

MSPB COVID-19 Workplace Safety Plan

UPDATED: June 30, 2022

The health and safety of employees, interns, contractors, and visitors at the Merit Systems Protection Board (MSPB) are always our highest priorities. This COVID-19 Workplace Safety Plan supports [Executive Order \(EO\) 13991](#), “Protecting the Federal Workforce and Requiring Mask-Wearing” (Jan. 20, 2021), Office of Management and Budget (OMB) memorandum [M-21-15](#), “COVID-19 Safe Federal Workplace: Agency Model Safety Principles” (Jan. 24, 2021), and guidance provided by the [Safer Federal Workforce Task Force](#) (Task Force), including “COVID-19 Safe Federal Workplace: Agency Model Safety Principles” (Sept. 13, 2021). This plan is a living document that will be updated as new information becomes available and requirements change.

The [Centers for Disease Control and Prevention](#) (CDC) has set recommendations related to [COVID-19 Community Levels](#), which measure the impact of COVID-19 illness on health and healthcare systems and inform the appropriate prevention strategies to utilize at a given time. The CDC has provided [county-level data](#) showing the COVID-19 community level for each county in the United States. Agencies are to utilize that data in determining the COVID-19 community level for a given facility by looking to the COVID-19 community level for the county in which the facility is located. Further information can be obtained by referencing this [initial implementation guidance on COVID-19 Community Levels](#).

1. COVID-19 Coordination Team

In accordance with M-21-15, MSPB’s COVID-19 Coordination Team members are:

- Bill Spencer, Acting Executive Director
- Kevin Nash, Director of Financial and Administrative Management

The team will consult with the CDC through the Task Force, as needed. Where appropriate, the team will consult with the General Services Administration (GSA), the Office of Personnel Management (OPM), and OMB.

The team is responsible for conducting assessments to establish, implement, and monitor compliance with: (a) safety protocols for physical space and masking; and (b) determinations of onsite, telework, flexible schedules, and remote working.¹ The team has met at least weekly throughout the pandemic to review compliance with MSPB COVID-19 workplace safety plans and protocols, consider potential revisions to them, assess community transmission rates at all MSPB locations, and address any other operational needs. The team will continue to coordinate and communicate with office directors, the MSPB Professional Association (PA), and all employees as we move forward. Currently, the team assesses COVID-19 community levels, instead of community transmission rates, per Task Force guidance.

Questions about this plan should be directed to the COVID-19 Coordination Team. Employees who require a reasonable accommodation should contact [Jess Lang](#), Director of Equal Employment Opportunity (EEO), for information about submitting a request.

¹ Consistent with the principles set forth in OMB Memorandum [M-21-25](#) and agency plans for reentry and post-reentry.

2. Health and Safety

a. Vaccination

We strongly encourage any employees who are unvaccinated, not [fully vaccinated](#),² or not [up to date to get vaccinated](#).

To ensure you have the information you need to get vaccinated, please go to [Vaccines.gov](#) (or for information in Spanish, [Vacunas.gov](#)).

For additional information, see <https://www.saferfederalworkforce.gov/faq/vaccinations>.

b. Vaccination-related Leave

Employees who seek any authorized dose of a COVID-19 vaccination during work hours (including primary series doses, authorized boosters, and authorized additional doses) will be granted up to 4 hours of administrative leave. Do not use duty time. The administrative leave will cover the time it takes to travel to the vaccination site, receive the vaccination dose, and return to work. If an employee needs to spend less time getting the vaccine booster shot or additional dose, only the needed amount of administrative leave should be granted. Employees taking longer than 4 hours are required to document the reasons for the additional time (e.g., they may need to travel long distances to get the vaccine). Employees should obtain approval in advance from their supervisor before using administrative leave for purposes of obtaining a COVID-19 vaccine, booster shot, or additional dose. Employees may not be credited with administrative leave or overtime work for time spent getting a vaccine, booster shot, or additional dose outside their tour of duty.

For more information on booster shots, go to the [CDC web page on COVID-19 vaccine booster shots](#).

For more information on additional doses, go the [CDC web page on immunocompromised patients & the COVID-19 vaccine](#).

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

To assist an employee's family member, up to 4 hours of administrative leave will be granted per dose for a family member the employee accompanies. (If an employee needs to spend less time accompanying a family member who is receiving the COVID-19 vaccine, only the needed amount of administrative leave should be granted.) Employees should obtain approval in advance from their supervisor before being permitted to use administrative leave for COVID-19 vaccination purposes. Employees may not be credited with administrative leave or overtime work for time spent outside their tour of duty helping a family member get vaccinated. For this purpose, a "family member" is an individual who meets the definition of that term in OPM's leave regulations (see 5 CFR § 630.201).

