, if feasible.
 - Open doors and windows if possible
 - Maximize fresh air through your ventilation system.
 - Maintain relative humidity at 40-60%
 - Ensure the restroom's ventilation is under negative-pressure.

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- If additional guidance is needed regarding the operation of ventilation system, ask a HVAC professional and see ASHRAE updates for more information.
- Consider using portable HEPA filtration units.
- Establish a disinfection routine for staff at regular intervals.
 - Ensure disinfection protocols follow product instructions for application and contact time.
 - Consider using furniture with non-porous material for easy clean up or use a disposable cover as used in dentist or medical offices. As noted above, clean HVAC intakes and returns daily.
 - Changing tables, chairs, toys, and other items regularly used need to be disinfected after each use.
 - Consider using a checklist or audit system to track how often cleaning is conducted.
- Smocks, towels, clothing, etc. should be placed in plastic bags after each use and treated as potentially contaminated and should be washed and dried on the highest temperature setting allowable for the fabric.
- Provide EPA-registered disposable wipes to teachers and staff so that commonly used surfaces (e.g., keyboards, desks, remote controls) can be wiped down before use.
- Single-use items and used disinfection materials can be treated as regular waste. Follow regular safety guidelines when handling these materials.
- Ensure handwashing strategies include washing with soap and water for at least 20 seconds, especially after going to the bathroom; before eating; and after blowing your nose, coughing, or sneezing. If soap and water are not available and hands are not visibly dirty, use an alcohol-based hand sanitizer that contains at least 60% alcohol.
- Provide hand washing stations at the entrances of the facility and throughout the facility to encourage regular handwashing or, alternatively, hand sanitizer.
- Provide or encourage employees to wear face coverings, gloves and to use hand sanitizer. (**NOTE: Homemade face coverings primarily protect others not yourself.**)
- Communicate to parents what the facility is doing to mitigate the spread of COVID-19. (e.g.- disinfection routine, health policies for staff, and health & safety measures in place).
- Consider communicating to parents when it may not be a good idea for children to come into the school (e.g. being taking care of someone who is COVID-19 positive, exhibiting symptoms of COVID-19, being in a high-risk category, etc.). A questionnaire or checklist could be used to clear students to enter the school.
- Communicate that the school has the right to refuse admittance into the facility to anyone exhibiting symptoms or not following guidelines (e.g., physical distancing, wearing a face mask, etc.).

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4.10.1 Social Distancing Guidelines for Childcare Facilities

The following additional social distancing guidelines are recommended for Childcare Facilities to prevent illness of their employees, children, and their families:

- Limit the number of children in the classroom at one time. Parents should drop off their children outside the front door.
- **Stagger arrival and/or dismissal times.** These approaches can limit the amount of close contact between students in high-traffic situations and times.
- Consider establishing a process for parents to remain in their cars/outside of the school until they are notified (either by text or phone call) that their child is ready to be picked up.
- Establish an isolated area for all delivery companies to drop off materials and supplies (i.e., minimize their presence in the school).
- **Limit nonessential visitors.** Limit the presence of volunteers for classroom activities, mystery readers, cafeteria support, and other activities.
- **Cancel field trips, assemblies, and other large gatherings.** Cancel activities and events such as field trips, special performances, or school-wide parent meetings.
- **Increase the space between children.** Rearrange student chairs to maximize the space between students. Have children face in the same direction (rather than facing each other) to reduce transmission caused from virus-containing droplets (e.g., from talking, coughing, sneezing).
- **Avoid mixing children in common areas.** For example, allow children to eat lunch and breakfast in their classrooms rather than mixing in the lunchroom. If it is not possible to suspend use of common areas, try to limit the extent to which students mix with each other, and particularly with children from other classes (e.g., stagger lunch by class, segregate lunch and recess area by class).
- Try to avoid taking multiple groups to bathrooms at once (e.g., avoid having all classes use the bathroom right after lunch or recess). Consider staggering playground use rather than allowing multiple classes to play together, and limit other activities where multiple classes interact.
- Adjust activities and procedures to limit sharing of items such as toys, belongings, supplies, and equipment.
- Monitor the distance between children not playing together and maintain distance between children during nap time.
- **Teach and instruct staff, students, and their families to maintain distance from each other in the school.** Educate staff, students, and their families at the same time and explain why this is important.

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4.11 Retail Stores

Retail Stores should only be operational as permitted by state and/or local authorities, and in accordance with applicable regulations and executive orders.

- **Local/ State requirements are evolving and may be more stringent than those proposed below.** Be sure to routinely check with the applicable state or local agency that has jurisdiction over COVID-19 related operational restrictions.
- Thoroughly clean and sanitize the entire facility, especially if it has been closed. Focus on high-contact areas that would be touched by both employees and customer. Do not overlook seldom-touched surfaces. Ensure that sanitizing products are utilized in accordance with manufacturer's instructions, including minimum contact times. This will help to maximize the product's sanitizing strength and ensure that surfaces are effectively disinfected.
- At least once a day, clean and sanitize all common touch areas.
- Properly utilize ventilation systems including increased introduction of fresh air into indoor spaces. The following are examples of ways to maximize staff/customer's exposure to fresh air:
 - Encourage outdoor shopping and open doors and windows, as feasible.
 - Maximize fresh air through your ventilation system.
 - Maintain relative humidity at 40-60%
 - Ensure the restroom's ventilation is under negative-pressure.
 - If additional guidance is needed regarding the operation of ventilation system, ask a HVAC professional and see ASHRAE updates for more information
- Consider using portable HEPA filtration units.
- Check restrooms regularly. Clean and sanitize them based on frequency of use.
- Establish a “before and after service” hand washing or sanitizing for all staff.
- Provide hand washing stations at the front of the establishment or, alternatively, provide hand sanitizer if hand washing is not feasible.
- Provide hand washing stations or sanitizer at prominent locations and point of purchase.
- Encourage continued e-commerce and contactless curbside pick-up and in-home delivery.
- Use social media and other communication (signage/email/text lists) to educate customers/clients on the steps being taken for their protection.

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4.11.1 Social Distancing Guidelines for Retail Stores

The following additional social distancing guidelines are recommended for Retail Stores to prevent illness of their employees and customers:

- Crowd control: mark distances of 6 feet for customers in checkout and indoor and outdoor waiting areas using tape/markers/paint/signage.
- Any social distancing measures based on square footage should take into account service areas as well as guest areas.
- Train sales personnel and other applicable staff on physical distancing.
 - Make this a key point at greeting: "*Hello, thank you for coming in. We are here to help you, but we will be at distance of 6 feet for your safety*".
- Post signage at the entrance that states that no one with a fever or symptoms of COVID-19 is to be permitted in the store.
- Limit the number of customers shopping at one time. Consider starting with a call/text ahead program to start and limiting the family unit/group size to two or less.
- Encourage the use of self-check-out, if available.
- If store has aisles that are less than 10 feet in width, provide “one-way” floor marker to route traffic in one direction.
- Develop merchandizing strategy with distancing in mind.
 - Distance racks/shelves to 6 feet or more if unidirectional shopping, greater than 10 feet if multidirectional shopping/traffic flow.
- Consider single item display with back stock for specific color/sizing.
- Close off all changing rooms temporarily.
- Discourage customers from carrying around products they plan to purchase:
 - Encourage items to be placed in carts in large stores.
 - Identify an area near checkout where customers can place items they plan to purchase in small stores.
- For returned items, it is recommended to disinfect or isolate the items as follows:
 - Isolate paper/cardboard materials for at least 24 hours.
 - Isolate all other materials for at least 3 days.

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- Post visible store/brand specific messaging with distancing requirements.
- Consider placing clear plexiglass partitions between cashier clerks and customers.
- Post signage and arrange product displays to discourage customers from touching items that they don't intend to purchase.
- Provide hand sanitizer for guests to use, including contactless hand sanitizing stations, and post signs reminding guests about social distancing. Thank them for their patience as you work to ensure their safety.
- Where possible, checkout lines should be staggered so employees avoid standing directly opposite one another or next to each other. Where six feet of separation is not possible, consider other options (e.g., face coverings) and increase the frequency of surface cleaning and sanitizing.

Note: Face coverings may be required by government officials and/or retail operators to mitigate the distancing gap. If not mandated, face coverings are recommended by CDC and, when worn, they should be cleaned daily according to CDC guidance.

- Limit the number of employees allowed simultaneously in break rooms to ensure that social distancing is possible.
- With larger staffs, use communication boards to or digital messaging to convey pre-shift meeting information.
- Special arrangements in restrooms are required:
 - Doors to multi-stall restrooms should be able to be opened and closed without touching handles if at all possible.
 - Place a trash can by the door if the door cannot be opened without touching the handle.
 - For single restrooms, provide signage and materials (paper towels and trash cans) for individuals to use without touching the handles, and consider providing a key so disinfection measures can be better controlled.
 - Place signs indicating that toilet lids (if present) should be closed before flushing.
 - Place signs asking customers and requiring employees to wash hands before and after using the restroom.
 - Provide paper towels in restrooms and disconnect or tape-off hand air dryers.
 - Double the frequency of bathroom cleaning and disinfection.

