



# **Managing Emergency Service Operations During the COVID-19 Pandemic<sup>1</sup>**

*A Report for Restoration Contractors,  
Second Edition,*

*April 28<sup>th</sup> 2020*

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<sup>1</sup> Formerly titled “COVID-19 and Our Essential Industry”

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It is also important to note that this document is specific to the implementation of processes addressing the risk of exposure to and spread of COVID-19, and thus the assessment of risk referred to is specific to the hazard of exposure and spread of COVID-19. Be aware that other hazards may exist and still be present, including the group known as P.A.L.M.S. (Pandemic/PCBs, Asbestos, Lead/Legionella, Mold/Metals, Silica/Safety/Sustainability). Because other hazards exist, a proper and complete hazard assessment is still a vital part of your overall safety and health processes. However, the assessment of risks other than COVID-19 is beyond the scope of this document.

## Preface

The current landscape across the globe in the midst of the COVID-19 pandemic has left nearly every individual, business and community in an unprecedented position, torn between the need for extreme measures to slow the spread of COVID-19 and the need to continue providing for the critical needs of their families, customers, and community. Our industry is facing a constantly evolving struggle as many lines of service are seeing tremendous downturn. The buildings and structures that typically require cleaning, restoration and remediation services are either empty (e.g., non-essential businesses that have been shut down by local government), or they are now occupied full time or are essential businesses (e.g., homes, health care facilities, temporary living spaces) as our communities go into self-isolation and are mandated to exercise social distancing. Public perception further accelerates our loss in demand as customers do not want services in their homes in fear of exposure to COVID-19.

The IICRC, the RIA, and the contributors to this document are working to help the members of our industry provide essential services in this rapidly evolving and ever-changing landscape, without interruption. We are advocating for the awareness necessary with federal, provincial, and local governments to help them understand the essential nature of your business.<sup>2</sup> This document has been written with the understanding that your emergency services are indeed an essential service, and to help you manage the concerns, fears, and heightened awareness for infection control as you continue to provide your essential services to your customers and community.

This document has been prepared by a wide range of experts from the cleaning and restoration industry as preliminary assistance to contractors managing the risks arising from efforts to mitigate SARS-CoV-2. It is important to note that this Preliminary Report, and the processes described, are not intended for the general public; they are solely directed to the professional cleaning, restoration and remediation industry. For that reason, the authors took into consideration the frequency, duration and variety of the work tasks performed by the field crew which result in an elevated risk of exposure.

This Preliminary Report is based on extensive industry experience and, to the extent possible, we have incorporated portions of the guidance provided by the [Centers for Disease Control and Prevention](#) (CDC) and the [United States Environmental Protection Agency](#) (EPA). However, the pandemic is a rapidly evolving situation and more research is needed. **This Preliminary Report is not intended to be, nor should it be construed as, an industry standard or a complete statement of every appropriate way to address the virus.** Each project is unique and requires a specific work plan, and it was not our goal to offer solutions for every scenario.

Taking into account the site conditions and all other relevant factors, restoration contractors must exercise sound professional judgment to determine the best plan for each project, on a case-by-case basis. Relevant factors may include, without limitation, the use and nature of the

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<sup>2</sup> [https://www.restorationindustry.org/resource/resmgr/RIA-IICRC\\_Joint\\_Letter-Exec.docx](https://www.restorationindustry.org/resource/resmgr/RIA-IICRC_Joint_Letter-Exec.docx)

building, the vulnerability and health conditions of the occupants, the needs and budget of the customer, test data and other input from competent professional consultants, the availability of resources, and other factors.

Common sense should prevail in all cases, and the restorer owes a duty to exercise reasonable care. To determine what constitutes reasonable care, the restorer may need to seek the advice of competent professionals in the fields of science, medicine, construction, and/or law. The pandemic does not lend itself to a one-size-fits-all approach, so deviations from these methods may be appropriate and preferable, based on the requirements of the project and the professional judgment of the contractor.

