

Infectious Disease in the Workplace



Work-Life and Wellness

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Introduction and Purpose

The Internal Revenue Service (IRS) is committed to protecting the health of its workforce and providing its employees with the essential information to enable them to do their part in preventing disease at the workplace. This document is intended to provide information for employees and managers with a practical protocol to follow in the event of an incident involving a possible infectious disease, or when concerns about transmission of an infection become a primary concern.

The IRS Infectious Disease in the Workplace protocol was established to protect the health of employees in the workplace by reducing the spread of infectious diseases thereby helping to maintain business operations. The information and guidance contained within this document reflects the direction provided by the Office of Personnel Management (OPM), U.S. Department of Health and Human Services (HHS), National Institutes of Health (NIH), Centers for Disease Control and Prevention (CDC), Occupational Safety and Health Administration (OSHA) and the IRS.

This is a living document that is subject to updates to reflect modifications related to infectious disease in the workplace. The Human Capital Office (HCO) works in collaboration with Facilities Management and Security Services (FMSS) to determine core requirements and updates as needed.

Refer to the <u>IRS Source - Infectious Disease in the Workplace</u> website for additional information on IRS protocol and infectious disease education material and resources.

Authorities and References:

- Health services for federal employees are authorized by Title 5, U.S. Code, Section 7901
- OPM Work-Life, Health & Wellness Guidelines, Disease Screening Examinations and Immunizations
- NIH: National Institute of Allergy and Infectious Diseases
- CDC
- IRS Human Capital Reference for Pandemic Health Issues Information for Managers
- IRS Emergency and Security
- IRS Environmental, Health & Safety Program

Infectious and Communicable Disease Definition

The NIH defines "infectious disease" as a disease caused by a microorganism, such as a bacterium, virus, or protozoan, that is not normally found in the body and can cause infection. Some, but not all, infectious diseases are contagious, meaning they can spread from person to person. Other infectious diseases can spread from animals or insects to humans, but not from person to person. A communicable disease is an infectious disease that is contagious and can be transmitted either directly or indirectly from one source to another by an infectious agent or its toxins.

Examples of Communicable or Infectious Diseases:

- Chickenpox
- Coronavirus (COVID-19)
- Influenza (Flu)
- Hand, Foot and Mouth Disease (HFMD)

- Measles
- Methicillin-Resistant Staphylococcus Aureus (MRSA)
- Mononucleosis
- Tuberculosis (TB)

Infectious Disease Reporting Protocol (IDRP)

Reporting Requirements

If you are the manager of an employee, with a confirmed or suspected infectious or communicable disease, please report it through the <u>Situational Awareness Management Center</u> (SAMC) by telephone: 866-216-4809, email: <u>samc@irs.gov</u>, or <u>Incident Entry Form</u>.

If you are an affected employee and wish to report a confirmed or suspected infectious disease, please contact your manager, do not report it through SAMC.

Please follow step-by-step instructions contained in Appendix A.

Roles and Responisibilites

- Managers, please refer to the IDRP handbook under the Work-Life Programs menu on the <u>iManage</u> website and follow the SAMC related guidance for incident reporting. Although a rare outcome, death from infectious disease does occur and is unpredictable and needs to be reported immediately. Information can be obtained on the <u>Life Events</u> website.
- The SAMC will process the reported incident or infectious disease and send out notification to an established distribution group including the HCO Senior Commissioner's Representative (SCR), FMSS, the impacted Security Section Chief, Territory Manager, and other offices, as needed.
- The HCO IDRP Program Manager will provide specific infectious disease guidance and prevention information, including CDC fact sheets.
- The FMSS office will facilitate any actions regarding cleaning, and other building issues that may arise. (See Environmental cleaning and disinfection). The FMSS Headquarters Environmental and Health & Safety office is responsible for the selection and purchasing of Personal Protective Equipment (PPE), if required by OSHA or the CDC.
- The SCR will work with campus Site Coordinators and necessary Post of Duty (POD) points of contacts, including local business leadership, labor relations personnel, and the National Treasury Employees Union (NTEU). Communications will be issued with guidance from the Communications and Liaison (C&L) office, as appropriate, including building closures, if necessary.
- The information in the manager's report submitted to SAMC will be used to monitor the spread of disease in IRS buildings. At any time throughout the process, the SCR may contact FMSS or the HCO Health Services Program Manager for consultation. In rare circumstances, the transmission rate of a disease may be significant in a specific building and additional measures may be taken.

