Marsh Risk Consulting
COVID-19 Playbook for Restaurants

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Foreword

Since 1871, clients have relied on Marsh for trusted advice to represent their interests in the marketplace, make sense of an increasingly complex world, and help turn risks into new opportunities for growth. In 2018, Marsh acquired Wortham Insurance, a regional broker with a commitment to a client-centric philosophy to form Marsh Wortham, a division of Marsh USA Inc.

Marsh Wortham brings together more than 600+ colleagues across Texas, Oklahoma, and Louisiana. Our parent company is Marsh & McLennan Companies (NYSE: MMC), the leading global professional services firm in the areas of risk, strategy and people. With 65,000 colleagues worldwide and annual revenue exceeding $14 billion, Marsh and McLennan Companies also include global leaders Guy Carpenter, Mercer, and Oliver Wyman.

Marsh Wortham is empowered to bring all of Marsh & McLennan’s resources to bear for our clients in more than 130 countries. To every client interaction we bring a powerful combination of deep intellectual capital industry specific expertise, global experience, and collaboration. We offer risk management, risk consulting, insurance broking, alternative risk financing, and insurance program management services.

In conjunction with Marsh Risk Consulting, and as the preferred Property and Casualty Insurance broker for the Texas Restaurant Association (TRA), we have created this COVID-19 (CV-19) Playbook which provides practical guidance for restaurants to plan their return to work while addressing the many new challenges related to the Coronavirus pandemic.

Our knowledge and response to COVID-19 continues to evolve. The information provided is based on regulatory guidance and best practice as of the latest issued/revision date. Businesses, including restaurants, are likely to need to use protective protocols until a reliable vaccine is available and/or so many people have had the virus that it is no longer spreading quickly.

This Playbook is intended to discuss challenges and protocols unique to the restaurant industry, including the immediate actions to address the presence of the Coronavirus as well as the integration of immediate activities into the broader management system organizations use to keep their people safe.

Resources:

- EPA registered chemical information - https://www.epa.gov/pesticide-registration/list-n-disinfectants-use-against-sars-cov-2
1. Pandemic Support Team

Organizations need to establish a COVID-19 response team, comprised of representatives of various functions who are tasked with the implementation, maintenance and improvement of the COVID-19 response. Many restaurants have already created this team to guide the business as they conducted carryout and delivery operations.

Restaurants, like other businesses, often have incident response teams, which are generally active during a natural disaster. These teams bring together key decision makers with the authority to commit the organization to a specific course of action while also being able to acquire needed resources such as Personal Protective Equipment (PPE).

The key roles and responsibilities of a restaurant Pandemic Support Team (PST) are:

- **Business Leader**: role accountable for leading all efforts for the company.
- **Team Leader**: role accountable for leading efforts for one large restaurant or a restaurant regional group.
- **Operations Lead**: role responsible for implementing the restaurant response onsite, including pre-work screening, social distancing, signage etc. Often the restaurant manager will fill this role.
- **Logistics Lead**: role responsible for acquiring and coordinating specialized resources required to implement the program, often a role in the Purchasing Department.
- **Communications Lead**: role responsible for program awareness, communications and training. HR, Training or Communications leaders may fill the role.
- **Technical Advisor**: role responsible for providing expert guidance to the team, often filled by a Safety or Food Safety professional knowledgeable in pandemic response.
2. Pre-Work Screening

Many restaurants introduced pre-shift screening for carryout operations. Pre-shift screening is a key component of maintaining a safe environment for employees, contractors and guests by reducing the path for infection.

Key Items:
- Employee roster for logging purposes.
- Hand sanitizer/ EPA-registered sterilizing pads, wipes or solution.
- Infrared forehead thermometer (or similar). Steps in this guide refer to this type of thermometer.
- Log sheet (Note: this is protected health information and must be treated confidentially).
- PPE for tester (disposable gloves, disposable or washable apron, smock or coat, N-95 surgical respirator (preferred), or standard N95 respirator, disposable surgical mask and a transparent face shield).