Accordingly, this Preliminary Report is intended solely for general informational purposes. It is a potential supplement to the restorer's other training, experience, and research. Anyone using this document should understand the document's limitations. It may be a helpful reference point to begin the development of work plan but is not intended to be construed as advice of any sort, including without limitation, scientific, medical or legal advice.

**Note:** For a discussion of procedures to address SARS-CoV-2 contamination, refer to the RIA/IICRC document titled '*Assisting Clients with COVID-19 Concerns*' available at [www.iicrc.org](http://www.iicrc.org) and [www.restorationindustry.org](http://www.restorationindustry.org).

## Abstract

Although COVID-19 creates significant risk and complication, the demand for emergency service in the restoration, remediation and cleaning industry will not stop. Professional restoration contractors have been called upon to clean up the aftermath of countless disasters, from small to large, at every hour of the day and every day of the year. Understanding the facts related to the risks posed by COVID-19 to restorers and their staff is critical as they work to sustain their business operations and serve the public during this pandemic. This Report was jointly prepared by the [Institute of Inspection, Cleaning and Restoration Certification](#) (IICRC) and the [Restoration Industry Association](#) (RIA), in an historic collaborative effort.

This Preliminary Report is intended to provide professional restoration contractors and their employees with a summary of the information available at the time of this publishing. The processes described in this report are not intended for the general public; they are explicitly directed to the professional cleaning, restoration and remediation industry. For that reason, this Report takes into consideration the frequency, duration and variety of the work tasks performed by the field crew which result in an elevated risk of exposure.

## Overview of Procedures

This is an abbreviated list of the procedures that are discussed in greater detail in this document. This is provided only as an overview of the procedures. Before employing any procedure on this list, read the full discussion and references provided for each in the balance of this document.

### *Prioritize your Work:*

1. Postpone all non-essential and non-emergency work.
2. Prioritize projects and services based on urgency.
3. Consider which projects and services have the greatest potential to serve/protect the community.
4. If called upon for disinfection of COVID-19, refer to the document RIA and IICRC Report titled *Assisting Clients with COVID-19 Concerns* available at [www.restorationindustry.org](http://www.restorationindustry.org) and [www.iicrc.org](http://www.iicrc.org).

### *Perform a Risk Assessment on Staff, Roles and Responsibilities:*

1. Move administrative staff to remote, work from home settings if appropriate or required.
2. Assign essential work that requires on site activity to those who are not in groups identified as high risk by the CDC.
3. Train staff on guidance for personal and public safety.
4. COVID-19 affected staff should stay home, contact their health provider.
5. Develop communication and work protocols for when team members have COVID-19 infection.

6. Follow guidance from CDC for recovered COVID-19 individuals.
7. Prepare the work environment in accordance with OSHA and CDC guidance for essential business.

*Protect your Field Staff and the Public during Service or Emergency Response:*

1. Treat each project and customer interaction as a potential COVID-19 exposure risk.
2. Ensure field staff are equipped with adequate cleaning, hand washing and disinfection resources.
3. Train employees on the proper selection and use of personal protective equipment (PPE).
4. At a minimum, use disposable N95 respirators, disposable gloves, eye or face protection.
5. Wear disposable gloves that are not likely to tear or become compromised given the task.
6. Evaluate possible PPE substitutions carefully to ensure appropriate protection.
7. Use exhaust systems, engineered makeup air and HEPA filtration as needed at the work site.

*Supplemental Protection, Depending upon the Job Task:*

1. Follow CDC guidance for the specific facility type
2. Wear NIOSH approved respiratory protection and other PPE as needed
3. Wear face protection as needed
4. Wipe then apply disinfectant to touch points in the service vehicles at the beginning and end of each job
5. Before removing gloves, clean then apply disinfectant to tools and instruments used on the job site
6. When leaving the work area, implement appropriate personal decontamination
7. To the extent possible, obtain signatures on documents electronically to avoid contact.