IDRP Response Measures

The IRS established a two-phased strategy to respond to infectious diseases. An initial response phase designed to educate and inform, and an elevated response phase to implement broader response actions.

These response phases are outlined as follows:

Communication Campaign:

The HCO IDRP Program Manager will disseminate periodic updates throughout the year educating employees about infectious diseases and resources, including the <u>IRS Source – Infectious Disease in the Workplace</u> website.

When flu season begins in early September, the IRS Health Services will begin to disseminate periodic updates regarding the flu and recommended actions. Managers are urged to reinforce the messages within their work areas.

In the event of a flu outbreak or pandemic, employees will be provided guidance and regular updates on how the IRS is responding to the current event. These communications will be relayed to employees via their government e-mail address, news articles, and the IRS Source. Managers are responsible for disseminating information to employees who may not have access to e-mail or online communications. If you have employees or co-workers who are unable to access these pages, please reach out to them and encourage them to bookmark the employee emergency page on IRS.gov for the latest information.

Elevated Response Phase:

The IRS must defer to CDC recommendations, particularly in times of public health emergencies. Managers should be aware the IRS may implement additional policies and measures. This includes employees who are absent to care for ill family members or to care for children who are home due to school closures. Communications will be issued.

Elevated response measures may include the following:

Social Distancing and Alternate Worksites:

Managers will implement social distancing principles where possible. This includes the following:

- Discourage hand shaking, sharing of equipment, and other close contact.
- Separation of employees by six or more feet. Less than six feet can be considered, if separated by a partition.
- If seat assignments or work areas cannot be adjusted to accommodate the six-foot separation, managers will consider if the work is conducive to alternate worksites, alternate work schedules, or telework. If the work accommodates an alternative worksite, schedule or telework, business unit leadership and managers will consider these options on a case-bycase basis.
- Teleconferencing should be used instead of face-to-face meetings. If a face-to-face meeting is required, managers should ensure that seating is arranged so participants are seated well apart from each other.
- Consideration of flexible and compressed work schedule requests from employees to assist in maintaining distance between employees and work coverage. Managers should also support telework options – especially for those employees identified as <a href="https://high.night.ni

High-risk refers to persons who have certain conditions (e.g., chronic medical conditions and individuals 65 years of age or older) that place them at higher risk for severe complications. Special population individuals include pregnant women and people with disabilities.

Telework and Leave Flexibilities:

In accordance with the business unit's Continuity of Operations Plan (COOP), and to prepare for any emergency, managers will ensure mission-critical employees have been pre-identified.

- If there is a requirement for these employees to accomplish their continuity work remotely, telework procedures should be implemented in advance, if possible.
- For telework program participants, when senior level management determines the need for social distancing or other strategies to contain the spread of disease, managers will be advised of the options that may be used, including weather and safety-related conditions (emergency) telework, unscheduled telework, or temporary full time telework. Employees participating in the telework program are expected to prepare by taking their equipment and work home in order to telework. Employees who are not telework program participants, but who are telework-eligible, should be encouraged (but cannot be required) to enroll. If employees are evacuated due to a pandemic health crisis under the authority of 5 CFR 550. subpart D, they are directed to evacuate the worksite and work from home or other alternate location regardless of telework agreement. Employees may be assigned any work that is considered necessary or required without regard to grade, level, or title during this time provided they have the necessary knowledge and skills to perform it. If there is no work the manager can assign to an evacuated employee, the manager may provide weather and safety leave to that employee for the affected hours. Refer to IRM 6.800.2, Employee Benefits, IRS Telework Program, IRM 6.630.1, Absence and Leave, and IRM 6.630.4, Administrative Leave for more information.
- Managers are encouraged to maximize telework flexibilities to eligible workers within high-risk and special populations, as defined by the CDC (see <u>CDC High Risk and other at-risk populations in the instance of COVID-19</u>). In the case of a public health emergency managers do not need to require certification by a medical professional and may accept self-identification by employees if they are in one of these populations.

Limitations or Restrictions on Travel:

As needed, the IRS will limit or postpone unnecessary travel to affected geographic areas (domestic or international) and will cancel non-essential business travel. Telework will be utilized whenever possible for IRS employees working in or near an affected area.

The CDC strongly encourages employers to coordinate with <u>state</u> and <u>local</u> health officials so timely and accurate information can guide appropriate responses. Local conditions will influence the decisions public health officials make regarding community-level strategies. The CDC has guidance for mitigation strategies according to the level of community transmission or impact.