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4.12 Doctor & Dentist Offices

Doctor and Dentist Offices should only be operational as permitted by state and/or local authorities, and in accordance with applicable regulations and executive orders.

- **Local/ State requirements are evolving and may be more stringent than those proposed below.** Be sure to routinely check with the applicable state or local agency that has jurisdiction over COVID-19 related operational restrictions.

Thoroughly clean and sanitize the entire facility, especially if it has been closed. Focus on high-contact areas that would be touched by both employees and patients. Do not overlook seldom-touched surfaces. Ensure that sanitizing products are utilized in accordance with manufacturer's instructions, including minimum contact times. This will help to maximize the product's sanitizing strength and ensure that surfaces are effectively disinfect

- At least once a day, clean and sanitize all common touch areas.
- Properly utilize ventilation systems including increased introduction of fresh air into indoor spaces. The following are examples of ways to maximize staff/customer's exposure to fresh air:
 - Maximize fresh air through your ventilation system.
 - Maintain relative humidity at 40-60%
 - Ensure restroom is under negative pressure
 - If additional guidance is needed regarding the operation of ventilation system, ask a HVAC professional and see ASHRAE updates for more information.
- Consider using portable HEPA filtration units.
- Establish a disinfection routine for staff at regular intervals.
 - Ensure disinfection protocols follow product instructions for application and contact time.
 - Dental chairs, examining tables, and point of payments for deductibles should be disinfected after each customer.
 - Consider covering chairs in a non-porous material for easy clean up or use a disposable cover. As noted above, clean HVAC intakes and returns daily.
 - Consider using a checklist or audit system to track how often cleaning is conducted.
 - Wipe down / disinfect all equipment used on patient after each use.
- Lab coats and other protective garments should be placed in plastic bags after each use and treated as potentially contaminated. They should be washed and dried on the highest temperature setting allowable for the fabric.
- Single-use items and used disinfection materials can be treated as regular waste. Follow regular safety guidelines when handling these materials.
- Check restrooms regularly. Clean and sanitize them based on frequency of use.
- Establish a “before and after” appointment hand washing or sanitizing for all staff.

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- Provide hand washing stations at the front of the office or, alternatively, hand sanitizer if hand washing is not feasible for all patients that enter the office.
- Upon exiting the bathroom, upon entering and upon leaving the office, provide hand sanitizer for clients to disinfect their hands completely.
- Require the use of gloves for all staff and ensure that the gloves are changed after each patient. In addition, require staff to wash their hands after each patient.
- Provide or encourage employees to wear face coverings, gloves and to use hand sanitizer. (**NOTE: Homemade face coverings primarily protect others not yourself.**)
- Consider wearing face shields
 - Communicate to customers what the office is doing to mitigate the spread of COVID-19. (e.g.- disinfection routine, health policies for staff, and health & safety measures in place).
- Consider communicating to clients when it may not be a good idea to come into the office (e.g. taking care of someone who is COVID-19 positive, exhibiting symptoms of COVID-19, being in a high-risk category, etc.). A questionnaire or checklist could be used to clear clients to enter the office.
- Communicate that the office has the right to refuse service or admittance to anyone exhibiting COVID-19 symptoms or not following guidelines (e.g., physical distancing, wearing a face mask, etc.).
- Platforms for communication could include websites and indoor/outdoor signage.
- When available, surgical masks are generally preferred over cloth face coverings for medical/dental staff because surgical masks offer both source control and protection for the wearer against exposure to splashes and sprays of infectious material from others.
- Cloth face coverings should NOT be worn instead of a respirator or facemask if more than source control is required.
- Some medical/dental staff whose job duties do not require PPE (such as clerical personnel) should continue to wear their cloth face covering for source control while in the office.
- Other medical/dental staff may wear their cloth face covering when they are not engaged in direct patient care activities and then switch to a respirator or a surgical mask when PPE is required.
- Medical/dental staff should remove their respirator or surgical mask and put on their cloth face covering when leaving the facility at the end of their shift.
- Medical/dental staff should also be instructed that if they must touch or adjust their mask or cloth face covering they should perform hand hygiene immediately before and after.

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- Medical/dental facilities should provide medical/dental staff with **job-specific training on PPE** and have them demonstrate competency with selection and proper use (putting on and removing without self-contamination).

Because cloth face coverings can become saturated with respiratory secretions, medical/dental staff should take steps to prevent self-contamination:

- Medical/dental staff should change the coverings if they become soiled, damp, or difficult to breathe through.
- Coverings should be laundered daily and when soiled.
- Medical/dental staff should perform hand hygiene immediately before and after any contact with the cloth face covering.
- Medical/dental facilities should provide Medical/dental staff with **training about when, how, and where cloth face coverings can be used** including frequency of laundering, guidance on when to replace, circumstances when they can be worn in the facility, and the importance of hand hygiene to prevent contamination.
- All unnecessary items (magazines, toys, etc) should be removed from waiting rooms.

4.12.1 Social Distancing Guidelines for Doctor and Dentist Offices

The following additional social distancing guidelines are recommended for Doctor and Dentist Offices to prevent illness of their employees and customers:

- Limit the number of people allowed in the office at one time. Only those patients that are actually being seen should be allowed inside the premises. If a second person such as a parent or caretaker is required, only allow one additional person.
- Consider establishing a process for patients to remain in their cars / outside of the office until they are notified (either by text or phone call) that their examination room is open, and it has been properly disinfected from the previous client.
- Establish an isolated area for all delivery companies to drop off materials and supplies (i.e., minimize their presence in the salon).
- Establish pre-pay systems or self-checkout systems for deductibles and discourage the use of cash.
- Since the 6-foot social distance guideline is not practical in doctor and dentist offices to minimize facial contact, the health professional should wear a face shield.
- Require all patients to wash their hands or use hand sanitizer before being seen by the doctor/nurse/dentist/dental hygienist.

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- Use social media and other communication to educate patients on the steps being taken for their protection and what they need to do to protect staff as well.
- Special arrangements in restrooms are required:
 - Doors to multi-stall restrooms should be able to be opened and closed without touching handles if at all possible.
 - Place a trash can by the door if the door cannot be opened without touching the handle.
 - For single restrooms, provide signage and materials (paper towels and trash cans) for individuals to use without touching the handles, and consider providing a key so disinfection measures can be better controlled.
 - Place signs indicating that toilet lids (if present) should be closed before flushing.
 - Place signs asking patients and employees to wash hands before and after using the restroom.
 - Provide paper towels in restrooms and disconnect or tape-off hand air dryers.
 - Double efforts to keep bathrooms clean and properly disinfected.

4.13 Hair & Nail Salons

Hair and Nail Salons should only be operational as permitted by state and/or local authorities, and in accordance with applicable regulations and executive orders.

- **Local/ State requirements are evolving and may be more stringent than those proposed below.** Be sure to routinely check with the applicable state or local agency that has jurisdiction over COVID-19 related operational restrictions.
- Thoroughly detail-clean and sanitize entire facility, especially if it has been closed. Focus on high-contact areas that would be touched by both employees and customer. Do not overlook seldom-touched surfaces. Follow sanitizing material guidance to ensure it's at effective sanitizing strength and to protect surfaces.
- At least once a day, clean and sanitize all common touch areas.
- Properly utilize ventilation systems including increased introduction of fresh air into indoor spaces. The following are examples of ways to maximize staff/customer's exposure to fresh air:
 - Maximize fresh air through your ventilation system.
 - Maintain relative humidity at 40-60%
 - Ensure restroom is under negative pressure
 - If you don't know how, ask a HVAC professional and see ASHRAE updates for more information
- Consider using portable HEPA filtration units.

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- Establish a disinfection routine at regular intervals for staff.
 - Ensure disinfection protocols follow sanitizing product instructions for application and minimum contact time.
 - The following should be disinfected after each customer: hair dressing and salon chairs, waiting area seats, combs and other hair styling tools, point of purchase, credit card payment station.
 - Consider covering chairs in a non-porous material for easy clean up or use a disposable cover as used in dentist or medical offices. As noted above, clean HVAC intakes and returns daily.
 - Consider using a checklist or audit system to track how often cleaning is conducted.
 - Wipe down / disinfect all cutting and other tools (e.g., combs, brushes, etc.) between clients and at the beginning and end of each shift. Alternatively, stylists should have ample supply of combs and other tools at their disposal (all implements should then be disinfected, washed at the end of the day).
 - All nail tools should be disinfected between use or be single-use only.
 - Consider allowing return customers the option to buy their own nail tool kit.
- Smocks, towels, work clothing, etc. should be placed in plastic bags after each use and treated as potentially contaminated; and should be washed and dried on the highest temperature setting allowable for the fabric.
- Single-use items and used disinfection materials can be treated as regular waste. Follow regular safety guidelines when handling these materials.
- Upon time of procedure, stylists should use paper neck strip to help ensure proper hygiene with the client.
- Check restrooms regularly and clean and sanitize them based on frequency of use.
- Establish a “before and after” service hand washing or sanitizing for all staff.
- Provide hand washing stations at the front of the establishment for all clients that enter the shop; or, alternatively, provide hand sanitizer if hand washing is not feasible.
- Upon exiting the bathroom, upon entering and upon leaving salon, provide hand sanitizer for clients to disinfect their hands completely.
- Provide hand sanitizer at the point of purchase.
- Require the use of disposable single-use gloves for all staff and ensure that the gloves are changed after each client. In addition, require staff to wash their hands after each client.
- Provide or encourage employees to wear face coverings, gloves and to use hand sanitizer. (**NOTE: Homemade face coverings primarily protect others not yourself.**)
- Consider wearing face shields.
- Communicate to customers what the retail establishment is doing to mitigate the spread of COVID-19.
 - (e.g., disinfection routine, health policies for staff, and health & safety measures in place).