Consideration should be given to where pre-screening occurs. Whenever possible, screening should be completed outside of the restaurant. If weather or other issues do not permit pre-work screening outdoors, effort should be taken to complete the screening in a low travel area that can be reached without having the employee travel through the restaurant to get to the location. Restaurants should consider that more employees will be reporting to work, as dining spaces are re-opened. Screening areas should allow for privacy and designed to accommodate testing in a timely and safe manner.

- Create a one-way foot traffic pattern through the testing area.
- Provide markings and signage to direct employees through the area to maintain social distancing.
- Have adequate staff with proper training on screening procedures. Include steps for putting on, taking off and use of PPE.

Pre-Temperature Check and Screening Actions
- Identify and designate a testing area.
- Screener performing temperature checks and screening questions puts on PPE.
- Remind the person being screened to maintain physical distance (six feet separation) while waiting for their temperature check.
- Ask the employee/contractor/visitor if they have been outside of the United States within the last 14 days. If yes, explain that they need to be in self-quarantine and that they should return home. Mark the log sheet with Fail and note the reason.
- Ask the employee if they have experienced a temperature or COVID-19 symptoms as noted by CDC guidelines.
- If yes, explain that they should return home and seek medical advice. Mark the log sheet with Fail. However, if the symptoms are associated with a known condition such as asthma, COPD, chronic sinusitis, etc., note this on the log sheet and proceed to the temperature screening.
- Ask the employee if within the last 14 days, they have been in close contact with anyone who has been diagnosed with or who has symptoms that suggest they might have COVID-19. If yes, explain that they need to be in self-quarantine and that they should return home. Mark the log
sheet with Fail, and note the reason. NOTE1: if they are deemed a critical worker and are not experiencing symptoms they may perform work activities while utilizing a facemask and following CDC recommendations.

- Ask the employee if they have been diagnosed with COVID-19 by either a positive test or a healthcare provider. If yes, explain that they need to be in self-quarantine and that they should return home. Mark the log sheet with Fail, and note the reason.

<table>
<thead>
<tr>
<th>Steps in order:</th>
<th>Tasks</th>
</tr>
</thead>
<tbody>
<tr>
<td>Step 1</td>
<td>Prior to performing task, ensure screeners are wearing appropriate PPE (gloves, respirator or mask and protective gown, face shield).</td>
</tr>
<tr>
<td>Step 2</td>
<td>Confirm with the employee that they are authorizing you to take their temperature. If you receive consent, skip to step 3.</td>
</tr>
<tr>
<td>Step 3</td>
<td>If the employee refuses, they will need to be sent home.</td>
</tr>
<tr>
<td>Step 4</td>
<td>Inform the employee that they will need to remain during the process for accuracy.</td>
</tr>
<tr>
<td>Step 5</td>
<td>Ask employee the screening questions to determine if they should be sent home for self-quarantine.</td>
</tr>
<tr>
<td>Step 6</td>
<td>Take the employee’s temperature.</td>
</tr>
<tr>
<td>Step 7</td>
<td>Compress the button and wait for the beep.</td>
</tr>
<tr>
<td>Step 8</td>
<td>View the temperature on the digital screen.</td>
</tr>
<tr>
<td>Step 9</td>
<td>IF, the temperature is within CDC recommendations (or local Health Department requirement if more stringent), write “PASS” on the log sheet and the employee can be released to work.</td>
</tr>
<tr>
<td>Step 10</td>
<td>IF, the temperature is not within CDC (or local Health Department requirement if more stringent), write “FAIL” on the log sheet. Inform the employee that they have failed the temperature testing and that one additional test will be performed.</td>
</tr>
<tr>
<td>Step 11</td>
<td>Repeat steps 5 through 8 with one exception, if the employee fails the testing again, they are to be sent home and asked to contact their physician immediately for medical advice. Place a “FAIL” on the log sheet.</td>
</tr>
<tr>
<td>Step 12</td>
<td>Clean and sanitize all surfaces that had been touched by employee who failed.</td>
</tr>
<tr>
<td>Step 13</td>
<td>Sanitize the thermometer for the next tester with a sanitizing wipe.</td>
</tr>
<tr>
<td>Step 14</td>
<td>Remove PPE, discard disposable PPE and wash hands.</td>
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</tbody>
</table>

Note: depending on the type of thermometer used, update the instructions with the manufacturer’s guidance.