² Employees will be considered fully vaccinated 14 days after they have received the requisite number of doses of a COVID-19 vaccine approved or authorized for emergency use by the U.S. Food and Drug Administration (FDA) or listed for emergency use by the World Health Organization.

Fully vaccinated people are at substantially reduced risk of severe illness and death from COVID-19 compared with unvaccinated people.

c. Vaccination Documentation and Information

Agencies are required to collect documentation from employees to prove vaccination, even if an employee has previously attested to their vaccination status. Collection of this information began in October 2021. Safety protocols related to quarantine are contingent in part on whether one is [up to date with COVID-19 vaccines](#), including recommended additional [primary series doses](#) and [booster shots](#). To facilitate implementation of safety protocols, MSPB is maintaining information about whether employees have been vaccinated. At this time, we are only collecting vaccine information from new employees upon entry on duty.

In requesting this vaccination information from employees, MSPB: (1) complies with any applicable Federal laws, including requirements under the Privacy Act, the Paperwork Reduction Act, the Rehabilitation Act of 1973, and any applicable collective bargaining obligations; (2) takes steps to promote privacy and IT security, while also providing the relevant information to those who need to know in order to implement the safety protocols; (3) consults with our Records Officer, Chief Information Officer, the Senior Agency Official for Privacy, and the Office of General Counsel to determine the best means to maintain this information to meet the agency's needs; and (4) other than via the processes described in (1) through (3), or as ordered by a court or administrative body of competent jurisdiction, only disseminates this vaccination information to the appropriate agency officials who have a need to know to ensure effective implementation of the safety protocols, which, in many cases, includes the supervisor level.

d. COVID-19 Community Levels & Staffing

For purposes of this guidance, when determining COVID-19 community levels in a given area to determine mask-wearing requirements and operational status, MSPB references the CDC's [COVID-19 by County](#). Based on Task Force guidance, MSPB only considers the community levels in the county in which an office is located.

MSPB is returning to in-office schedules and staffing levels as determined by office directors based on office- and mission-specific needs and in consultation with the COVID-19 Coordination Team. Therefore, we have decoupled staffing levels from COVID-19 community levels. However, if the community level at any location goes to High, the COVID-19 Coordination Team will follow the CDC and Task Force guidance and consult with relevant office director(s) on any additional considerations. Regardless of staffing capacity, all employees must wear masks when the COVID-19 community level is High.

MSPB has posted signage regarding mask-wearing and, when necessary, physical distancing requirements at all office locations. Such signage varies by facility as needed given local requirements and changes in community level conditions.

e. Face Masks

Current guidance from the CDC and OMB has evolved into a new metric system based on COVID-19 community level (see [Use and Care of Masks](#)). As such, in areas of High community levels, agencies must require **all** Federal employees, onsite contractors, and visitors, regardless of vaccination status, to wear a mask inside of Federal buildings. For MSPB, this applies to our locations in areas of High

community levels, whether offices are in a Federal or a leased building. Masks must *properly fit over your nose and mouth* in accordance with current guidance from the [CDC](#) and the [Occupational Safety and Health Administration](#).

When the community level for an MSPB location *increases* from Low to Medium or Medium to High, the agency has a process to promptly put in place more protective safety protocols consistent with CDC guidelines and guidance from the Task Force as soon as operationally feasible. MSPB does not wait, for example, for a multi-day or multi-week trend to be established.

When the community level for an MSPB location is *reduced* from High to Medium or Medium to Low, the community level must remain at that lower level for at least 2 consecutive weeks before MSPB utilizes those protocols recommended by the CDC and the Task Force for areas of Medium or Low community level.

In areas with Low or Medium community levels, people do not need to wear a mask regardless of their vaccination status or physically distance in Federal buildings or on Federal land, except where required by Federal, State, local, Tribal, or territorial laws, rules, or regulations. Fully vaccinated individuals might choose to wear a mask regardless of the level of transmission for a variety of reasons. Nothing in CDC guidance precludes an employee from wearing a mask if the employee so chooses.

MSPB's COVID-19 Coordination Team will communicate any changes in community levels, associated masking requirements, etc., to office directors as soon as possible.

Consistent with CDC guidance for the indoor transportation corridor and public transportation conveyances, it is recommended that individuals wear well-fitting masks when in Government-operated vans, cars, trucks, and other motor pool passenger vehicles when there are multiple occupants. Mask-wearing in these Government-operated conveyances is not required if there is a single occupant.

In general, people do not need to wear masks when outdoors. However, consistent with CDC guidance, those who are not fully vaccinated should wear a mask in crowded outdoor settings or during outdoor activities that involve sustained close contact with other people who are not fully vaccinated.