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- Consider communicating to clients when it may not be a good idea to come into the salon (e.g. taking care of someone who is COVID-19 positive, exhibiting symptoms of COVID-19, being in a high-risk category, etc.). A questionnaire or checklist could be used to clear clients to enter the salon.
- Communicate that the retail establishment has the right to refuse service to anyone exhibiting symptoms or not following guidelines (e.g., physical distancing, wearing a face mask, etc.).
- Platforms for communication could include websites and indoor/outdoor signage.

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4.13.1 Social Distancing Guidelines for Hair and Nail Salons

The following additional social distancing guidelines are recommended for Hair and Nail Salons to prevent illness of their employees and customers:

- Limit the number of customers in the shop at one time. Only those customers that are actually getting their hair or nails done should be inside the premises. Set up a means to check-in customers outside of the main entrance, and do not allow scheduled customers to wait within the premises.
- Consider establishing a process for clients to remain in their cars / outside of the salon until they are notified (either by text or phone call) that their chair is open, and it has been properly disinfected from the previous client.
- Establish an isolated area for all delivery companies to drop off materials and supplies (i.e., minimize their presence in the salon).
- Establish pre-pay systems or self-checkout systems (e.g., portable credit card portals at each chair which is cleaned after each use).
- Discourage the use of cash.
- If a pre-pay system is not feasible, place a plexiglass partition between cashier clerks and customers.
- Customers should use his/her own pen to sign credit card authorization. If pens must be used and provided by the salon, they should be disinfected between each use. The same would apply for touch-pad use.
- Since the 6-foot social distance guideline is not practical in nail salons, to minimize facial contact, wear a face shield or install a plastic partition between the employee and client with ample space cut out where hands or feet can be slid underneath to conduct the manicure or pedicure.
- Require all clients to wash their hands or use hand sanitizer before working on their nails.
- Limit face-to-face interaction as much as possible when cutting / working on hair (e.g., stand behind the client as much as possible and always wear a face mask). Consider wearing a face shield as well to further protect the client.
- As an initial step with each client, thoroughly wash and dry (with towel) their hair before performing any work. NOTE: For those clients that require color, the stylist will not typically wash the hair prior to treatment because of adverse effect on coloring process.
- Train staff on proper social distancing relative to other customers in the shop (that are not their direct client).
- Use social media and other communication to educate customers/clients on the steps being taken for their protection and what they need to do to protect staff as well.
- Discourage customers from touching items they don't intend to purchase if absolutely necessary.

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- Special arrangements in restrooms are required:
 - Doors to multi-stall restrooms should be able to be opened and closed without touching handles if at all possible.
 - Place a trash can by the door if the door cannot be opened without touching the handle.
 - For single restrooms, provide signage and materials (paper towels and trash cans) for individuals to use without touching the handles, and consider providing a key so disinfection measures can be better controlled.
 - Place signs indicating that toilet lids (if present) should be closed before flushing.
 - Place signs asking customers and requiring employees to wash hands before and after using the restroom.
 - Provide paper towels in restrooms and disconnect or tape-off hand air dryers.
 - Double the frequency of bathrooms cleaning and disinfection.

4.14 Gym & Workout Facilities

According to Johns Hopkins School of Medicine and other credible health resources, COVID-19 is not spread through perspiration (sweat); however, items touched by many people in a gym (e.g., barbells, weight machines, aerobic fitness equipment, etc.) could pose a risk for transmission of settled respiratory droplets.

Gyms/Workout Facilities should only be operational as permitted by state and/or local authorities, and in accordance with applicable regulations and executive orders.

- **Local/ State requirements are evolving and may be more stringent than those proposed below.** Be sure to routinely check with the applicable state or local agency that has jurisdiction over COVID-19 related operational restrictions.
- Thoroughly clean and sanitize the entire facility, especially if it has been closed. Focus on high-contact areas that would be touched by both employees and customer. Do not overlook seldom-touched surfaces. Ensure that sanitizing products are utilized in accordance with manufacturer's instructions, including minimum contact times. This will help to maximize the product's sanitizing strength and ensure that surfaces are effectively disinfected.
- At least once a day, clean and sanitize all common touch areas.
- Properly utilize ventilation systems including increased introduction of fresh air into indoor spaces. The following are examples of ways to maximize staff/customer's exposure to fresh air:
 - Encourage outdoor activity and classes, if feasible.
 - Open doors and windows if possible
 - Maximize fresh air through your ventilation system.

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- Maintain relative humidity at 40-60%
- Ensure restroom is under negative pressure
- If you don't know how, ask a HVAC professional and see ASHRAE updates for more information
- Consider using portable HEPA filtration units.
- If fans, such as pedestal fans or hard mounted fans, are used in the gym, take steps to minimize air from fans blowing from one person directly at another individual. If fans are disabled or removed, employees and members should remain aware of, and take steps to prevent, heat hazards.
- Provide disposable materials for members to wipe/disinfect equipment before and after exercise at each location/station/piece of equipment.
- If feasible, consider providing “ready to clean” tags that members can access and place on equipment after use. Trained staff can then ensure equipment is disinfected in a timely manner.
- Establish a disinfection routine for staff at regular intervals.
 - Ensure disinfection protocols follow product instructions for application and contact time.
 - Contact surfaces should be disinfected frequently. Promote these practices to members – make this visible.
 - Consider using a checklist or audit system to track how often cleaning is conducted.
- Check restrooms/showers/locker rooms regularly. Clean and sanitize them based on frequency of use.
- Establish a “before and after” workout and locker room hand washing or sanitizing for all members and staff.
- Provide hand washing stations at the front of the establishment or, alternatively, provide hand sanitizer if hand washing is not feasible.
- Communicate to members what the fitness center is doing to mitigate the spread of COVID-19 (e.g. - disinfection routine, health policies for staff, and health & safety measures in place).
- Consider communicating to members when gym attendance may not be a good option (e.g. taking care of someone who is COVID-19 positive, exhibiting symptoms of COVID-19, being in a high-risk category, etc.).
- Communicate that the fitness center has the right to refuse service to anyone exhibiting symptoms or not following guidelines (e.g., physical distancing).
- Platforms for communication could include social media, websites, and indoor/outdoor signage.

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4.14.1 Social Distancing Guidelines for Gyms/Workout Facilities

The following additional social distancing guidelines are recommended for Gyms/Workout Facilities to prevent illness of their employees and customers:

- Limit the number of occupants allowed within the gym at one time.
- Take into consideration physical distance guidelines for equipment layout and activities.
 - Consider distancing equipment at least 6 feet apart with greater distancing for treadmills and other aerobic fitness equipment where high exertion is common.
 - Aerobic fitness equipment can be arranged in a “X” pattern to provide greater distancing.
 - Physical barriers can also be helpful to create distancing or segregate exercise areas.
- Consider developing online sign-up systems (i.e., first come first serve) with set-duration (one hour) workout periods.
- Consider creating specific hours for “reservation-only” admittance limited to just seniors or other members with high-risk.
- Train gym personnel on distancing guidelines and ways to communicate them to members.
- Use social media and other communication (signage/email/text lists) to educate members on the distancing guidelines and procedures.
- Utilize self-check-in or place barrier/partition between front desk staff and members.
- Mark distances of six feet for members using tape/markers/paint/signage.
 - Video, photos, and markings are ideal to demonstrate distancing measures.
- Consider offering planned circuit type workouts that facilitate distancing and allow for wiping/disinfection of equipment during recovery between exercises.
- Group exercise classes should only be offered if distancing requirements can be maintained and there is no person-to-person physical contact.
- Basketball courts and other areas where sports with physical contact occurs should be closed.
- Sauna and steam baths should be closed or limited to one guest or family unit at a time.
- Staff should monitor physical distancing requirements in large whirlpools or swimming pools in outdoor or well-ventilated spaces; and, based on the size of the pool, limit the number of members.
- Personal trainers and staff assisting members with exercise should consider distancing.