All employers need to consider how best to decrease the spread of communicable diseases and lower the impact in their workplace. This may include activities in one or more of the following areas: reduce transmission among employees, maintain healthy business operations, and maintain a healthy work environment.

Guidance regarding Communicable or Infectious Diseases

Employees Who Become Sick

If an employee is sick:

The CDC recommends all employees should stay home if they are sick until at least 24 hours after their fever is gone (i.e., a temperature of 100.4 degrees Fahrenheit or 38 degrees Celsius or higher). Temperature should be measured without the use of fever-reducing medicines (i.e., medicines that contain ibuprofen or acetaminophen).

Note: Not everyone with flu-like symptoms will have a fever. Individuals with suspected or confirmed flu-like symptoms, who do not have a fever, should stay home from work at least 4-5 days after the onset of symptoms. Persons with flu-like symptoms are most contagious during the first three days of their illness.

If an employee becomes sick at work:

- The CDC recommends that workers who have flu-like symptoms upon arrival to work or become ill during the day should promptly separate themselves from other workers and go home until at least 24 hours after their fever is gone without the use of fever-reducing medications, or after symptoms have improved (at least 4-5 days after flu-like symptoms started). See CDC Stay Home When You Are Sick for more information.
- Employees who appear to have <u>symptoms</u> (i.e., fever, cough, or shortness of breath) during a pandemic, such as COVID-19, upon arrival at work or who become sick during the day should immediately be separated from other employees, customers, and visitors and sent home on appropriate leave. Managers should consult with their servicing Labor Relations Specialist for guidance. Refer to <u>Interim Guidance for Businesses and Employers to Plan and Respond to Coronavirus Disease 2019 (COVID-19) for further guidance</u>. Refer to <u>IRM 6.630.1</u>, <u>Absence and Leave</u>.
- If an IRS employee is known to be hospitalized for an infectious disease pertinent to this protocol, IRS management should submit a SAMC alert. The employee would be required to provide a work note from their physician stating that it was safe for them to return to the worksite, prior to returning. The employee's manager may request that the IRS Health Services contract provider physician review a copy of the note, prior to allowing the employee to return to the work-site. However, the medical consultant may not be able to evaluate, test, or treat employees with suspected or confirmed cases in a public health emergency and will defer to CDC recommendations. The medical consultant can only provide guidance within established protocols.

During a national pandemic or public emergency, these recommendations, procedures, and/or requirements may be relaxed or updated per OPM and IRS Human Capital Officer guidance.

Disease Information

The following information is not intended to be a substitute for professional medical advice, diagnosis, or treatment. Always seek the advice of a physician or other qualified health provider with any questions you may have regarding a medical condition.

The following are three examples of communicable infectious diseases:

Flu

A common viral infection that can be deadly, especially in high risk groups. The flu attacks the lungs, nose, and throat. Young children, older adults, pregnant women, and people with chronic disease or weak immune systems are at high risk.

- **Symptoms:** Difficulty breathing or shortness of breath, fever, persistent pain or pressure in chest, persistent dizziness, confusion, dehydration, severe muscle pain, or body aches.
- **Transmission:** Spreads mainly through the coughs and sneezes of people who are already sick with the virus. It may also be spread by touching contaminated objects (e.g., counters, door knobs, elevator buttons) and then touching your nose or mouth.
- Vaccination: The IRS encourages all employees, as recommended by the CDC, to get vaccinated with the seasonal flu shot. The employer will make free flu shots available annually on a voluntary basis to all employees.
 Another alternative is your health insurance. According to HealthCare.gov, all marketplace health plans and many other plans must cover certain preventative services, such as the flu shot, without charging a copayment or coinsurance. Be sure to check with your insurance company to find out if you must go to a specific facility to receive the vaccine. Some insurance plans only cover vaccines given by a doctor or at a limited set of locations.
- Infectious Period: People with the flu may spread disease to others from one day before they develop symptoms to up to seven days or more after they get sick. Some people who have the virus may not have any symptoms, but they may still spread the virus to others while they are infected.

Coronavirus Disease 2019 (COVID-19)

An illness caused by the severe acute respiratory syndrome coronavirus 2 (SARS-CoV-2). It is a different virus from the kind that causes seasonal flu.