During High community levels you may remove your mask only when you are in your own office with the door closed.

Masked individuals may be asked to lower their masks briefly for identification purposes in compliance with safety and security requirements.

MSPB staff who do not adhere to these requirements will be notified along with their office director, and they may be subject to discipline.

If you have any questions about this requirement, please contact EEO Director [Jess Lang](#).

f. Physical Distancing

Individuals who are not fully vaccinated or who decline to provide information about their vaccination status must maintain distance regardless of community level. To the extent practicable, individuals who are not fully vaccinated or who decline to provide information about their vaccination status should maintain a distance of at least 6 feet from others at all times, consistent with CDC guidelines, including

in offices, conference rooms, and all other communal and workspaces. One-way walkways, reconfiguration of workspaces or office assignments, and other mitigation strategies may be implemented to minimize interactions.

1. **Meetings:** At High community level, meetings should continue to be conducted by Zoom for Government, conference call, or other audio- or video-conferencing means, even among employees in the office. Exceptions may include training a new employee or a conversation that cannot easily be accomplished remotely, while adhering to applicable protocols.
2. **Hearings:**
 - A. In coordination with their regional or office director, administrative judges may conduct video hearings in the office.
 - B. More than one hearing may be conducted at the same time.
 - C. Two or more employees may be in the hearing room at the same time, provided they adhere to applicable masking and physical distancing guidelines and follow the other requirements of this plan.
 - D. In-person hearings with parties and witnesses will be addressed in the near future.
 - E. Regardless of community level, if it is necessary for a non-employee to be present for a hearing, permission may be granted by the regional director and the Director of the Office of Regional Operations on a case-by-case basis, considering all the circumstances, including the physical layout of the office as well as case-related details.
 - F. Should an office intend to host a meeting, conference, or event that will be attended in-person by more than 50 participants at a facility in a county where the COVID-19 community level is High, the office should first seek the approval of the agency head, in consultation with the COVID-19 Coordination Team.

g. Shared Spaces

During High community level, do not use common areas, including kitchens, for eating or drinking. Instead, eat in your office and access common areas only to obtain water or retrieve food.

Disinfectant wipes and cleaning supplies are provided at each MSPB location for employees' use. Visual markers may be installed to promote physical distancing within common spaces, and furniture may be removed.

h. Visitors

Currently, MSPB is not allowing visitors. The COVID-19 Coordination Team, in consultation with an office director(s), will decide when visitors will be allowed into MSPB workspace and communicate that to employees. Mask wearing requirements also will apply to any visitors to Federal or federally leased

facilities, where applicable. Even after visitors are allowed, the number of visitors to MSPB offices should be minimized, and efforts should be made to conduct visits virtually where possible.

When the COVID-19 community level is Medium or High in a county where a Federal facility is located, visitors to that facility should be asked to provide information about vaccination status before entering that facility by completing the OMB-approved [Certification of Vaccination form](#) provided to MSPB offices. Individuals must attest to the truthfulness of the response they provide. If possible, the form should be provided to the visitor or contractor in advance of their arrival, and it should be retained by the visitor or contractor. MSPB personnel should not collect or otherwise retain completed forms, and they should not ask for documentation to verify their attestation. Visitors to Federal buildings who are not fully vaccinated or who decline to provide information about their vaccination status should be treated as not fully vaccinated for purposes of implementing safety measures, including with respect to mask wearing, physical distancing, testing, travel, and quarantine. They also must provide proof of a negative COVID-19 test from no later than the previous 3 days prior to entry to a Federal facility. The type of test must be [authorized by FDA](#) to detect current infection and produce a dated result.

Requirements related to the provision of information about vaccination and provision of proof of a recent negative COVID-19 test ***do not*** apply to members of the public entering a Federal facility or Federal land to obtain a public service or benefit. If they are not fully vaccinated, these visitors must comply with all relevant CDC guidance, including wearing a mask and physically distancing from other people.

Delivery drivers, couriers, U.S. Postal Service employees, Federal Express employees, United Parcel Service employees, and other “transient visitors,” meaning visitors accessing a Federal facility for less than approximately 15 minutes who interact with very few people, should not be required to present a completed Certification of Vaccination form as a condition of entry, even when the local COVID-19 community level in the county where the Federal facility is located is Medium or High. They should follow required safety protocols consistent with their vaccination status while accessing the facility.

Additionally, emergency personnel responding to an emergency in a Federal facility should not be required to present a completed Certification of Vaccination form as a condition of entry, even when the local COVID-19 community level in the county where the Federal facility is located is Medium or High. They should follow required safety protocols consistent with their vaccination status while accessing the facility.

i. Symptom Monitoring

If an MSPB employee, intern, onsite contractor, or visitor has symptoms consistent with COVID-19, they must not enter the workplace.

