



Coronavirus Disease 2019 (COVID-19) is a respiratory disease caused by the SARS-CoV-2 virus. As the virus has spread to the level of pandemic it has and will continue to affect our work, business, and everyday lives. To reduce the impact of COVID-19 outbreak conditions on businesses, workers, customers, and the public it is critical to implement engineering, administrative, and Personal Protective Equipment (PPE) controls. Use this checklist to ensure you are following CDC guidelines, State and Federal orders, and best practices for cleaning, hygiene, and physical distancing to prevent the spread of COVID-19.

Facility/Area/Site:	Inspection Date:
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	Yes	No	Comments	Corrective Action	Completed
Are relevant COVID-19 updates posted on staff noticeboards or been provided via internal communications?	<input type="checkbox"/>	<input type="checkbox"/>			
Is there a COVID-19 Crisis Management Committee in your workplace?	<input type="checkbox"/>	<input type="checkbox"/>			
Have your Supervisors been adequately trained on the implications of COVID-19?	<input type="checkbox"/>	<input type="checkbox"/>			
Have you given staff members accurate information about ways to prevent the spread of infection?	<input type="checkbox"/>	<input type="checkbox"/>			
Have policies executing guidelines and state orders concerning temporary remote working been implemented?	<input type="checkbox"/>	<input type="checkbox"/>			
Have you implemented a 6ft physical distancing work policy?	<input type="checkbox"/>	<input type="checkbox"/>			
Have you identified work tasks that cannot be completed due to challenges implementing the 6ft distancing work rule?	<input type="checkbox"/>	<input type="checkbox"/>			
Have you developed a plan for point of sale operations, customer areas, outside vendors, etc. to maintain a 6ft physical distance?	<input type="checkbox"/>	<input type="checkbox"/>			
Do you have reliable systems for real-time public health communication with employees?	<input type="checkbox"/>	<input type="checkbox"/>			
Are staff members following the CDC recommended hand washing protocol and have proper handwashing techniques have been posted as a reminder?	<input type="checkbox"/>	<input type="checkbox"/>			
Have employees been trained on coughing, sneezing, and hand washing etiquette?	<input type="checkbox"/>	<input type="checkbox"/>			
Are your staff members aware of the symptoms of COVID-19?	<input type="checkbox"/>	<input type="checkbox"/>			
Has a policy been developed and implemented requiring employees to stay home when exhibiting symptoms, or have been in close contact with others who have exhibited symptoms?	<input type="checkbox"/>	<input type="checkbox"/>			

COVID-19 Safety Checklist



Have you reviewed the cleaning measures to ensure that high risk contact areas and touch points are being regularly disinfected?	<input type="checkbox"/>	<input type="checkbox"/>			
Have you followed CDC guidance for cleaning and disinfecting hard surfaces?	<input type="checkbox"/>	<input type="checkbox"/>			
Have you followed CDC guidance for cleaning and disinfecting soft (porous) surfaces?	<input type="checkbox"/>	<input type="checkbox"/>			
Have appropriate items been laundered following CDC guidance?	<input type="checkbox"/>	<input type="checkbox"/>			
Are staff members wearing appropriate disposable PPE for all tasks in the cleaning process, including handling trash?	<input type="checkbox"/>	<input type="checkbox"/>			
Is adequate PPE available for staff? (gloves, N-95s, etc.)	<input type="checkbox"/>	<input type="checkbox"/>			
Are staff members following normal preventive actions while at work including cleaning hands and avoiding touching eyes, nose, or mouth with unwashed hands?	<input type="checkbox"/>	<input type="checkbox"/>			
Do you have readily available access to Hand Sanitizer for all staff members?	<input type="checkbox"/>	<input type="checkbox"/>			
Does the Hand Sanitizer contain at least 60% alcohol content?	<input type="checkbox"/>	<input type="checkbox"/>			
Have you considered staggering shifts, start times, lunches, and/or break times to reduce possible congestion?	<input type="checkbox"/>	<input type="checkbox"/>			
Have you considered holding meetings in alternate locations with more space and better air quality to decrease risk of transmission? (i.e. outside, warehouse, etc.)	<input type="checkbox"/>	<input type="checkbox"/>			
Have you restricted or removed high use items (i.e. coffee pot in breakroom, microwave, etc.) or have ability to sanitize in between uses?	<input type="checkbox"/>	<input type="checkbox"/>			
Does your workplace have adequate air flow?	<input type="checkbox"/>	<input type="checkbox"/>			
Have you considered installing HEPA filters in areas with poor air quality?	<input type="checkbox"/>	<input type="checkbox"/>			
Are you able to keep humidity around 40-50% to prevent respiratory irritation?	<input type="checkbox"/>	<input type="checkbox"/>			
Are you continuing to communicate with staff, even if temporarily out of work, to alleviate anxiety stemming from COVID-19?	<input type="checkbox"/>	<input type="checkbox"/>			
Are you continuing to keep safety training, meetings, and practices a priority despite possible challenges stemming from COVID-19?	<input type="checkbox"/>	<input type="checkbox"/>			

Comments/Special Instructions: _____

Inspection conducted by: _____ Signature _____