## Protecting Workers

The Centers for Disease Control (CDC), the US Occupational Safety and Health Administration (OSHA), the World Health Organization (WHO) and other authorities provide up to date recommendations and procedures to minimize the risk of contracting and spreading COVID-19. Keep up to date as the information evolves, and experts gain a better understanding of how COVID-19 is spread. Use official resources such as the WHO at [www.WHO.int](http://www.WHO.int) and the CDC at [www.CDC.gov](http://www.CDC.gov).

## Prioritize Your Work

To minimize the exposure of your work force, the first line of defense is to adopt social distancing behavior. This means reducing the number of times your organization requires employees to be in contact with one another and the customers you serve. Some of the options are listed below:

1. Postpone all non-essential and non-emergency work to minimize field trips.
2. Prioritize projects and services to those where response time is essential to the successful project outcome.
3. Consider which projects and services have the greatest potential to serve and protect the greatest number of individuals in your community.
4. If called upon for disinfection of COVID-19, read and understand the currently available resources. Refer to the *Best Practices for Decontamination of Coronavirus* section later in this document for a list of currently available resources.

### Perform a Risk Assessment on Staff, Roles and Responsibilities on the Project

Here, the goal of risk management is to identify, assess and mitigate the potential risks of exposing your staff to COVID-19. The actions needed will vary depending upon the job tasks associated with their essential work. An assessment of risk is a critical part of managing potential exposure. Risks should be prioritized, and mitigation actions based on that prioritization. The assessment should follow the workflow, from beginning of the day to end of day, from start of task to end of task. Further, it is important to be dynamic and fluid and adjust to changes in personnel, situation, and advisories from public health and government officials.

1. Move administrative staff to remote, work from home settings, as appropriate or required. Provide appropriate guidance and resources as necessary, such as available from the Centers for Disease Control and World Health Organization, for how to effectively manage home isolation and working from home. Consider that most of these individuals are not accustomed to working at home and will require guidance in establishing a homework site. It can be helpful to begin each day with a team update to ensure productive interaction and communication occurs, and provide a written work from home or telecommunication policy for your employees.
2. Apply any necessary or required administrative controls to reduce potential for exposure. This may include assigning essential work that requires on site activity to those that are not in high risk groups as defined by the CDC.
3. Provide training as necessary or required on personal and public safety to those that will be called upon to work with others, including those individuals working in your physical work location (e.g., warehouses, shops, offices, supply areas).<sup>3</sup> This may include staggered work reporting times and social distancing at worksites (e.g., maintaining a distance of at least six feet between individuals). Include appropriate training on social distancing (i.e., physical distancing) even in work vehicles which may include spacing, wearing PPE (at minimum respirator and gloves) or avoiding carpooling.
4. If any of your personnel or their household members are known or suspected to be infected with COVID-19, or are showing symptoms identified by the WHO or CDC that are common to COVID-19 infection, they should follow CDC guidance.

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<sup>3</sup> <https://www.osha.gov/Publications/OSHA3990.pdf>

5. Provide for measures to mitigate spread of infection amongst staff in the event of positive infection. Design protocols to reduce the risk of employee exposure to COVID-19. This will in turn reduce the likelihood that your employees will need to self-isolate, allowing you to continue your business operations. A protocol for how you will inform team members of a positive identification of COVID-19 amongst your staff is part of these measures.
6. Individuals who have recovered from COVID-19 should practice self-quarantine if recommended by the CDC before returning to work.<sup>4</sup> This instruction from the CDC is likely to change as new information is obtained regarding the recovery from COVID-19. It is therefore imperative that you remain current on the guidance on this topic.
7. Prepare your work environment in accordance with OSHA and CDC guidelines for any essential staff who must continue to physically appear at your place of business.<sup>5</sup>

### Protect your Field Staff and the Public

For essential work activities that require staff to perform duties in the field, more specific controls and training should be deployed to minimize risk.

A full, site specific hazard assessment is still a critical part of your safety and health program and may be required by local, federal or provincial law.<sup>6</sup> The hazard assessment, when performed, shall be certified by the employer's designated, qualified and competent staff member.<sup>7</sup> The practices and methods stated below are in addition to the identification, evaluation, prevention and control of other job site hazards. For the purpose of this document, the risk assessment being discussed is in regard to the risks associated with COVID-19 exposure.