- **Symptoms:** Fever, cough, shortness of breath.¹ Reported symptoms have ranged from mild to severe illness and death. These symptoms may appear **2-14 days after exposure**n(based on the incubation period of MERS-CoV viruses).
- **Transmission:** It is thought to spread mainly through close contact from person to person in respiratory droplets from someone who is infected. People who are infected often have symptoms of illness. Some people without symptoms may be able to spread the virus.² Based on currently available information and clinical expertise, older adults and people of any age who have serious underlying medical conditions might be at higher risk for severe illness from COVID-19.³
- Infectious Period: The onset and duration of viral shedding and the period of infectiousness for COVID-19 are not yet known. It is possible that SARS-CoV-2 RNA may be detectable in the upper or lower respiratory tract for weeks after illness onset, like infections with MERS-CoV and SARS-CoV.

The OPM is currently updating the pandemic pages on OPM.gov. For coronavirus information, please navigate to www.opm.gov/coronavirus.

¹ https://www.cdc.gov/coronavirus/2019-ncov/symptoms-testing/symptoms.html

² https://www.cdc.gov/coronavirus/2019-ncov/prevent-getting-sick/how-covid-spreads.html

https://www.cdc.gov/coronavirus/2019-ncov/need-extra-precautions/people-at-higher-risk.html

MRSA

A potentially dangerous type of staphylococcal bacteria that is resistant to certain antibiotics and may cause skin and other infections. You can get MRSA through direct contact with an infected person or by sharing personal items (e.g., towels and razors) that have touched infected skin.

- **Symptoms:** May appear like a bump (often resembles a bug/spider bite) or an infected area on the skin that may be: red, swollen, painful, warm to the touch, full of pus or other drainage, accompanied by a fever.
- Transmission: Can be spread by: 1) touching the skin of another person who is colonized with MRSA (i.e., exhibits no signs of an infection but specimen cultures taken from their body would test positive for the MRSA); 2) touching the skin of someone who has an active MRSA infection; 3) breathing the tiny droplets that are expelled during breathing, coughing, or sneezing from a person who has a respiratory infection with MRSA; and 4) touching a MRSA contaminated surface. Most MRSA infections are skin infections. Spreading of this infection to others can be minimized by treating the affected person with antibiotics and keeping the involved area of skin covered.

Infectious Disease Communications Guidelines

The IRS will provide employees with periodic communications that reinforce IRS policy and inform employees about agency-wide disease prevention and response strategies. To maximize preparedness, minimize the spread of disease, and support continued operations, managers should ensure employees are aware of their responsibilities in advance of any potential public health event. The guidelines below provide suggestions to managers that will enhance preparedness as well as outline steps in response to the types of diseases described in this protocol.

Employee Education and Communications Plan

The IRS communications about infectious disease are designed to:

- Mitigate unwarranted fears;
- Increase awareness about disease prevention and health promotion;
- Inform about IRS preparedness and response plans; and
- Advise employees about options available to them.

Because of the need to protect employee privacy and share accurate health information, written communications to employees will be prepared and issued by the following select group of organizations:

- C&L:
- SCR
- Campus Site Coordinator;
- HCO; and/or
- FMSS.

Managers should reinforce the IRS infectious disease in the workplace protocols and plans in their workgroup. Managers should not originate any written communications on infectious disease without coordinating the communication with their SCR or Campus Site Coordinator.

Communications Promoting Disease Prevention

Important elements of IRS disease prevention communications are listed below:

- The HCO is the IRS communication lead for the IDRP and will provide communications with support from C&L and FMSS.
- Approved CDC flyers and fact sheet distribution or posting include several different infectious and communicable diseases and provides control methods to minimize risk and advantages of proper hand washing, hygiene, and cough etiquette, as recommended by the CDC.
- The IRS recommends that when employees request leave due to an infectious disease that they voluntarily inform their managers and provide information regarding possible exposure to co-workers. This is to protect the health of co-workers and to prevent an infectious disease outbreak in the workplace.
- Resources available to employees, including behavioral health providers, can address the emotional needs of concerned employees and their families in the event of an infectious disease crisis. Managers can request consultation with the Employee Assistance Program (EAP) to help them determine the scope of support activities needed.

Preventative Measures

Hand Sanitation:

Washing your hands is easy, and it's one of the most effective ways to prevent the spread of germs. Clean hands can stop germs from spreading from one person to another and throughout the workplace. Please review the <u>CDC handwashing and hand sanitizer fact sheet</u>.