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- Face masks should be worn if distancing is not possible. Note: Face coverings may be required by government officials and/or gym operators to mitigate the distancing gap. If not mandated, face coverings are recommended by CDC, and when worn, they should be cleaned daily according to CDC guidance.
- Water fountains should be closed, and patrons encouraged to bring their own water.
- Provide hand sanitizer for members to use, including contactless hand sanitizing stations. Post signs reminding guests about social distancing. Thank them for their patience as you work to ensure their safety.
- Juice bars and other food service areas should follow guidelines for restaurants.
- Special arrangements in restrooms/showers/locker rooms are required:
 - Doors to multi-stall restrooms should be able to be opened and closed without touching handles if at all possible.
 - Place a trash can by the door if the door cannot be opened without touching the handle.
 - For single restrooms, provide signage and materials (paper towels and trash cans) for individuals to use without touching the handles, and consider providing a key so disinfection measures can be better controlled.
 - Place signs indicating that toilet lids (if present) should be closed before flushing.
 - Place signs asking members and employees to wash hands before and after using the restroom.
 - Provide paper towels in restrooms and disconnect or tape-off hand air dryers.
 - Only allow shower and locker room use if there are partitions; or, if not, place signage to maintain proper physical distancing. If partitions or proper distancing are not possible, these facilities should remain closed.
 - Shoes should be worn in locker rooms/showers.
 - Double the frequency of bathrooms/showers/locker rooms cleaning and disinfection.

4.15 Building Exterior Areas

Good weather and closed sit-down eateries may result in more people sitting in exterior common areas of the building premises.

- Consider installing signage encouraging six-foot social distancing and frequent hand washing.
- Consider removal and/or redistribution of exterior furniture to ensure six-foot social distancing.

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- Any furniture remaining must be cleaned routinely as part of the enhanced cleaning protocol.
- Smaller lobby areas may necessitate the need to create entry queues outside of the building. In this case, consider signage and markings necessary to ensure six-foot distancing between people.

4.16 Building Fitness Centers

Fitness centers should remain closed until occupancy is allowed and guidance for safe operation is provided by applicable health officials.

In general, six foot social distancing must always be maintained. This may require restricting, or moving, pieces of equipment, weight benches, etc. to ensure.

Bodily fluids are capable of spreading the virus, therefore, it will be necessary to clean equipment, weights, benches, etc. before and after each usage. The entire center will require more frequent comprehensive cleaning.

Consider HEPA equipped air circulation equipment within the fitness center area to ‘scrub’ the air of virus and other aerosols.

Water fixtures within the fitness center should be flushed on a weekly basis to prevent stagnation in the water lines and hot water heaters.

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4.17 Social Distancing Guide for Building Tenants

The following guidelines are recommended for tenants to prevent illness of their employees by following social distancing guidelines.

- Tenant staff and vendors should wear a face covering and maintain at least six-foot of distance between themselves and others.
- Tenant staff should be instructed to not report to work and remain at home if sick. Staff who arrive to work sick, or become sick at work should be sent home immediately.
- Report to Landlord/ Property Manager if an employee with, or suspected of, having COVID 19 has been within the tenant space. Include last known date of said visitation, length of visitation, and areas visited/frequented by person.
- Tenant staff that have been out sick should be instructed not to return until all the following conditions are met:
 - They are no longer symptomatic; AND,
 - It has been at least seven days since symptoms began; AND,
 - They never had a fever, or have not had a fever for the prior three days, without the use of fever-reducing drugs such as aspirin, acetaminophen or ibuprofen.
- Inspect the work area(s) and review floor plans to identify potential ‘choke points’ where people would naturally come into close contact as they travel through each given area. Such areas may include in and around restrooms, kitchen/ pantry areas, copiers/ shared printers, entry and exit doorways.
- Erect signage in such areas encouraging ‘one at a time’ usage, passing, or moving aside for others to pass safely before proceeding. Where feasible, prop open doorways to limit need to touch doorknobs.
- Create separate “one-way” egresses for entering and exiting, as feasible.
- Review work spaces and ensure workers are positioned in a manner that allows a minimum of a six foot distance apart from one another; or, if that is not feasible, place a barrier between them that would prevent distribution of aerosols while speaking or coughing.
- Consider staggering work hours and allow flexibility to spread out the times staff arrival and departure times. Building management and tenants should coordinate the staggering to limit crowding in common areas.
- Individual office areas with multiple occupants should be altered to lower occupant density and ensure six-foot distancing.

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- Conference rooms should be altered to reduce occupant density. Remove every other chair, and/ or limit the number of seats on any given side to maintain six-foot distancing. Place disinfectant wipes within conference rooms and require usage following the end of any meeting. Encourage the use of teleconferences to reduce occupant density and maintain six-foot distancing.
- Minimize in-person meetings to prevent potential contact whenever possible. When held, ensure that six-foot social distancing is maintained.
- Allow and create work-from-home policies, where feasible, to reduce occupant density.
- Discontinue the use of ‘office-hotel’ or shared work stations; or, if not feasible, allocate spaces to employees for longer periods of time. Shared work spaces and equipment must be thoroughly cleaned upon completion of usage by each employee prior to utilization by another employee. Instructional signage, approved disinfectant wipes and wipe disposal receptacles should be provided.
- Work with furniture vendors to review available modifications to workstations to encourage social distances.
- Shared work items such as copiers, printers, phones, keyboards, etc. must be cleaned frequently. Items that cannot withstand frequent disinfection should have plastic covers placed over them to allow for disinfecting. Stationary phones require, at minimum, daily cleaning. Stationary phones should not be shared among multiple users.
- Request employees temporarily remove un-needed and personal items from desktops and workstations. This will ease and encourage the cleaning of surfaces.
- Ensure supply air vents are not covered or blocked. Proper air flow is important in providing adequate fresh air to each space. Work with mechanical personnel to alter flow if blowing directly onto employees and making them uncomfortable.
- Provide disinfectant wipes and disposal receptacles to encourage employees to clean work spaces, shared items like printers and conference room chairs and table.
- Limit visitors to the space as much as possible. When in the space, limit their accessibility to only those areas they are required to visit. Instruct visitors in advance to reschedule their visit and stay away from the workspace if sick.
- Reduce or remove seating in lobby area to ensure proper social distancing. Clean furniture following usage by visitors.
- Reduce or remove seating in kitchen and pantry areas to ensure proper social distancing. Place waste receptacles in areas to prevent crowding. Provide cleaning supplies in prominent areas to encourage cleaning of high touch surfaces like faucets, refrigerator handles, etc.
- Occupants should avoid non-essential travel, particularly to areas of known virus ‘hotspots’.

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- Limit delivery and vendor services to those essential to the business itself. Limit the allowable areas of access by delivery/vendor personnel. Clean incoming packages with disinfectant wipes.
- Tenants with customers must manage lines inside and outside by keeping them six feet apart. If space is limited, allow only a limited number of customers inside at a time. Limit area to 50% maximum capacity. Aisle ways should be made ‘one way’ to prevent close quarters passing of customers. Employees should be encouraged to wear disposable gloves, particularly when handling cash.
- Conduct enhanced cleaning of ‘high-touch’ surfaces. This includes items such as door knobs, light switches, printer/ copier controls, kitchen/ pantry countertops, refrigerator and microwave handles, and the like. Also review the list of commonly encountered high touch surfaces provided in Section 5.3.1.

Tenant installed water filters on sinks, coffee makers, ice machines, etc., should be changed prior to Re-Occupancy and use. Stagnant water can lead to increased bacterial levels. All lines to water fixtures and appliances should be flushed for a minimum of ten (10) minutes before initial usage upon reoccupation.

Tenants responsible for their own HVAC equipment, or supplemental HVAC equipment, are encouraged to follow the recommendations of Section 2.2 of this Program.

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4.18 Signage

Signage should be posted conspicuously to achieve the desired outcome of social distancing. Examples of available signs are included in Appendix D.

- Ensure that signage is large enough to be read at an appropriate viewing distance. Generally, one inch (1") text size is viewable a maximum of twenty five feet (25') away. [see ANSI Z535.2 for guidance]
- Post in multiple languages based on federal, state, and local requirements and building occupancy.
- Floor markings can give guidance on where occupants should queue for the elevator, security desk, restrooms, etc.
- Clearly display face covering requirements outside building entrances to prevent unmasked persons from entering the building.
- Consider durability of signage and decals and have additional available for replacement.
- Examine and plan for lighting of signage—especially outdoor signs

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5.0 REACTIVE CLEANING & DISINFECTION

- Upon notification of a person with a confirmed or suspected case of COVID 19 having visited the Property, immediately determine the areas the person had visited or passed through. This may be accomplished by interviewing personnel they were in contact with, interviewing security personnel, reviewing security footage, etc.
- As the CDC recommends, areas that were occupied, or suspected to be occupied, by infected persons or suspected infected person(s), should be secured (doors shut/ locked, areas cordoned off, etc.). To the extent feasible, windows and doors to the outside should be opened in those areas to introduce and circulate fresh air.
- Tenants should be notified when a confirmed case has been identified.
- Reactive cleaning and remediation methods should be utilized if a person(s) with a confirmed case of COVID-19, or a person(s) with suspected contact with a confirmed case, has occupied the building.