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3. Sick at Work

Create and enact a process to assist employees with COVID-19 signs or symptoms while at work. Since the virus is highly contagious, this process provides the opportunity to control the level of exposure to others. Like pre-work screening, restaurants must have a plan to minimize the impact of COVID-19 spread when an employee becomes ill with COVID-19 symptoms at work.

Employees should be instructed to self-monitor throughout their shift and report any symptoms to the restaurant’s designated person, most likely the manager. If an employee does feel sick with COVID-19 symptoms, they should be provided with a mask immediately, if they are not already wearing one. The employee should be sent to a designated location, preferably outside of the building, weather permitting. When reporting to the designated area, employees should take care not to touch common work surfaces and to keep physical distancing.

The CDC advises that, on average it takes 5–6 days from when someone is infected with the virus for symptoms to show; however, in some individuals symptoms may take up to 14 days. Note that some individuals may be asymptomatic which means they are carriers of the COVID-19 virus but have not endured any of the typical symptoms of infection. Since we are learning more about the virus, consult the CDC website for up to date information.

People with mild symptoms who are otherwise healthy should self-isolate. They should be encouraged to seek medical attention if they have COVID-19 symptoms.

Standard COVID-19 exposure cleaning and sanitizing procedures should be used in all areas and on all surfaces and tool where the sick employee worked. A written cleaning and sanitizing protocol should be in place. This should be done in a manner consistent with CDC and regulatory guidelines.

Restaurants should follow their notification process to alert others that have been in close contact with the sick employee.
4. Physical Distancing and Contact Reduction

In the absence of a vaccine, physical distancing is viewed as the most effective control to reduce the spread of COVID-19. Restaurants should consider practices that allow physical distancing of at least six feet between employees and guests. To meet this goal, the following guidelines provide practical tips to implement and maintain physical distancing.