Employees, interns, and onsite contractors should complete [symptom screening](#) daily or upon entry to the workplace. (The CDC form is a reference for screening questions; it should not be filled out, signed, collected, etc.)

Visitors may be asked to complete symptom screening before entering a Federal facility. This may be done using signage posted at the building or office suite entrances.

Any individual, regardless of vaccination status, who develops any symptoms consistent with COVID-19 during the workday must immediately isolate, wear a mask (if the individual is not already doing so and one is available), notify their supervisor, and promptly leave the workplace.

A symptom list requiring immediate medical attention can be accessed on the CDC website [here](#).

Additional Protocols While in the Office:

1. Personal protective equipment (disposable masks and gloves) and sanitizing wipes are available when entering the office lobby. Hand sanitizer is available at office lobbies and throughout MSPB space. Wearing gloves is optional.
2. Wash your hands as soon as possible after arriving at the office.
3. Wash your hands before you leave the building.

If you go into the office and begin to feel ill in any way with [symptoms consistent with COVID-19](#), within 1-2 days thereafter, you must notify your office director so that others who were in the office can be notified. See “Contact Tracing” below.

If mutually agreeable, staff members can pick up items for colleagues and deliver them to their residence. In doing so, please follow applicable health and safety protocols.

j. Contact Tracing

If an employee is notified of a positive COVID-19 test result, and they have been in the workplace within 3 days prior to becoming symptomatic or a positive test, they must notify their office director as soon as possible and provide contact information for their local health department. The office director will coordinate next steps with the COVID-19 Coordination Team. There is no obligation to notify MSPB if an employee who has *not* been in the workplace within the designated time period tests positive for COVID-19.

If an MSPB employee contracts COVID-19 and has been in the workplace within the designated time period, MSPB’s COVID-19 Coordination Team or a designee will collaborate with and support the contact tracing programs of local health departments and determine next steps. The team also will provide guidance on the coordination with facilities staff to implement infection control and workplace safety efforts once informed of a case of COVID-19 (either due to specific symptoms or a positive test). The specific circumstances are important for determining next steps, e.g., when was the person last in the office, did they come in [close contact](#) with anyone, for how long (within 6 feet of someone who has [probable](#) or confirmed COVID-19 for a cumulative total of 15 minutes or more over a 24-hour period, per CDC guidance), etc. The specifics will determine whether to conduct more extensive cleaning, additional communications, etc. The agency’s COVID-19 Coordination Team will determine the appropriate scope of any workplace closures or schedule changes as a result of a suspected or confirmed case of COVID-19 in an MSPB workplace.

The team will ensure transparency in communicating information to employees, as relevant and appropriate, consistent with local and Federal privacy and confidentiality regulations and laws.

k. Quarantine and Isolation

Please closely follow [CDC](#) and [Task Force](#) guidance for quarantine and isolation, depending on your vaccination status, at the links provided.

Quarantine refers to the time following exposure to the virus or close contact with someone known to have COVID-19. If quarantine is required after a close contact, and if you are unable to telework, you may request sick leave, accrued annual leave, or other forms of earned paid time off (e.g., compensatory time off or credit hours) or unpaid leave, as appropriate. Weather and safety leave would be unavailable, but to mitigate close contacts in the workplace, agencies may on a limited basis offer up to 3 days of administrative leave to employees who have COVID-19 symptoms and are isolating while actively seeking to be tested. If an employee who is not up to date with COVID-19 vaccines needs to quarantine after a known close contact, the employee should telework during quarantine if they are able to do so. If the employee is unable to telework because, for example, they are ineligible to do so, do not have an applicable telework agreement, or are otherwise not able to telework based on their job duties, then agencies should provide weather and safety leave while the employee is in quarantine. If the employee is unable to telework during this period because they are sick, then the employee should use sick leave, annual leave, or other forms of paid time off (e.g., compensatory time off or credit hours). Individuals should watch for symptoms for 10 full days after they last had close contact with someone with COVID-19 and should be tested at least 5 full days after they last had close contact with someone with COVID-19. However, if you have a probable or confirmed case of COVID-19, you should isolate from other people, following CDC recommendations on [isolation](#).