To facilitate hand sanitation measures, IRS facilities were provided with wall-mounted or stand-mounted alcohol-based hand sanitizer dispensers and no-touch trash receptacles. Please use the **OS GetServices** ticket program to document and request support in a specific workplace. The FMSS office will purchase and deliver refills for wall-mounted and/or stand-mounted dispensers located in common areas of IRS occupied floors/buildings. Local offices and business units are responsible for installing the refills in the dispensers.

Social distancing and use of PPE:

The <u>CDC</u> may recommend or require wearing cloth face coverings in public settings where other social distancing measures (maintaining six feet between people) are difficult to maintain (e.g., public transportation and work areas), especially in areas of significant community-based transmission. The IRS may require the use of face coverings/masks by its employees while at work. If PPE is required by the CDC or OSHA, FMSS will work to procure and provide PPE to employees, based on availability. If respirators are worn, the employee must be familiar with Section VII of this document: Information Sheet for Employees Using Respirators. Employees can create simple face coverings/masks for their own use <u>following instructions by the US Surgeon General</u>.

Environmental cleaning and disinfection:

Routinely clean and disinfect all frequently touched surfaces in the workplace, such as workstations, keyboards, and telephones.

For disinfection, most common Environmental Protection Agency (EPA) registered household disinfectants should be effective. A list of products that are EPA-approved for use against the infectious agent (virus or bacteria) can be found on <u>epa.gov</u>. For example, for COVID-19, the product list can be found at the following website **EPA** approved disinfectants for COVID-19.

- Follow the manufacturer's instructions for all cleaning and disinfection products (e.g., concentration, application method and contact time, etc.).
- Discourage workers from using other workers' phones, desks, offices, or other work tools and equipment, when possible. If necessary, disinfect them before and after use.
- Disposable wipes can be used on frequently touched surfaces (e.g., keycards, badges, keyboards, and desks).
- FMSS janitorial contractors will provide routine cleaning. This includes disinfecting door handles, handrails, and other common areas.
- Hand sanitizer, dispensing units and disinfecting wipes will be provided as available.

Enhanced Cleaning:

If the CDC recommends additional cleaning, FMSS will coordinate with the designated facility representative to schedule the appropriate response. If no cleaning is recommended, FMSS may help provide a special office cleaning, which would include wiping down the surfaces, walls, and floor with EPA-registered disinfectant of the infected area(s), if appropriate. In addition, surface sanitizing wipes may be used by employees if so desired. Selected EPA Registered Disinfectants.

Face Coverings, Surgical Masks and Respirators

To offer protection, face coverings, surgical masks and respirators must be worn correctly and consistently. If used properly, these devices have a role in preventing exposures. They must be used in conjunction with additional protective actions, such as limiting exposure to other people through social/physical isolation/distancing and practicing hand hygiene.

Face Coverings

The CDC is recommending the use of cloth face coverings to help reduce the spread of the COVID-19 pandemic. Cloth face coverings can reduce a large percentage of the virus-containing particles a person exhales into the air. Some people who have COVID-19 do not have any symptoms and can spread the virus unknowingly. Face coverings reduce the spread of the virus by capturing infectious respiratory secretions.

The best practices for using and maintaining a Face Covering includes:

- Wash your hands with soap and water before you put it on.
- If your cover has ties, secure the bottom ties first with a bow around the nape of your neck.
 Then pull the upper ties over your mouth and chin and secure around your head.
- Wash your hands every time you touch your face covering during the day. (Yes, every time!)
- Wash your face covering every time you remove it, and wash your hands with soap and water after removing it.
- Assume there could be virus on both sides of the facepiece any time you touch it.
- Wear a clean covering each time you need to wear one.

Surgical Masks and Respirators

Surgical masks and respirators (such as those labeled N95) are used as a physical barrier to protect the user from hazards, such as splashes or droplets of blood, saliva or mucus. Respirators are designed to seal tightly around the user's face and certified to capture very small

airborne particles through the filter material.

If respirators are required due to chemical, viral or biological exposures, the IRS will provide a comprehensive respiratory protection program that includes selection of an appropriate respirator, medical evaluation, training, fit testing and monitoring.

IRS communications will include information when specific tasks or positions at the IRS are classified as a high exposure risk to chemicals or infectious disease. No IRS employees are required to wear surgical masks or respirators.