5.1 Timing of Cleaning and Disinfection

Viruses will naturally degrade over time. For that reason, it is encouraged to wait as long as practical before beginning cleaning and disinfecting impacted areas. The CDC recommends waiting a minimum of 24 hours before unprotected personnel enter the impacted areas.

5.2 Preparation

5.2.1 Contractor Requirements

Hillmann recommends utilizing decontamination professionals in the case of reactive cleaning. At a minimum, contractors performing cleaning and disinfection should be properly trained in regards to the cleaning methodology, personal protective equipment, effective use of the cleaning products/disinfectants, the decontamination of equipment/supplies, and the disposal of potentially contaminated waste, such as cleaning materials and PPE.

A list of approved products is located within Appendix B. See also 5.3.2.

5.2.2 Building Preparation

- All cleaning and disinfection workers should follow the instructions in **Section 6.0 Personal Protective Equipment**.
- Immediate work areas, and areas adjacent to immediate work areas or otherwise impacted, should be vacated before any cleaning or disinfection work activity begins. Isolate high-risk

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areas, such as suspect or confirmed COVID-19 areas, with signage and/or barriers to prevent entry into the work areas.

- If fogging or misting is performed, all guidance for protecting the HVAC system as per manufacturer's recommendations must be applied.
- De-energize electronic items to prevent potential moisture damage.
- If fogging or misting is not performed, follow ASHRAE guidance for control of airborne infectious diseases. Please see 9.0 References. At a minimum:
 - Confirm with building management that the HVAC system and filtration are operating as designed and filtration is in place.
 - Increase the Outdoor Air (OA) ventilation rate (dilution) to 100%, or the maximum OA possible. The ventilation system should remain operational for at least 24 hours, after the project is completed.
 - Discontinue lower ventilation rates associated with energy conservation program during the cleaning process.

5.3 Cleaning & Disinfection

Cleaning and disinfection should be conducted in all areas where an ill or suspected ill person(s) may have potentially entered. This includes, but is not limited to, **personal work space/suite, restrooms, common corridors, elevators, lobby, amenity spaces, parking garage, etc.**

Cleaning and disinfection should also be conducted in all areas where other(s) determined to have contacted the subject may have been.

5.3.1 Cleaning, Disinfection, and Sanitization

- If non-porous surfaces are visibly dirty, they should be cleaned using a detergent or soap prior to disinfection to ensure disinfectant chemicals are able to fully contact surfaces.
- High-touch surfaces should always be cleaned prior to disinfection. These include, but are not limited to, door knobs, keyboards, phones, desks, light switches, kitchen/pantry appliances, restrooms, vending machines, etc.
- Wet rags/ towels with approved product, but do not saturate. Clean surfaces with moderate pressure. Routinely change rags to ensure surfaces are cleaned.
- For porous materials such as carpeting and upholstered furniture, first clean utilizing HEPA equipped vacuums. Clean porous building materials and furniture utilizing hot-water

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extraction techniques when feasible. If hot water extraction is not feasible, the soft surfaces should be sprayed with an approved sanitizer.

- All non-porous surfaces should be disinfected using an approved Novel Coronavirus (COVID-19) – Fighting Product from the attached list (Appendix B). This includes a top-down disinfection of all vertical and horizontal surfaces. Surfaces should be clear of any dust, debris, or residue. The selected cleaning agent should be permitted to contact and for the required time as per the manufacturer instructions. All surfaces must be wiped clean. Only using foggers and sprayers is not recommended without also wiping of frequently touched surfaces.
- For porous materials, if the items can be laundered, launder items in accordance with the manufacturer's instructions using the warmest appropriate water setting for the items and then dry items completely. Otherwise, use products with EPA-approved emerging viral pathogens claims that are suitable for porous surfaces. Soft goods can be sanitized, but not disinfected. Cleaning, and potential disposal of, individual furniture pieces will require a case by case evaluation based upon likelihood of usage and/ or proximity of impacted individual. Do not saturate fabrics.
- Those paper products that can be discarded should be. Those that must be saved can be wiped clean but not disinfected and then placed in boxes or other sealed containers. Containers may be opened and contents utilized after ten (10) days. Paper products may be able to be saved via photo-copying, UV Light processing or freeze drying, based on an on-site evaluation with the restoration contractor.
- Care must be taken around electronic devices to not saturate, spray directly into, or ‘fog’ items, particularly when energized.
- A viable alternative work practice with those restoration contractors familiar with the process is to ‘fog’ an area with an appropriate chemical. This allows the cleaning agent to be spread across an entire area in a thin coat. After allowing the agent to sit for the manufacturer prescribed period, all frequently touched surfaces should be wiped clean.
- Never dry wipe/clean a surface.

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The following areas and items should be cleaned within affected areas:

Kitchen / Food Areas

Tables & Chairs	Countertops	Door knobs
Food Contact Surfaces	Light Switches	Paper Towel/ Napkin Dispenser
Soap Dispensers	Sink Surfaces & Hardware	Floors / Walls (to 6')
Push Doors	Water Fountains	Salt & Pepper Shakers
Exterior and Handle of all appliances	Interior of appliances	Vending Machine Exteriors
Phones	Floor Mats	HVAC Diffusers & Returns

Indoor / Outdoor Dining Areas

Tables & Chairs	Countertops	Door knobs
Push Doors	Salt & Pepper Shakers	Paper Towel/ Napkin Dispenser
Menus	Condiment Containers	Floors / Walls (to 6')
HVAC Diffusers & Returns	Host / Hostess Station	Server Stations

Restrooms

Sink Surfaces & Hardware	Countertops	Entrance door knobs
Stall walls, doors and door knobs	Light Switches	Paper Towel Dispenser
Soap Dispensers	Hot Air Blowers	Floors / Walls (to 6')
Toilets and Urinals	Water Fountains	Tabletops/ Changing Tables
Floor Mats	HVAC Diffusers & Returns	

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Lobbies/ Hallways/ Elevators

Tables & Chairs	Tabletops	Door knobs
Decorative Items	Light Switches	Push Doors
Water Fountains	Furniture	Floors / Walls (to 6')
Carpets	Countertops	Phones
HVAC Diffusers & Returns	Elevator Doors	Elevator Control Pad
Railings	Mirrors	Computers, Keyboards & Mouse

Offices/ Conference Rooms/ Classroom

Tables & Chairs	Tabletops	Door knobs
Decorative Items	Light Switches	Push Doors
Book Shelves	Furnishings	Floors / Walls (to 6')
Carpets	File Cabinets	Phones
HVAC Diffusers & Returns	Doors	Misc. Devices
Railings	Mirrors	Computers, Keyboards & Mouse
Computer Monitors/ TVs	Books, Pens, Etc.	

*** - Please note that this list is not all-inclusive. There may be additional items in each area that require cleaning and disinfecting. Any shared item, high touch surface, or other object likely to have been within a 15-foot radius of the infected individual should be cleaned.**

The disposal of all waste, contents, and PPE should be performed in accordance with *Section 7.0 Decontamination*.

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5.3.2 Disinfectants for Use

Only those products approved by the US EPA for use against the SARS-CoV-2 virus, the cause of COVID-19, may be utilized on these projects.

A list of US EPA allowed chemicals is attached in Appendix B of this protocol.

Additionally, the EPA maintains an on-line searchable database of approved products. Ensure that any product utilized for this purpose is shown on the product list, but search by the EPA registration number. Note that products may be marketed or sold under different brand names. This list includes products with emerging viral pathogen claims and those with human coronavirus claims. If a product with an emerging viral pathogen claim is not available, use a product with a coronavirus claim. When using the database listed below, note that a product listed as 'N' under the Emerging Viral Pathogen Claim column means that it has a human coronavirus claim (and is therefore acceptable).

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

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5.3.3 Verification

To obtain third party verification, Hillmann Consulting, LLC must be contacted prior to the commencement of cleaning and disinfection to discuss the site-specific plan with the building operator and cleaning / remediation contractor.

Contact: Mr. Christopher Kuali'i
5252 Cherokee Avenue, Suite 100
Alexandria, VA 22312
cell: (703) 898-5283
ckuali@hillmannconsulting.com

During cleaning and disinfection, Hillmann's on-site industrial hygienist must be present to ensure the contractor is utilizing the appropriate PPE, adhering to the protocol, and disposing of the waste properly. The industrial hygienist will document the cleaning methods and supplies utilized by the contractor.

After cleaning and disinfection is complete, Hillmann's industrial hygienist shall perform a visual inspection of all work areas to confirm surfaces are free of dust and residue. Hillmann can collect surface Adenosine Triphosphate (ATP) concentrations which will be measured using a direct read luminometer. Surface ATP concentrations will be collected on various non-porous surfaces, high-touch surfaces. A percentage of surfaces will be sampled prior to the cleaning/disinfection process to establish a baseline for the work area. Once the disinfection process has been completed, Hillmann will collect follow up ATP samples on the same surfaces as well as additional surfaces throughout the subject areas. Visual inspection, observation of the disinfection process, along with ATP concentrations will be utilized to assess the level of cleanliness of the sampled surface.