Isolation is used to separate people infected with COVID-19 from those who are not infected. This includes people who have a positive viral test for COVID-19, regardless of whether they have symptoms, and people with symptoms of COVID-19, including people who are awaiting test results or have not been tested. Individuals with symptoms should isolate even if they do not know if they have been in close contact with someone with COVID-19. If you are required to isolate for probable or confirmed COVID-19 and are unable to telework, you may request sick leave, accrued annual leave, or other forms of earned paid time off (e.g., compensatory time off or credit hours) or unpaid leave, as appropriate. Individuals can end their isolation after 5 full days from the onset of symptoms if they are fever-free for 24 hours without the use of fever-reducing medication, their other symptoms have improved, and they have met the agency testing requirements. Those individuals who end their isolation after 5 full days should continue to wear a mask around others for an additional 5 days. If they develop symptoms at any point, they should start a 5-day isolation period over, with day 0 being their first day of symptoms.

If you have any questions about quarantine or isolation, please consult your supervisor or the Office of Financial and Administrative Management (FAM).

I. Travel

When the community level is High, hearings, training, conference attendance, etc., should be conducted virtually. There are currently no Government-wide limits on official travel for Federal employees who are fully vaccinated. However, official travel should not be approved for an individual who has come into close contact with someone with COVID-19, regardless of vaccination status, for 10 days after the close contact. For the limited number of Federal employees who are not vaccinated, official travel should be limited to **only mission-critical trips** and must be approved in advance by the COVID-19 Coordination Team. Employees should follow the agency's travel policy. MSPB employees should adhere strictly to [CDC guidelines before, during, and after travel](#), regardless of whether the travel is personal or for [official business](#). The CDC has extensive guidelines for both domestic and international

travel, and employees should consult these resources carefully before deciding to travel, including before returning to the office after travel if you are unvaccinated.

Before you travel make sure you are up to date with your COVID-19 vaccines and check the current COVID-19 community level at your destination. State, tribal, local, and territorial governments may have travel restrictions in place. If you have a medical condition or are taking medication that weakens your immune system, you might NOT be fully protected even if you are up to date with your COVID-19 vaccines. If traveling by air, check if your airline requires any testing, vaccination, or other documents. Consider getting tested as close to the time of departure as possible (no more than 3 days) before travel. Prepare to be flexible during your trip as restrictions and policies may change during your travel.

Do NOT travel if you have COVID-19 symptoms, tested positive for COVID-19, are waiting for results of a COVID-19 test, or had close contact with a person with COVID-19 and are recommended to quarantine. Avoid travel until a full 10 days after your symptoms started or the date your positive test if you had no symptoms. If you had close contact with a person with COVID-19 but are NOT recommended to quarantine, get tested at least 5 days after your last close contact. Make sure your test result is negative and you remain without symptoms before traveling. If you travel during the 10 days after your last exposure, wear a mask when you are around others for the entire duration of travel during the 10 days. If you are unable to wear a mask, you should not travel during the 10 days.

During your travel, CDC recommends wearing a mask in indoor areas of public transportation (including airplanes) and indoors in U.S. transportation hubs (including airports). If you test positive while at your destination, you will need to isolate and postpone your return until it's safe for you to travel. If you are exposed to someone with COVID-19, do not travel until a full 5 days after your last close contact and avoid travel for a full 10 days after exposure. If you must travel during days 6 through 10 after your last exposure, get tested at least 5 days after your last close contact. Make sure your test result is negative and you remain without symptoms before traveling. Wear a mask when you are around others for the entire duration of travel during days 6 through 10. If you are unable to wear a mask, you should not travel during days 6 through 10.

After travel, keep in mind that you might have been exposed to COVID-19 on your travels. You might feel well and not have any symptoms, but you can still be infected and spread the virus to others. Get tested if you know you were exposed to a person with COVID-19 or if your travel involved situations with greater risk of exposure, such as being in crowded places while not wearing a mask or respirator. If your test is positive or you develop COVID-19 symptoms, isolate to protect others from getting infected.

While you do not need to get tested if you recovered from COVID-19 in the past 90 days, you should still follow all other travel recommendations. If you develop COVID-19 symptoms after travel, isolate and immediately get tested. Continue to isolate until you know the results and wear a mask around others.

m. Testing

As required, MSPB has established a [COVID-19 Testing Policy](#) for employees who are not fully vaccinated.

[Diagnostic testing](#) is intended to identify current infection in individuals and should be performed on anyone who has signs and symptoms consistent with COVID-19 and/or following recent known or suspected exposure to COVID-19. This includes individuals who are up to date with COVID-19 vaccines. Even under fully vaccinated circumstances these employees are required to be tested at least 5 full days after they last had a known close contact with someone with COVID-19 when the employees are

working onsite at an agency workplace or interacting with members of the public in person as part of their official responsibilities (unless the employee tested positive for COVID-19 with a viral test within the previous 90 days and subsequently recovered and remains without COVID-19 symptoms, in which case they do not need to get tested after close contact). The date of the last close contact is considered day 0. Employees who have been exposed to persons with COVID-19 at work should receive diagnostic testing at no cost to them. In general, health insurers cover the full cost of diagnostic testing.