- Remote work: implement and maintain work from home/telecommuting wherever possible in office locations.
- Scheduling
  - When possible, schedule work shifts with the same employees on each shift. This will allow for reduced exposure if one person becomes sick.
  - Have employees arrive at staggered times to reduce the number of employees completing pre-work screening at one time.
  - Add labor time in the schedule for employees to take additional breaks for handwashing and sanitizing surfaces.
- Personal protective equipment
  - Use masks and gloves where it makes sense and is recommended by the CDC, state government or locally by health authorities.
- Equipment
  - Ensure HVAC equipment is working properly and maintained, replacing filters as needed.
  - Check dishwasher and other sanitizing equipment to ensure the temperature, chemical concentration and dwell times are being met to properly sanitize.
  - Ensure water temperatures meet local requirements and are suitable for chemicals used.
  - Look over the chemical dilution system to ensure proper dilution, particularly if the type or concentration of chemicals has recently changed.
  - Create special disinfection guidelines for computer screens and computers.
- Back of the house
  - Consider limiting menu offerings to simplify work in the kitchen and with an eye to setting up prep stations using physical distance.
  - Make and mark lines and cooking areas with appropriate physical distance between employees.
  - Consider how kitchen areas can be reconfigured to provide physical distancing.
  - Add clear barriers to assist with physical distancing in areas where employees cannot be kept apart.
  - Provide floor markings to remind employees where physical distancing spaces are in their work areas.
  - Duplicate or break up common gathering areas like coffee brewing and take out materials stations to give employees space to work in areas alone.
- Front of the house
  - Strive to move to cashless operations, including tips.
  - Consider reducing the number of customers that can enter the restaurant at any one time so they will not gather and encroach into employee space.
  - Consider designating exits and entrances to be one-way to reduce accidental exposure.
  - Eliminate touch points where possible by propping doors open without compromising security and safety.
• Discontinue product sampling.
• Close buffets and topping bars.
• Ask guests to stay outdoors or in their vehicles (observing physical distance) while waiting for their table or carryout order. Text them when their order/table is ready.
• Create one-way routing for counter lines and other routes.
• Consider adding handwashing and sanitizing stations for guest use and to help reduce restroom congestion.
• Use tables to extend physical distancing in front of host stations or to control traffic routes.
• Remove tables in the dining room when possible to provide physical distancing. If tables cannot be relocated, use different colored tablecloths on the tables that will not be in use. Only place chairs at tables that are intended for use.
• Consider limiting the number of guests at each table to six or less.
• Evaluate areas where customers gather, breaking them up when possible. Customer areas may include soda machines, condiment stations and trash areas.
• Use menu boards or disposable menus that are discarded after each use. Make sure online menus are updated so customers can use their phones to look at the menu.
• Consider providing single use condiments.
• Customers will want to be sure silverware that has been properly cleaned and remains clean after dishwashing. Consider packaging silverware to help increase customer confidence.
• Provide a customer posting on sanitation procedures to reassure customers about their safety and health.
• Procedures and timeframes for glove use should be understood by employees and shared with interested customers. Gloves can be easily contaminated and customers will be wondering how long they have been worn or if they have been contaminated. Handwashing will get the same customer scrutiny.
• Cleaning of tables will be a focus for customers. They want to be sure the table has been cleaned with a chemical that kills COVID-19 just before they are seated. Customers may be suspicious of cloths in sanitizer buckets, even though they have been the norm previously. Single use sanitizing cloths may be preferred, if acceptable to the Health Department and used as directed by the supplier.
• Designate specific employees to clean frequently touched areas and general surfaces during open hours. Customers will gain confidence from seeing cleaning happening throughout the day.
• Clean and stock restrooms more often – customer handwashing will become a more frequent occurrence.
• Remove all materials from tables that would be used by multiple customers through the day, including salt and pepper shakers, fliers, coffee creamer, etc.
• When serving tables, work to limit close tableside interaction. Place plates at the edge of the table and ask the diners on the end of the table to pass them across the table to other diners, minimizing servers reach across diners.
• Kindly tell customers you will wait to clear dishes and clean off tables until after customers leave the table to limit close interaction.

• Meetings
  • Use video conferencing as much as possible, even if employees are in the same location.
  • If in person meetings must be conducted, hold them in open spaces like dining rooms where employees can spread out and keep physical distancing.
• Visual guidance:
  o Develop and place signage to remind employees of the physical distancing and handwashing expectations.
  o Post signage to guide traffic in waiting areas and outside restaurants. Post signs at entrances asking customers not to enter the restaurant if they are ill.
  o Where employees and guests stand in lines (i.e. bar drink pick up areas) create markers on the floor or wall to designate distances.
  o Provide signs to direct customers on one way traffic, restroom capacity and physical distancing.
• Signaling: develop and train a system of hand gestures to convey information, for example; thumbs up for good job, a wave instead of handshake, fingers used to indicate number, etc.
• Conflict resolution – this is a stressful time and some customers may become confrontational with employees or each other. Review current confrontation de-escalation techniques, especially in restaurants that serve alcohol.
• Information sharing: use telephones, online conferencing, e-mail or instant messaging to conduct business and share information, even when in the same restaurant. Remember to clean photos after each use.
• Breaks
  o Remind employees to practice physical distancing when on breaks.
  o Stagger breaks when possible.
  o Ensure areas where breaks are taken are sanitized between sittings.
  o Reinforce handwashing for all employees post-break.
• Deliveries/collections
  o Establish a shipping/receiving drop point and limit access.
  o Require delivery drivers to call in before arrival so employees can clear out of the delivery area.
  o Provide gloves for employees that unpack and put away orders to minimize exposure.
• Hands free
  o Use only knuckles/elbows to touch light switches, push open doors, etc. Sanitize after contact with commonly touched items. Ensure surfaces are sanitized regularly.
  o Discontinue the practice of handshaking, replacing them with a wave or other gesture.
  o Prop open doors that can be kept open to limit people from touching handles.
  o Place garbage receptacles and hand drying products at the exit doors so that doors may be opened without touching the handles.
  o Remind employees not to use personal electronics or phones outside of break areas.
• Contractors, service partners and office staff
  o Limit visits to essential services only, including limiting office visitors unless business critical.
  o Establish contractor and service partner policies and communicate your requirements in advance of their arrival.
  o Consider allowing deliveries over a wider timeframe to prevent overcrowding.
  o Require contractor and service partners wear PPE in accordance with restaurant requirements.
  o Move to contactless signatures and invoice approval.
  o Contractors and service provides should go through pre-screening before entering the restaurant.
5. Workplace Sanitization