For information on suggested training for field staff, refer to *Appendix 1: Training and Education*.

For any service or emergency response:

1. Until such time that the COVID-19 pandemic is determined by local, federal or provincial regulatory bodies to no longer be a significant threat, treat all projects as though there may be or has been a COVID-19 infected individual within the property or jobsite.
2. Ensure field staff are equipped with adequate cleaning and disinfection resources. Active field staff should wash hands frequently with soap and water, and for a minimum of 20 seconds. Use disposable disinfectant wipes when hand washing is not possible. If necessary, use hand sanitizer with between 60% and 95% alcohol. Designate a specific location at the job site for hand washing, and ensure the designated location is immediately adjacent to the staging/doffing area and properly cleaned before and after daily work activities.
3. Train employees on proper use and selection of PPE<sup>8</sup> before employees start a project or task they are unfamiliar with. Many employees who are not familiar with the proper use of PPE or

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<sup>4</sup> <https://www.cdc.gov/coronavirus/2019-ncov/hcp/disposition-in-home-patients.html>

<sup>5</sup> <https://www.osha.gov/Publications/OSHA3990.pdf>

<sup>6</sup> <https://www.osha.gov/shpguidelines/hazard-identification.html>

<sup>7</sup> <https://www.osha.gov/laws-regs/regulations/standardnumber/1910/1910.132>

<sup>8</sup> <https://www.osha.gov/laws-regs/regulations/standardnumber/1910/1910.132>

its purpose will nonetheless be asked or required to use it for protection from COVID-19. One mistake can be dangerous. For example, implement hand washing procedures each time disposable gloves are removed, and training should include demonstration for how to properly turn gloves inside out during removal. Written instructions alone are not sufficient.

4. Field staff should use disposable N95 respirators or appropriate substitute (see number 6 below), disposable gloves (e.g., latex, nitrile, vinyl) and eye protection (e.g., goggles, face mask). Additional PPE based on task and location may be necessary. For a more thorough discussion related to considering a higher level of respiratory protection, refer to the document titled *Assisting Clients with COVID-19 Concerns*.
5. Wear disposable gloves that are not likely to tear or become compromised given the task. Consider double gloving to increase durability and reliability of protection, or wearing puncture resistant gloves (e.g., leather, nylon) as a top layer when needed. Clean gloves frequently while working with disinfecting wipes. Discard gloves and wash hands after cleaning and disinfecting tools and equipment used at the job site, but before entering the work vehicle.
6. The availability of many traditional PPE items is significantly limited, and many jurisdictions are mandating that any available supplies be reserved for the healthcare and first responder industries. When faced with limitations for acquiring traditional PPE inventory, other items capable of providing the intended protection may be necessary as a substitution. Evaluate possible substitutions carefully to ensure they will provide an appropriate level of protection and consider how you will manage existing inventory to maximize its use in light of these limitations. Consider available guidance from local, federal, provincial and state health agencies, such as the current guidance from the US FDA<sup>9</sup>. When standard PPE, such as NIOSH rated N-95 respiratory protection, is not available due to market shortages, document the situation and conditions, the name and model number of the substitute product, and the justification for selection of the substitute.
7. The use of controlled ventilation of the workspace may reduce the risk of airborne viral fragments during on site work activities. Note that simply opening doors and windows may not facilitate the level of ventilation necessary to significantly reduce airborne viral particulate. The removal of aerosolized particulate during the cleaning process may further improve the overall cleaning efficacy and reduce risk. Controlled ventilation refers to the use of an exhaust system (e.g., negative air) and engineered makeup air that result in controlled air exchange throughout the work environment. Consider the use of HEPA filtered exhaust systems particularly if the exhaust cannot be directed outdoors or must be directed to an area where exhausted air may come into contact with people. When exhaust systems cannot be used, consider the use of HEPA filtered air scrubbers. When used HEPA air scrubbers are used, the use of a laser particle counter to verify filter efficacy is significantly beneficial. At a minimum, inspect the filter, filter seal and fit of the filter containment housing carefully to ensure no visible evidence of filter bypass or airflow leakage.