An agency is not responsible for providing diagnostic testing to an individual as a result of a potential exposure that is not work-related. An employee who comes into close contact with a person with COVID-19 outside of work should follow CDC guidelines for testing and quarantine consistent with their vaccination status. If you have any questions about diagnostic testing, or if you have a confirmed case of COVID-19 that you believe is work-related (as defined by 29 CFR 1904.7), please contact FAM.

n. Confidentiality

All medical information collected from MSPB personnel, including vaccination documentation, test results, and any other information obtained as a result of testing and symptom monitoring, will be treated confidentially in accordance with applicable laws and policies on confidentiality and privacy, and will be accessible only by those with a need to know in order to protect the health and safety of personnel.³ MSPB's point of contact for all questions relating to personal medical data is EEO Director [Jess Lang](#).

o. Employee Assistance Program

In addition to the protocols set out in this plan, we remind all employees that the Employee Assistance Program (EAP) is available 24 hours a day, 365 days a year. The EAP can be reached at 1-800-222-0364 or at www.FOH4you.com.

3. Workplace Operations

a. Environmental Cleaning

Routine cleaning using standard cleaning products within a building's common use and high traffic areas, such as lobbies, restrooms, elevators, and stairwells, will be provided daily. Frequently touched surfaces in common areas, conference rooms, and office spaces within an MSPB facility will be cleaned regularly and in accordance with CDC guidelines. Wipes, gloves, and other Environmental Protection Agency (EPA)-approved disinfectants have been made available for employees who wish to use them to wipe down their individual workstations and personal property when in their workspace.

[CDC guidance](#) indicates that routine cleaning once a day is usually enough to sufficiently remove virus that may be on surfaces and help maintain a healthy facility. GSA will routinely clean surfaces using cleaning products that contain soap or detergent.

³ In response to multiple inquiries about whether asking about vaccination status is a violation of the Health Insurance Portability and Accountability Act of 1996 (HIPAA), we note that HIPAA "only applies to HIPAA-covered entities – healthcare providers, health plans, and healthcare clearinghouses – and their business associates. If an employer asks an employee to provide proof that they have been vaccinated in order to allow that individual to work without wearing a facemask, that is not a HIPAA violation as HIPAA does not apply to most employers." See "[Is it a HIPAA Violation to Ask for Proof of Vaccine Status?](http://hipaajournal.com)" (hipaajournal.com).

GSA will continue to clean and disinfect any space occupied or accessed by an individual with a suspected or confirmed case of COVID-19, if 72 hours or less have passed since the affected person was last in the space. Personnel and visitors will be required to vacate the affected space until the cleaning is completed. If more than 72 hours have passed since the person with a suspected or confirmed case of COVID-19 has been in the space, no additional cleaning, beyond the regular cleaning practices, is needed, consistent with [CDC guidance](#).

b. Elevators

Unvaccinated individuals, and vaccinated individuals in areas where the COVID-19 community level is High, must wear masks in elevators and in elevator lobbies. At MSPB locations where employees can access the elevator lobby on our floor from the stairwell, the use of stairs by those who are physically able to do so is strongly encouraged and applicable masking requirements based on community level apply in stairwells.

c. Ventilation and Air Filtration

Reoccupying a building during the COVID-19 pandemic requires healthy, code-compliant indoor air quality. Viral particles spread between people more readily indoors than outdoors. Therefore, CDC recommends improvements to building ventilation to reduce the spread of the disease and lower the risk of exposure. In accordance with CDC guidance, ventilation system upgrades or improvements increase the delivery of clean air and dilute potential contaminants by reducing the concentration of virus particles in the air. To the maximum extent feasible, indoor ventilation has been optimized to increase the proportion of outdoor air and improve filtration. To achieve this, the following measures are being taken.

HEADQUARTERS:

Heating, ventilation, and air conditioning (HVAC) systems are running at maximum outside airflow for 2 hours before and after the building is occupied (or from 7:00 a.m. to 7:00 p.m.) to ensure improved ventilation. Outdoor air dampers remain open beyond minimum settings to reduce or eliminate HVAC air recirculation. Both steps increase total airflow to occupied spaces. On individual HVAC units, where the HVAC fan operation can be controlled at the thermostat, the fan has been set to the “on” position instead of “auto,” which will operate the fan continuously, even when heating or air conditioning is not required. In addition, building restroom exhaust fans are functional and operating at full capacity when the building is occupied.