Voluntary Use of Dust Mask/Respirator

There may be times when an employee wants to voluntarily wear a dust mask/respirator. Before an employee can voluntarily use a respirator at work, OSHA requires the following:

- Read <u>OSHA's Respiratory Protection Standard</u>. This document contains precautions to take when wearing a respirator voluntarily.
- Read and follow the manufacturer's instructions provided with the respirator. These instructions include information on how to properly use, maintain, care for and store the respirator.
- Choose a dust mask respirator appropriate for the contaminate and certified by National Institute for Occupational Safety and Health (NIOSH).

Engineering Controls

FMSS Building Delegation will follow the OSHA requirement to use Engineering Controls if possible.

- Freestanding/installed plastic or acrylic panel/partition between employees' and/or employee/ taxpayer may be indicated.
- Increase ventilation rates in work spaces.
- Increase the percentage of outdoor air that circulates into the system.

Appendix A - Infectious Disease SAMC Alert Instructions

When IRS managers receive information that an **employee has a suspected or confirmed reportable infectious disease**, including but not limited to COVID-19, they should take the following steps:

- Report it through the <u>Situational Awareness Management Center</u> (SAMC) by telephone: 866-216-4809, email: <u>samc@irs.gov</u>, or <u>Incident Entry Form</u>.
- If you are not the affected employee and wish to report a confirmed or suspected infectious disease, please contact your manager, do not report it through SAMC.
- Managers should collect specific information to include:
 - Incident Type: Internal
 - Awareness Date: (Use the calendar icon next to the blank field to indicate when you became aware).
 - Summary Description:
 - Employee name (First, Last)
 - Last date the affected employee visited the office (MM/DD/YYYY)
 - Known office and common use areas in which the employee circulated
 - Include date (MM/DD/YYYY) employee was directly exposed to a confirmed positive case (i.e. family member)
 - Date (MM/DD/YYYY) employee began exhibiting symptoms
 - Has the employee been seen by a medical professional (e.g., doctor, nurse practitioner, etc.)?
 - Has the employee been instructed to self-quarantine?
 - Has the employee been tested for COVID-19?
 - Are test results pending?
 - Test results
- Impact Notes:
 - Describe whether they may have interacted with other employees while in the office
- Business Unit(s) Affected: (Use acronyms (i.e., W&I, SB/SE, TAS))
- Alt Reference Numbers: (If an updated SAMC alert is submitted, please enter the original or previous SAMC Alert number in this field)
- Verify or Enter the Points of Contact
 - POD: Building Number, Building Name, Street Address, City and State
 - Business unit, Floor, Workspace (cubicle) Number
- A second SAMC Alert should be submitted to notify SCR of an update to the employee's condition that may result in sending an all employee communication (i.e., tested positive for COVID-19).
- When a suspected disease is confirmed, or updated information is received, a new SAMC Alert must be submitted. Please include the original ticket/alert number.
- The report(s) will adhere to Privacy Act standards. Managers will provide the report to SAMC per IRM 10.2.8, Physical Security Incident.
- Disclosure of Employee Illness, Death of an Employee, and related Privacy Act Matters.

When necessary, as there is a compelling reason to protect an employee's health or safety, including from an infectious communicable disease/pathogen, an employee's identity may be disclosed if necessary. The Privacy Act provision 5 U.S.C. § 552a(b)(8) (health or safety of an individual) authorizes disclosure of non-tax Privacy Act records "to a person pursuant to a showing of compelling circumstances affecting the health or safety of an individual if upon such disclosure notification is transmitted to the last known address of such individual." Refer to Employee Illness and Related Matters Privacy, Gov Liaison, and Disclosure Knowledge Management Page for more information.

Appendix B: Acronyms

CDC	Centers for Disease Control and Prevention
C&L	Communication and Liaison
СООР	Continuity of Operations Plan
COVID	Coronavirus Disease
EAP	Employee Assistance Program
EPA	Environmental Protection Agency
FMSS	Facilities Management and Security Services
нсо	Human Capital Office
HFMD	Hand, Foot and Mouth Disease
HHS	Health and Human Services
IDRP	Infectious Disease Reporting Protocol
IRS	Internal Revenue Service
NIH	National Institute of Health
NIOSH	National Institute for Occupational Safety and Health
MRSA	Methicillin-Resistant Staphylococcus Aureus
NTEU	National Treasury Employees Union
ОРМ	Office of Personnel Management
OSHA	Occupational Safety and Health Administration
POD	Post of Duty
PPE	Personal Protective Equipment
SAMC	Situation Awareness Management Center
SCR	Senior Commissioner's Representative (Campus or non-campus)
ТВ	Tuberculosis