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<sup>9</sup> <https://www.fda.gov/medical-devices/personal-protective-equipment-infection-control/faqs-shortages-surgical-masks-and-gowns#kn95>

Note that according to OSHA, “Workers required to use PPE must be trained. This training includes when to use PPE; what PPE is necessary; how to properly don (put on), use, and doff (take off) PPE; how to properly dispose of or disinfect, inspect for damage, and maintain PPE; and the limitations of PPE. Applicable standards include the PPE ([29 CFR 1910.132](#)), Eye and Face Protection ([29 CFR 1910.133](#)), Hand Protection ([29 CFR 1910.138](#)), and Respiratory Protection ([29 CFR 1910.134](#)) standards. The OSHA website offers a variety of [training videos](#) on respiratory protection<sup>10</sup>.”

Supplemental protection, depending upon the job task and your assessment of risk:

1. Follow CDC guidance for the specific facility type for each project, such as schools, churches, daycares, business offices<sup>11</sup>.
2. Wear NIOSH approved respiratory protection and other PPE appropriate for the job and tasks performed using the guidance provided by OSHA and to address the additional hazards identified during your risk assessment. Provide appropriate training on the use and limitations of respiratory protection and your company’s written respiratory protection plan and required fit testing. Ensure that workers and temporary workers are following your updated, written hazard communication program<sup>12</sup>.
3. Evidence suggests that transmission of COVID-19 may also occur through mucous membranes (e.g., eyes, nose, mouth). Touching the face should be avoided when possible. PPE can help prevent touching the face.
4. Clean and apply disinfectant to touch points in the service vehicles at the beginning and end of each job using an EPA registered disinfectant that is compliant with the guidance available from the EPA, such as those that appear on the ‘Emerging Pathogen: List N’<sup>13</sup>. For more information on disinfectant use and selection, refer to the Report titled *Assisting Clients with COVID-19 Concerns*, available at [www.iicrc.org](http://www.iicrc.org) and [www.restorationindustry.org](http://www.restorationindustry.org).
5. Clean and apply disinfectant to tools and instruments used on the job site before removing disposable gloves using an EPA approved product on List N, in accordance with label instructions.
6. When leaving the work area, implement appropriate personal decontamination including removal of PPE, washing hands, etc.
7. To the extent possible, obtain signatures on documents electronically to avoid contact. If using physical forms, use appropriate disinfectants on pens and documents.

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<sup>10</sup> <https://www.osha.gov/SLTC/covid-19/controlprevention.html>

<sup>11</sup> <https://www.cdc.gov/coronavirus/2019-ncov/community/>

<sup>12</sup> [https://www.osha.gov/FedReg\\_oshaf/FED20120326.pdf](https://www.osha.gov/FedReg_oshaf/FED20120326.pdf)

<sup>13</sup> <https://www.epa.gov/pesticide-registration/list-n-disinfectants-use-against-sars-cov-2>

## Working On COVID-19 Projects

If your organization is being called upon to provide COVID-19 related services in structures that are suspected to have been contaminated, it is paramount that you are fully aware of the resources available, the risks associated with infection, and the business related risks you should consider before accepting the project. Organizations and institutions that are actively providing guidance include:

- United States Centers for Disease Control (CDC)
- United States Environmental Protection Agency (EPA)
- United States Occupational Safety and Health Administration (OSHA)
- Health Canada (and appropriate Provincial Agencies)
- World Health Organization (WHO)
- Institute of Inspection, Cleaning and Restoration Certification (IICRC)
- Restoration Industry Association (RIA)
- American Industrial Hygiene Association (AIHA)
- American Society of Safety Professionals (ASSP)

For more information and links to helpful resources, refer to the *Helpful Links and Resources* section at the end of this document.