Regular inspections and maintenance on all building Air Handler Units (AHUs) and HVAC systems are being performed to ensure ventilation and filtration effectiveness. Experience has shown that when mechanical and visual inspections are properly conducted, the proportion of outdoor ventilation continues to increase, and recirculation is reduced or eliminated. Likewise, existing air filters have been replaced with Minimum Efficiency Reporting Value 13 (MERV-13) rated filters which improve filtration for all central AHUs that recirculate floor air.

Indoor air quality is tested regularly. This is essential to detect airborne particles, carbon dioxide, and Volatile Organic Compounds (VOCs), which are invisible gases and chemical vapors emitted by office equipment, like printers and fax machines, as well as chemical cleaning agents.

Additional modifications will continue to be considered and evaluated.

ATLANTA REGIONAL OFFICE:

HVAC systems are running at maximum outside airflow for 2 hours before and after the building is occupied (or from 6:00 a.m. to 8:00 p.m.) to ensure improved ventilation. Air filters have been replaced with MERV-8 rated filters. The HVAC systems are not designed to accommodate any filters rated higher than a MERV-8. Higher rated filters prevent the system from taking in and blowing out enough air and cause the system to shut down.

CHICAGO REGIONAL OFFICE:

Air filters have been replaced with MERV-15 rated filters with microbial protective coating and also ultraviolet lights inside the fans for microbial growth mitigation. The fans are checked daily by building engineers for proper operation and tightness of filters. Fans have been adjusted to increase airflow and bring in the maximum amount of outside fresh air possible and fan operating hours have been extended by 4 hours each day, resulting in fan runtime of 14 hours per day (5:30 a.m. – 7:30 p.m.). These measures were implemented per CDC and American Society of Heating, Refrigerating and Air-Conditioning Engineers (ASHRAE) guidance.

DALLAS REGIONAL OFFICE:

The HVAC and Building Automation Systems are currently being inspected daily for any issues. Building Operation Schedules have been modified to allow additional ventilation 2 hours before and after scheduled occupancy hours (or from 6:00 a.m. to 6:00 p.m.), Monday through Friday. Outside air is provided to all AHUs by dedicated outside air units that are filtered and pretreat the air supply. The outside air units run 24/7. All Air Filter Banks have been inspected and sealed as needed to ensure that air does not bypass the filter bank. The initial and current MERV filtration rating for all AHUs has been verified and documented. Filter upgrades have been applied where applicable and within design specifications. Air filters have been replaced with MERV-4 roll-type pre-filters on outside air and MERV-8 and MERV-10 rated filters in AHUs, depending on the specific AHU. Options are being considered to upgrade outside air filters.

DENVER FIELD OFFICE:

The lessor has installed ionization devices for the HVAC systems and elevators. Air filters have been replaced with MERV-13 rated filters.

NEW YORK FIELD OFFICE:

HVAC systems are running at maximum outside airflow for 2 hours before and after the building is occupied to ensure improved ventilation. The HVAC and Building Automation Systems are currently being inspected daily, every 2 hours. Outside airflow for all relevant equipment has been verified per design specifications to ensure appropriate outside air volume and circulation. All Air Filter Banks have been inspected and sealed as needed to ensure that air does not bypass the filter bank. Air filters have been replaced with MERV-13 rated filters. GSA installed Dynamic electrostatic air filters that are MERV-13 rated or better since November 2017.

PHILADELPHIA REGIONAL OFFICE:

HVAC systems have been using MERV-14 air filters (ASHRAE standards for COVID-19 are MERV-13 or higher) since 2016. They were last changed in April 2021 and prior to that in April 2020. Recent studies have shown that the filters last for two years, so there are no current plans to change them in 2022.

Still, an evaluation will be made in 2022 to assess whether filter replacement is necessary. The HVAC system continues to maximize outside airflow (fresh air) into the building while maintaining appropriate comfort levels for building occupants.

WASHINGTON REGIONAL OFFICE:

HVAC systems are running at maximum outside airflow, flushing the building system every morning before the building is occupied to improve ventilation. Air filters have been replaced with MERV-13 rated filters.

WESTERN REGIONAL OFFICE:

The HVAC system design at the Ronald Dellums Federal Building includes return air grilles in the suspended ceiling. The air handling units have MERV-8 rated pre-filters and MERV-13 primary filters. Outside air for ventilation has been increased as much as the HVAC system can accommodate and still maintain acceptable indoor conditions. There is the potential for fire season to limit the amount of outside air that would be able to be provided and still maintain indoor air quality; tenants would be notified if that type of situation were to occur.

d. Water Filtration

Many federally owned facilities under the jurisdiction, custody, and control of GSA are experiencing less than normal tenant occupancy as a result of the COVID-19 pandemic. Because of this reduced occupancy, the use of potable water in MSPB facilities is substantially less than the usage prior to the pandemic. As a result, the reduced usage has heightened the potential for water quality degradation.