The following thresholds will be applied to the ATP testing; Hillmann has established the below recommended thresholds based on industry and internal research.

RLU Concentration	Cleanliness Rating	Response
≤ 20	Clean – Food Service/ Prep Surface	No Further Action
≤100	Clean – Hospital Public Areas	No Further Action
≤150	Clean - Non-healthcare settings	No Further Action
>100 or >150	Dirty	Re-clean Area and Retest

Hillmann will provide the Client with a letter report summarizing the impacted areas and actions taken to clean each area. A photo log of the cleaning activities will be included.

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6.0 PERSONAL PROTECTIVE EQUIPMENT

The use of personal protective equipment (PPE) is intended to be utilized when performing any cleaning, including handling trash. If PPE is to be used, a PPE program should be implemented. This program should address the hazards present; the selection, maintenance, and use of PPE; the training of employees; and monitoring of the program to ensure its ongoing effectiveness. This PPE may include, but is not limited to the following:

6.1 Eye and Face Protection (Necessary for Reactive Cleaning)

- Protection must comply with ANSI Z87.1, Occupational and Educational Personal Eye and Face Protection Devices.
- Depending on cleaning material, either goggles or safety glasses with face shields shall be used.

6.2 Hand Protection (Necessary for Preventative and Reactive Cleaning)

- The type of hand protection is expected to be of medical-grade nitrile gloves; however, the Safety Data Sheet will dictate the exact material.
- Hand protection must comply with 29 CFR 1910.138, Hand Protection

6.3 Body Protection (Necessary for Reactive Cleaning)

- A full body covering with booties and a hood must be worn to protect the employee from any splash hazards. The material must not allow any degradation or penetration of the body covering.
- Disposable coveralls are recommended. If not available, work coveralls may be utilized, but must be removed inside out and placed into disposal bags and sealed before leaving site. Work coveralls must then be laundered by personnel utilizing PPE and may be reused.

6.4 Respiratory Protection (Necessary for Reactive Cleaning)

- According to OSHA 29 CFR 1910.134, any individual assigned to a task that requires the use of respiratory protection should be physically able to wear a respirator. The standard also states that a physician or other licensed healthcare professional will make the determination of an employee's fitness. This medical evaluation should be conducted prior to any respirator fit testing or usage, during normal business hours and at no cost to the employee.
- Any employee wearing respiratory protection must comply with the company's respiratory protection program.
- Any respiratory protection worn must comply with ANSI Z87.2.
- Respiratory protection required for COVID-19 cleaning can consist of a N-95 filtering facepiece respirator or a half-face respirator with a P-100 filter. It is the responsibility of the employer to provide fit testing or, in the case of N-95, assuring that the employee wears

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the filtering facepiece correctly. Hillmann can review an existing program, or create one and train workers as necessary.

6.5 PPE Training

Employers are also required to train each worker required to use personal protective equipment to know:

- When it is necessary
- What kind is necessary
- How to properly put it on, adjust, wear and take it off
- The limitations of the equipment
- Proper care, maintenance, useful life, and disposal of the equipment

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7.0 DECONTAMINATION

7.1 PPE Removal

PPE must be removed in the correct order, so as not to re-contaminate the worker.

- PERFORM HAND HYGIENE BETWEEN STEPS IF HANDS BECOME CONTAMINATED AND IMMEDIATELY AFTER REMOVING ALL PPE.
- Establish a decontamination area by laying two layers of 6 mil poly on the floor at a location at an exit from the work area(s). Ensure that the area has disposal bags to collect spent PPE.
- Remove the body covering carefully by folding or rolling the Tyvek down the body avoiding touching the outside of the Tyvek with your clean clothing.
- As you are removing the body covering, peel off your gloves at the same time, only touching the inside of the gloves and Tyvek with bare hands. Place the soiled items into a waste container.
- Remove goggles or safety glasses and face shield from the back by lifting the headband and without touching the front of the eye and face protection. If the item is reusable, place it in the designated receptacle for cleaning. Otherwise, discard in a waste container.
- Carefully grasp the bottom ties or elastics of the mask/respirator, then the ones on the top, and remove without touching the front. Discard N-95s in a waste container or place the half-face respirator in a designated receptacle for cleaning.
- WASH HANDS OR USE AN ALCOHOL-BASED HAND SANITIZER IMMEDIATELY AFTER REMOVING PPE.

7.2 Disposable Supplies & Equipment

All disposable cleaning supplies, including, but not limited to cloths, disinfecting wipes, tape, filters, and PPE should be bagged in 6-mil polyethylene bags, goose necked at the opening, and duct taped around the gooseneck. The exterior of the bag should be wet wiped with an approved disinfection solution prior to removal from the work area. Once secured and disinfected, bags can then be disposed of as regular waste.

Any reusable cleaning items and equipment, such as mop sticks or other items that will have cleaning items attached, need to be disinfected with the same solutions as the hard surfaces before being removed from the work area.

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8.0 TRAINING OF PERSONNEL

In addition to training on the use of PPE, all employees involved in the cleaning must be trained in the following items:

- Hazard Communication in accordance with 29 CFR 1910.1200, to cover the following items:
 - The location and availability of the written hazard communication program, including the required list(s) of hazardous chemicals that will be used during the cleaning, and safety data sheets required by this section.
 - How to read a safety data sheet
 - The measures employees can take to protect themselves from these hazards, including specific procedures the employer has implemented to protect employees from exposure to hazardous chemicals, such as appropriate work practices, emergency procedures, and personal protective equipment to be used.
- Train all workers with reasonably anticipated occupational exposure to COVID-19 (as described in this document) about the sources of exposure to the virus, the hazards associated with that exposure, and appropriate workplace protocols in place to prevent or reduce the likelihood of exposure. Training should include information about how to isolate individuals with suspected or confirmed COVID-19 or other infectious diseases, and how to report possible cases. Training must be offered during scheduled work times and at no cost to the employee.
- When the potential exists for exposure to human blood, certain body fluids, or other potentially infectious materials, workers must receive training required by the Bloodborne Pathogens (BBP) standard (29 CFR 1910.1030), including information about how to recognize tasks that may involve exposure and the methods, such as engineering controls, work practices, and PPE, to reduce exposure.

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9.0 LIMITATIONS

This program has been created by Hillmann with guidance and research from the CDC, WHO, ASHRAE and AIHA. It is supplemented by our 30+ year experience in good industrial hygiene practices and interviews with multiple clients and related associations. This program is current as of the date on the cover, and both Hillmann and the Client understand that guidance as to proper prevention is constantly changing and being updated. Adhering to this program will not guarantee that no occupants of a given building will not become infected with COVID-19, and Hillmann is not responsible for any instances of the virus or resulting actions that are required.

The cleaning portion of this program has been prepared to assist in the prevention of, cleaning, and disinfection of the COVID-19 virus. The recommendations are based on currently known information about COVID-19 and guidance from the CDC and WHO, which could change as more information becomes available. The usage of this protocol does not guarantee, certify, or provide warranty that the COVID-19 virus has been eradicated from a building or cannot be reintroduced to the building. Recommendations are made based on information provided by the building operator and / or cleaning/remediation contractor. Note that conditions may change that require modifications to the COVID-19 Protocol.

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10.0 REFERENCES

1. CDC; Centers for Disease Control and Prevention; Coronavirus Disease 2019 (COVID-19); www.cdc.gov/coronavirus/2019-ncov/index.html; May 2020.
2. WHO; World Health Organization; Coronavirus; www.who.int/health-topics/coronavirus; May 2020.
3. ANSI/ASHRAE 55-2017; Thermal Environmental Conditions for Human Occupancy.
4. ANSI/ASHRAE Standard 62.1-2019; Ventilation and Acceptable Indoor Air Quality
5. ASHRAE Position Document on Infection Aerosols. Approved 4/14/2020.
6. AIHA Guidance Document on Recovering from COVID-19 Building Closures, 4/2020
7. National Restaurant Association COVID-19 Reopening Guidance Document, April 22, 2020

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APPENDIX A: COVID-19 RESPONSE CHECKLIST

Upon being notified of the potential or known visitation to the property by a COVID-19 impacted individual, complete the following:

- Contact the CDC and Local Health Department to report the incident
- Contact professional remediation contractor to set up cleaning
- Contact Industrial Hygienist (Hillmann) to provide 3rd party verification of cleaning process
- Identify areas of building traveled by the impacted individual. Interview security personnel, personnel within office areas, observe security footage, etc.
- Secure each identified area to prevent additional traffic from unprotected individuals.
- If possible, terminate usage of HVAC systems in identified areas.
- Professional contractor should clean each area. HVAC diffusers and returns should be cleaned first. The area should then be cleaned from the top down utilizing an approved COVID-19 fighting product. Each exposed surface and item within a given area will require cleaning.
- Porous materials may be cleaned, but cannot be disinfected. Items may be laundered or cleaned via hot water extraction methods. Depending on location and potential usage, individual items may require disposal.
- Cleaning personnel must don proper Personal Protective Equipment including eye protection, gloves, and disposable suits.
- Disposable cleaning supplies, including, but not limited to cloths, disinfecting wipes, tape, filters, and PPE should be bagged in 6-mil polyethylene bags, goose-necked at the opening, and duct taped around the gooseneck. The exterior of the bag should be wet wiped with an approved disinfection solution prior to removal from the work area. Once secured and disinfected, bags can then be disposed of as regular waste. Any reusable cleaning items, such as mop sticks or other items that will have cleaning items attached, need to be disinfected with the same solutions as the hard surfaces.