The Restoration Industry Association, in partnership with the Institute of Inspection, Cleaning and Restoration Certification and several industry stakeholders, has recently produced an article on disinfection methods for buildings, titled *Assisting Clients with COVID-19 Concerns*, and you can find a copy of the document [\[here\]](#). The jointly written publication provides a summary of some of the guidance from many of the organizations listed above and can serve as a reference to begin the formulation of a COVID-19 project plan.

When working with COVID-19 projects, it is important to train all workers on the true risks associated with exposure, to include cross contamination that can occur if measures are not taken to prevent it. The steps necessary will vary depending upon the tasks performed by the individual, but may include PPE removal and disposal techniques, shoe protection protocols, etc.

## Contracts, Risk Management and Insurance Concerns

For a discussion about managing risk, drafting contracts and selecting insurance, please see the RIA/IICRC document *Assisting Clients With Covid-19 Concerns* available at [www.iicrc.org](http://www.iicrc.org) and [www.restorationindustry.org](http://www.restorationindustry.org).

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### RIA/IICRC COVID-19 Joint Task Force

This document is managed by the RIA and IICRC *COVID-19 Joint Task Force (JTF)*. The JTF is comprised of a group of volunteers, appointed by the IICRC and RIA. The members are listed here alphabetically:

- Brandon Burton, WLS, MWR, IICRC Standards Chair, Next Gear Solutions, BIEC Consulting
- Mark Drozdov, IICRC Board of Dir., Vice Chair S410 Infection Control Consensus Body
- Norris Gearhart, CR of Gearhart and Associates
- Michael Pinto, FLS, CSP, CMP of Wonder Makers Environmental

### Reviewers and Contributors

The following individuals and organizations have contributed content or peer review or other support to one or more versions of the joint COVID-19 reports. By listing below, the individual did not necessarily directly contribute to this specific report. They have however contributed time, expertise, peer review or other support to one or more of the RIA/IICRC Joint COVID-19 reports, and are listed here alphabetically:

- Leslie Anderson, Vice President of Training & Launch, Paul Davis Restoration
- J. Scott Armour, M.S., Armour Applied Science
- Jaclyn Carpenter, Ideal Restoration
- Kristy Cohen, CEO of Restoration Industry Association
- Hugh Crisp, BluSky;
- Edward H. Cross, Esq., Law Offices of Edward H. Cross; RIA Contractor Advocate
- Graham Dick, Infection Control Training Group; Chair, S410 Infection Cont. Consensus Body
- John DiMenno, CR, CMRS, CMP, WLS, Romualdi Davidson and Associates
- Peter P. Duncanson, Director of Commercial Operations, ServiceMaster Restore
- David Dybdahl, CIC, CPUC, ARM, American Risk Management Resources Network
- Josh Hobbs, Dalworth Restoration
- Mark Meece, Complete DKI;
- Tom Peter, CIH, Insurance Restoration Specialists
- Kent Rawhouser, CMP, WLS, A&J Restoration Services
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- Halden Shane, M.D., Steramist
- Shawn Silliman, CR, WLS, First Restoration Services
- Mark Springer, CR, RIA President, President of Dayspring Restoration
- Joe Spurgeon, Ph. D., CIH
- Bruce White, SGS Forensic Laboratory

*The COVID-19 Joint Task Force is a collaboration of the Institute of Inspection, Cleaning and Restoration Certification (IICRC) and the Restoration Industry Association (RIA). The IICRC is the leading certification body in the cleaning and restoration industry, and an ANSI Accredited Standards Developer. For more information on the IICRC, visit [www.IICRC.org](http://www.IICRC.org). The RIA is the only international, professional trade association for the cleaning and restoration industry. Its national and international member firms specialize in cleaning, treating and repairing damaged buildings and their contents. RIA sponsors education, training, and certification programs, and is the leading voice advocating for the rights of restorers. For more information, visit [www.restorationindustry.org](http://www.restorationindustry.org).*

## Helpful Links and Resources

Center for Disease Control (CDC):