GSA has implemented a weekly flushing program designed in coordination with a team of experts from EPA and the CDC. In federally owned facilities, the guidance directs facility managers to perform initial and weekly flushing of the drinking water in each facility, randomly test water outlets for surrogates of freshwater treatment (e.g., chlorine levels), and adjust the flushing frequency as necessary to ensure fresh, treated water is always present.

MSPB owned equipment (such as ice machines, coffee makers, water filters, etc.) that is served by the building's water supply are not covered by the GSA operation and maintenance contracts and are currently not being flushed. It is recommended that tenants properly flush these devices on a recurring basis based on [CDC](#) and [EPA](#) guidelines.

At each MSPB location, the following measures are being taken.

HEADQUARTERS:

Water systems and all common area water fixtures (including toilets, faucets, drinking fountains, sink drains, floor drains, etc.) are being flushed on a regular basis to prevent abnormal biological growth. Distribution systems and equipment are being tested regularly and water sampling is being conducted to check for bacteria levels, residual chlorine and pH, heavy metals, and other contaminants of concern.

In addition, Boston Properties has been recognized with a Fitwel Viral Response Certification at the Sumner Square Office Building. Originally created by the CDC and GSA, Fitwel is a rigorous, third-party healthy building certification system that sets the industry standard for evidence-based strategies to promote positive health outcomes for building occupants and communities.

This certification confirms that Boston Properties' approach to health security aligns with evidence-based strategies for mitigating the spread of infectious respiratory diseases in the workplace. The implemented programs include managing indoor air and water quality, enhanced cleaning, disinfecting, and maintenance protocols along with clear and consistent communication with customers.

ATLANTA REGIONAL OFFICE:

The Summit Building never closed during the pandemic. There have always been agencies in the building so the water is run through the pipes every day. Even though the water runs through the pipes, the maintenance crew performs a "water flush" weekly on floors that are unoccupied. The flush consists of running faucets, sinks, toilets, and janitorial sinks for several minutes, so the water does not stagnate in the pipes.

CHICAGO REGIONAL OFFICE:

The John C. Kluczynski Federal Building has implemented an extensive water management plan based on ASHRAE Standard 188 and developed in conjunction with third-party water treatment experts and GSA's environmental subject matter experts. The building also implemented a weekly domestic water flushing and testing program based on EPA guidance to help maintain proper domestic water quality while building occupancy is low. All the drinking fountains in the common areas of the building have filters in place to filter the water for contaminants. These measures have been in place in the building for some time now, and the weekly flushing and testing procedures will continue until building occupancy levels are high enough that it is no longer needed.

DALLAS REGIONAL OFFICE:

GSA discontinued use of the public water drinking fountains. The facility has remained open to tenants and all building operations have continued throughout the pandemic, so the plumbing system has been in use. Water testing was completed in January 2022. The results showed no issues.

DENVER FIELD OFFICE:

The water in the building is being flushed once a week and is tested annually for legionella.

NEW YORK FIELD OFFICE:

Water systems are tested monthly. A complete flush of the domestic water systems and all common area water fixtures (including toilets, faucets, drinking fountains, sink drains, floor drains, etc.) are done daily. There is ongoing testing of the domestic water system using high quality digital chlorine meter/test kits to ensure clean water. The plumbing system is routinely checked to ensure there are no dry traps in low occupancy areas due to COVID-19.

PHILADELPHIA REGIONAL OFFICE:

Water systems are operating at a high level of usage. Since the facility has remained open to tenants and all building operations have continued throughout the pandemic, there has been very little reduced occupancy. Water systems were tested in June/July 2020 out of an abundance of caution. A complete chlorine mapping study of the domestic water was performed at the time. The results showed no issues. Since the water has never been stagnant there is no testing planned for 2022.

WASHINGTON REGIONAL OFFICE:

Water in the common areas of the building is tested twice a year.

WESTERN REGIONAL OFFICE:

Water systems are operating at the same level of usage as in previous years. Since the facility has remained open to tenants and all building operations have continued throughout the pandemic, there has been very little reduced occupancy. From March 2020 through February 2021, the facility used a comparable amount of water as in previous years. Therefore, it was determined that GSA's weekly flushing program is unnecessary for the building. Testing is only performed if there is a water quality concern.

Changes History

Date of Change: June 30, 2022

Changes Made Within Section: 2. Health and Safety

Part (e.) Face Masks; Part (k.) Quarantine and Isolation; Part (l.) Travel; Part (m.) Testing