The on-site Industrial Hygienist will observe the contractor's actions to ensure each area has been adequately cleaned.

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GENERAL OFFICE

The following is a summary of the steps to take when cleaning a general office area in response to a potential COVID-19 incident. Refer to the full program for additional details.

- Identify areas of building traveled by the impacted individual. Interview security personnel, personnel within office areas, observe security footage, etc.
- Secure each identified area to prevent additional traffic from unprotected individuals.
- If possible, terminate usage of HVAC systems in identified areas.
- Create a decontamination area by placing 2 layers of poly sheeting on the floor. Areas should be large enough for waste bag storage, and for workers to don and remove their PPE.
- Cleaning personnel must don proper Personal Protective Equipment including eye protection, gloves, N95 respirators and disposable suits.
- HVAC diffusers and returns should be cleaned first.
- Each area should then be cleaned from the top down utilizing an approved COVID-19 fighting product, for example, 'Clorox Commercial 4 in One Disinfecting Spray & Sanitizer' or 'Clorox Total 360 Disinfecting Cleaner'. Each exposed surface and item within a given area will require cleaning. Special attention should be paid to frequently touched surfaces like light switches, door knobs, push plates, computer keyboard/ mouse, etc.
- Wet rags/ towels with approved product, but do not over saturate. Clean surfaces with moderate pressure. Do not wipe surfaces with dry rags/ towels.
- Porous materials may be HEPA vacuumed and wiped cleaned, but cannot be disinfected. Do not saturate fabrics. Items may be laundered or cleaned via hot water extraction methods. Depending on location and potential usage, individual items may require disposal.
- Disposable cleaning supplies, including, but not limited to cloths, disinfecting wipes, tape, filters, and PPE should be bagged in 6-mil polyethylene bags, goose-necked at the opening, and duct taped around the gooseneck. The exterior of the bag should be wet wiped with an approved disinfection solution prior to removal from the work area. Once secured and disinfected, bags can then be disposed of as regular waste. Any reusable cleaning items, such as mop sticks or other items that will have cleaning items attached, need to be disinfected with the same solutions as the hard surfaces before leaving work area.

The on-site Industrial Hygienist will observe the contractor's actions throughout the process to ensure each area has been adequately cleaned.

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KITCHEN / FOOD PREPARATION AREAS

The following is a summary of the steps to take when cleaning a Kitchen, Pantry or Food Preparation area in response to a potential COVID-19 incident. Refer to the full program for additional details.

- Identify areas of building traveled by the impacted individual. Interview security personnel, personnel within office areas, observe security footage, etc.

Determine to what extent the person(s) may have gone into cabinets, pantries, refrigerators, etc. If unsure or unclear, presume that each was entered and therefore requires cleaning.
- Cease all operations. Secure each identified area to prevent additional traffic from unprotected individuals.
- If possible, terminate usage of HVAC systems in identified areas.
- Create a decontamination area by placing 2 layers of poly sheeting on the floor. Areas should be large enough for waste bag storage, and for workers to don and remove their PPE.
- Cleaning personnel must don proper Personal Protective Equipment including eye protection, gloves, N95 respirators and disposable suits.
- HVAC diffusers and returns should be cleaned first.
- Each area should then be cleaned from the top down utilizing an approved COVID-19 fighting product. **NOTE: only products created specifically for food prep areas may be utilized**, for example, ‘Purell Foodservice Surface Sanitizer’ or ‘Sani Quad Food Service Sanitizer’. Each exposed surface and item within a given area will require cleaning. Special attention should be paid to frequently touched surfaces like light switches, door knobs, appliance/ refrigerator handles, etc.
- Wet rags/ towels with approved product, but do not over saturate. Clean surfaces with moderate pressure. Do not wipe surfaces with dry rags/ towels.
- Porous materials may be HEPA vacuumed and wiped cleaned, but cannot be disinfected. Do not saturate fabrics. Items may be laundered or cleaned via hot water extraction methods. Depending on location and potential usage, individual items may require disposal.
- Opened food products should be discarded.
- Disposable cleaning supplies, including, but not limited to cloths, disinfecting wipes, tape, filters, and PPE should be bagged in 6-mil polyethylene bags, goose-necked at the opening, and duct taped around the gooseneck. The exterior of the bag should be wet wiped with an approved disinfection solution prior to removal from the work area. Once secured and disinfected, bags

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can then be disposed of as regular waste. Any reusable cleaning items, such as mop sticks or other items that will have cleaning items attached, need to be disinfected with the same solutions as the hard surfaces before leaving work area.

The on-site Industrial Hygienist will observe the contractor's actions throughout the process to ensure each area has been adequately cleaned

Kitchen / Food Area Items

Tables & Chairs	Countertops	Door knobs
Food Contact Surfaces	Light Switches	Paper Towel/ Napkin Dispenser
Soap Dispensers	Sink Surfaces & Hardware	Floors / Walls (to 6')
Push Doors	Water Fountains	Salt & Pepper Shakers
Exterior and Handle of all appliances	Interior of appliances	Vending Machine Exteriors
Phones	Floor Mats	HVAC Diffusers & Returns

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INDOOR / OUTDOOR DINING AREAS

The following is a summary of the steps to take when cleaning Indoor / Outdoor Dining Areas in response to a potential COVID-19 incident. Refer to the full program for additional details.

- Identify areas of building traveled by the impacted individual. Interview security personnel, personnel within office areas, observe security footage, etc.

Determine to what extent the person(s) may have gone into cabinets, pantries, refrigerators, etc. If unsure or unclear, presume that each was entered and therefore requires cleaning.
- Cease all operations. Secure each identified area to prevent additional traffic from unprotected individuals.
- If possible, terminate usage of HVAC systems in identified areas.
- Create a decontamination area by placing 2 layers of poly sheeting on the floor. Areas should be large enough for waste bag storage, and for workers to don and remove their PPE.
- Cleaning personnel must don proper Personal Protective Equipment including eye protection, gloves, N95 respirators and disposable suits.
- HVAC diffusers and returns should be cleaned first.
- Each area should then be cleaned from the top down utilizing an approved COVID-19 fighting product. **NOTE: only products created specifically for food service areas may be utilized**, for example, ‘Purell Foodservice Surface Sanitizer’ or ‘Sani Quad Food Service Sanitizer’. Each exposed surface and item within a given area will require cleaning. Special attention should be paid to frequently touched surfaces like light switches, door knobs, appliance/ refrigerator handles, etc.
- Wet rags/ towels with approved product, but do not over saturate. Clean surfaces with moderate pressure. Do not wipe surfaces with dry rags/ towels.
- Porous materials may be HEPA vacuumed and wiped cleaned, but cannot be disinfected. Do not saturate fabrics. Items may be laundered or cleaned via hot water extraction methods. Depending on location and potential usage, individual items may require disposal.
- Opened food products should be discarded.
- Disposable cleaning supplies, including, but not limited to cloths, disinfecting wipes, tape, filters, and PPE should be bagged in 6-mil polyethylene bags, goose-necked at the opening, and duct taped around the gooseneck. The exterior of the bag should be wet wiped with an approved disinfection solution prior to removal from the work area. Once secured and disinfected, bags

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can then be disposed of as regular waste. Any reusable cleaning items, such as mop sticks or other items that will have cleaning items attached, need to be disinfected with the same solutions as the hard surfaces before leaving work area.

The on-site Industrial Hygienist will observe the contractor's actions throughout the process to ensure each area has been adequately cleaned

Indoor / Outdoor Dining Areas

Tables & Chairs

Tables & Chairs

Tables & Chairs

Push Doors

Push Doors

Push Doors

Menus

Menus

Menus

HVAC Diffusers & Returns

HVAC Diffusers & Returns

HVAC Diffusers & Returns

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DATA CENTER / COMPUTER CLOSET

The following is a summary of the steps to take when cleaning a Data Center/Computer Closet in response to a potential COVID-19 incident. Refer to the full program for additional details.