[www.cdc.gov](http://www.cdc.gov)

CDC Guidance for Specific Facility Types (e.g., Schools, Churches, Daycares, Business Offices):

<https://www.cdc.gov/coronavirus/2019-ncov/community/>

World Health Organization:

[www.who.int](http://www.who.int)

John Hopkins University Coronavirus Resource Center:

<https://coronavirus.jhu.edu/>

OSHA guidance on infection and exposure control:

<https://www.osha.gov/SLTC/covid-19/controlprevention.html>

OSHA, *Guidance on Preparing Workplaces for COVID-19*

<https://www.osha.gov/Publications/OSHA3990.pdf>

US Department of Health and Human Services, *Coronavirus Disease 2019 Risk Assessment and Public Health Management Decision Making*:

<https://www.cdc.gov/coronavirus/2019-ncov/downloads/public-health-management-decision-making.pdf>

Government of Canada, *Coronavirus disease (COVID-19): Outbreak Update*

<https://www.canada.ca/en/public-health/services/diseases/2019-novel-coronavirus-infection.html>

Australian Government Department of Health, *Coronavirus (COVID-19) Resources*

<https://www.health.gov.au/resources/collections/novel-coronavirus-2019-ncov-resources>

UK Government, *Coronavirus (COVID-19): Guidance*

<https://www.gov.uk/government/collections/coronavirus-covid-19-list-of-guidance>

AIHA, COVID-19 Resources, including “Role of the Industrial Hygienist in a Pandemic”

[https://www.aiha.org/public-resources/consumer-resources/coronavirus\\_outbreak\\_resources](https://www.aiha.org/public-resources/consumer-resources/coronavirus_outbreak_resources)

CDC RISK and DEFINITIONS (updated Mar 22, 2020)

<https://www.cdc.gov/coronavirus/2019-ncov/php/risk-assessment.html>

## Appendix 1: Training and Education

Cleaners, restorers and remediators who continue to operate amidst the COVID-19 pandemic face a unique set of challenges. Evaluating and supplementing skills may improve the site health and safety for their workers and the public, improve the effectiveness and consistency of the cleaning processes and ensure that the work is properly documented.

A continuous effort on expanding the knowledge of workers and supervisors related to the topics discussed below will likely reduce the risk of exposure and possible infection. This effort can begin with a training needs assessment that will vary for each individual based on assigned job tasks. Components of training and skills may include many of the following:

- How to work safely with, and in proximity to, a biological agent that is generally recognized as a hazard
- Plan development and implementation for:
  - Exposure Control & Special Hazards
  - Risk Assessments
- PPE program development, implementation and periodic review
  - Implement frequent review of [OSHA guidance](#) or applicable local, state, federal or provincial regulatory bodies
- Course of actions for emergencies
- Fire hazards and fire prevention
- Safe work procedures and precautionary measures
- Identification of readily accessible handwashing facilities
- How to properly follow EPA disinfectant application directions and review product Safety Data Sheets (SDS)
- Keeping records of:
  - all training/education provided to workers
  - all workers who have been exposed
  - surfaces that are cleaned, sanitized, disinfected, sterilized and tested.

In addition to the needs assessment, organizations should consider ensuring staff who are designated to supervise or manage operations in the field have additional training. Because training specific to COVID-19 is in extremely short supply, the training resources and certifications will likely not be COVID-19 specific. These listed resources are not suggesting that an individual is required to complete each training or certification. It is recommended that specific content used in administering these certifications be considered, as appropriate, based on the specific job tasks. Recommended training resources and certifications that may be considered include, but are not limited to:

- Infection Control (e.g., Infection Control Risk Assessment or ICRA)
- Crime / Trauma Scene Cleanup (e.g., from IICRC, GBAC, ABRA)
- Microbial Remediation (e.g., IICRC, RIA, ACAC)
- Lead and Asbestos Related Certifications
- HAZWOPER (Specifically, PPE elements of the training)
- Health and Safety (OSHA, IICRC)