- Identify areas of building traveled by the impacted individual. Interview security personnel, personnel within office areas, observe security footage, etc.
- Secure each identified area to prevent additional traffic from unprotected individuals. Access may be made available, if absolutely necessary, but personnel require glove protection and must have access to hand sanitizer upon completion of duties when removing gloves. Personnel must take care not to touch their face.
- If possible, redirect supplied air so as to not blow upon the area(s) being cleaned, during the cleaning process.
- Create a decontamination area by placing 2 layers of poly sheeting on the floor. Areas should be large enough for waste bag storage, and for workers to don and remove their PPE.
- Cleaning personnel must don proper Personal Protective Equipment including eye protection, gloves, N95 respirators and disposable suits.
- HVAC diffusers and returns should be cleaned first.
- All vacuums used, whether employed with a HEPA or a ULPA (Ultra Low Particle Air) filter, should utilize an Electromagnetic/Radio Frequency Interference shielded motor housing. All attachments and tools handled within the data center must be non-conductive. All disinfecting chemicals should be non-ammoniated, antistatic, and specific for use in a data center environment. The proper disinfecting chemicals should be applied in a “dry mist” form or using a “dry mist” machine. The primary disinfection chemical applied should be an EPA registered Ionized Hydrogen Peroxide in a “dry mist” form. In addition, supplies like wiping cloths should be made of low lint material.
- Care must be taken around electronic devices to not saturate, spray directly into, or ‘fog’ items, particularly when energized, as this may damage the equipment.
- Each area should then be cleaned from the top down utilizing moderate pressure. Each exposed surface and item within a given area will require cleaning. Special attention should be paid to frequently touched surfaces like light switches, door knobs, appliance/ refrigerator handles, etc. Do not clean internal electrical components. Do not wipe surfaces with dry rags/ towels.
- Disposable cleaning supplies, including, but not limited to cloths, disinfecting wipes, tape, filters, and PPE should be bagged in 6-mil polyethylene bags, goose-necked at the opening, and duct taped around the gooseneck. The exterior of the bag should be wet wiped with an approved

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disinfection solution prior to removal from the work area. Once secured and disinfected, bags can then be disposed of as regular waste. Any reusable cleaning items, such as mop sticks or other items that will have cleaning items attached, need to be disinfected with the same solutions as the hard surfaces before leaving work area.

The on-site Industrial Hygienist will observe the contractor's actions throughout the process to ensure each area has been adequately cleaned.

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APPENDIX B: NOVEL CORONAVIRUS FIGHTING PRODUCTS

Search by the EPA registration number for those not on the attached list

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

**COVID-19 REOCCUPANCY EXPOSURE
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Arlington, VA 22209**APPENDIX C:
SOCIAL DISTANCING GUIDE FOR TENANTS**

The following guidelines are recommended for tenants to prevent illness of their employees by following social distancing guidelines.

- Tenant staff and vendors should wear a face covering and maintain at least six-foot of distance between themselves and others.
- Tenant staff should be instructed to not report to work and remain at home if sick. Staff who arrive to work sick, or become sick at work should be sent home immediately.
- Report to Landlord/ Property Manager if an employee with, or suspected of, having COVID 19 has been within the tenant space. Include last known date of said visitation, length of visitation, and areas visited/ frequented by person.
- Tenant staff that have been out sick should be instructed not to return until all the following conditions are met:
 - They are no longer symptomatic; AND,
 - It has been at least seven days since symptoms began; AND,
 - They never had a fever, or have not had a fever for the prior three days, without the use of fever-reducing drugs such as aspirin, acetaminophen or ibuprofen.
- Inspect the work area(s) and review floor plans to identify potential ‘choke points’ where people would naturally come into close contact as they travel through each given area. Such areas may include in and around restrooms, kitchen/ pantry areas, copiers/ shared printers, entry and exit doorways.
- Erect signage in such areas encouraging ‘one at a time’ usage, passing, or moving aside for others to pass safely before proceeding. Where feasible, prop open doorways to limit need to touch doorknobs.
- Create separate “one-way” egresses for entering and exiting, as feasible.
- Review work spaces and ensure workers are positioned in a manner that allows a minimum of a six foot distance apart from one another; or, if that is not feasible, place a barrier between them that would prevent distribution of aerosols while speaking or coughing.
- Consider staggering work hours and allow flexibility to spread out the times staff arrival and departure times. Building management and tenants should coordinate the staggering to limit crowding in common areas.

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- Individual office areas with multiple occupants should be altered to lower occupant density and ensure six-foot distancing.
- Conference rooms should be altered to reduce occupant density. Remove every other chair, and/ or limit the number of seats on any given side to maintain six-foot distancing. Place disinfectant wipes within conference rooms and require usage following the end of any meeting. Encourage the use of teleconferences to reduce occupant density and maintain six-foot distancing.
- Minimize in-person meetings to prevent potential contact whenever possible. When held, ensure that six-foot social distancing is maintained.
- Allow and create work-from-home policies, where feasible, to reduce occupant density.
- Discontinue the use of ‘office-hoteling’ or shared work stations; or, if not feasible, allocate spaces to employees for longer periods of time. Shared work spaces and equipment must be thoroughly cleaned upon completion of usage by each employee prior to utilization by another employee. Instructional signage, approved disinfectant wipes and wipe disposal receptacles should be provided.
- Shared work items such as copiers, printers, phones, keyboards, etc. must be cleaned frequently. Items that cannot withstand frequent disinfection should have plastic covers placed over them to allow for disinfecting. Stationary phones require, at minimum, daily cleaning. Stationary phones should not be shared among multiple users.
- Request employees temporarily remove un-needed and personal items from desktops and workstations. This will ease and encourage the cleaning of surfaces.
- Ensure supply air vents are not covered or blocked. Proper air flow is important in providing adequate fresh air to each space. Work with mechanical personnel to alter flow if blowing directly onto employees and making them uncomfortable.
- Provide disinfectant wipes and disposal receptacles to encourage employees to clean work spaces, shared items like printers and conference room chairs and table.
- Limit visitors to the space as much as possible. When in the space, limit their accessibility to only those areas they are required to visit. Instruct visitors in advance to reschedule their visit and stay away from the workspace if sick.
- Reduce or remove seating in lobby area to ensure proper social distancing. Clean furniture following usage by visitors.
- Reduce or remove seating in kitchen and pantry areas to ensure proper social distancing. Place waste receptacles in areas to prevent crowding. Provide cleaning supplies in prominent areas to encourage cleaning of high touch surfaces like faucets, refrigerator handles, etc.
- Modified shared items within pantries/break rooms: individually wrapped coffee stirrers, creamers, sugars, and eating utensils.

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- Occupants should avoid non-essential travel, particularly to areas of known virus ‘hotspots’.
- Limit delivery and vendor services to those essential to the business itself. Limit the allowable areas of access by delivery/vendor personnel. Clean incoming packages with disinfectant wipes.
- Tenants with customers must manage lines inside and outside by keeping them six feet apart. If space is limited, allow only a limited number of customers inside at a time. Limit area to 50% maximum capacity. Aisle ways should be made ‘one way’ to prevent close quarters passing of customers. Employees should be encouraged to wear disposable gloves, particularly when handling cash.
- Conduct enhanced cleaning of ‘high-touch’ surfaces. This includes items such as door knobs, light switches, printer/ copier controls, kitchen/ pantry countertops, refrigerator and microwave handles, and the like. Also review the list of commonly encountered high touch surfaces provided in Section 5.3.1.

Tenant installed water filters on sinks, coffee makers, ice machines, etc., should be changed prior to Re-Occupancy and use. Stagnant water can lead to increased bacterial levels. All lines to water fixtures and appliances should be flushed for a minimum of ten (10) minutes before initial usage upon reoccupation.

Tenants responsible for their own HVAC equipment, or supplemental HVAC equipment, are encouraged to follow the recommendations of Section 2.2 of this Program.



May 7, 2020

Ms. Mary-Claire Burick
Rosslyn Business Improvement District
1911 N. Fort Myer Drive
Suite LL-10
Arlington, VA 22209

RE: COVID-19 Re-Occupancy Exposure Control Program
Rosslyn Business Improvement District
Arlington, VA 22209
Hillmann Project # V3-12367

Dear Ms. Burick

Hillmann Consulting, LLC, is pleased to provide this COVID-19 Re-Occupancy Exposure Control Program. This program is applicable solely to the entities named in this document. This program was produced by trained industrial hygienists using guidance from the Centers for Disease Control and Prevention (CDC), the World Health Organization (WHO), The American Society of Heating, Refrigerating and Air-Conditioning Engineers (ASHRAE); and/or other applicable state or local guidelines as appropriate.

This report is for the exclusive use of the entities named on the front cover, and no other party shall have any right to rely on any service provided by Hillmann Consulting, LLC, without prior written consent.

We appreciate the opportunity to provide environmental consulting services. If you have any questions concerning this report, or if we can assist you in any other matter, please contact the undersigned at 908-688-7800.

Sincerely,
Hillmann Consulting, LLC

A handwritten signature in black ink, appearing to read "Christopher W. Baker".

Christopher W. Baker
Vice President of Operations
cbaker@hillmannconsulting.com
(703) 898-5280

A handwritten signature in black ink, appearing to read "Jill Asch".

Jill Asch, MPH, CIH, CSP
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