Many restaurants have continued operations via carryout and delivery, maintaining sanitation as part of daily operations. Restaurants should review their pandemic sanitation plans and add procedures needed to re-open the restaurant. At a minimum, in-restaurant dining will increase environmental cleaning and disinfection needed, particularly the regular disinfection of common touch points.

When to Clean and Disinfect

- Perform routine environmental cleaning and disinfection:
  - Routinely clean and disinfect all frequently touched surfaces, such as workstations, touch screens, keyboards, handrails, and doorknobs, tables, light switches, countertops, handles, phones, toilets, faucets, sinks, etc.
  - Provide anti-viral wipe stations in work areas and encourage staff to clean their workstation and equipment.
- Perform deep-cleaning when any person is identified as being COVID-19 positive by testing or where this is expected
  - Close off areas used by confirmed or suspected COVID-19 persons.
  - Wait 24 hours, if possible, and then deep clean the space.

How to Disinfect

- Ventilate areas before you clean if possible, leave windows and doors open during cleaning.
- If surfaces are dirty, clean them using a detergent or soap and water prior to disinfection.
- For disinfection, most common EPA-registered household disinfectants should be effective. Follow the manufacturer's instructions for all cleaning and disinfection products (e.g., concentration, application method and contact time, etc.).
- Deep cleaning can be done by a specifically trained internal response team or by contract personnel.
  - EPA registered products are used per label requirements.
  - Specialized equipment including foggers and electrostatic spraying.
- Provide ample stations offering anti-viral hand lotions and disinfectant wipes near common work areas.
- Encourage frequent and thorough hand washing.

Safety Guidelines during Cleaning and Disinfection

- Wear protective clothing and equipment as recommended on the chemical Safety Data Sheet (SDS).
- Store chemicals in labeled, closed containers. Keep them in a secure area and in a manner that prevents tipping or spilling.
- Train employees of cleaning protocols and response, particularly if there are changes made to the chemicals used.
- Provide immediate notification to employees upon discovery of possible exposure and response.
6. COVID-19 Exposure and Return to Work

As with other businesses, restaurants should have a policy on how employees will be returning to work after exposure to or after having been infected with COVID-19.

Restaurants operating carryout and delivery during the pandemic have likely already put return to work policies in place. These policies may change as restaurant dining rooms open and additional servers may be needed. This will potentially create challenges with staffing levels that were not an issue with carryout only operations.

In the past, some in the restaurant industry has had policies and procedures that could make employees feel they must to come to work when exposed to illness or when sick themselves. Many companies have instituted relaxed guidelines on sick leave to limit exposure. Restaurants should continue to consider sick and leave policies used during the pandemic.

- Ensure that sick leave policies are flexible and consistent with public health guidance.
- Communicate policies clearly to employees, preferably in their native language. Ask questions to verify they understand the policy.
- Consider flexible policies that permit employees to stay home to care for a sick family member.
- Change policies that penalize employees for being out ill, such as a missing shifts penalty or not having a doctor’s note for an absence.

Refer to the CDC website for additional information on returning employees to work after being exposed or sick with COVID-19.
7. Hazard Review

COVID-19 is changing the way we work and how guests enjoy the restaurant. It is essential that if changes are introduced into restaurant operations, they are evaluated to see if there are new safety issues introduced. New controls may need to be put in place to keep the environment safe.

1. Review operational changes to existing activities and/or new activities introduced to address COVID-19. Examples may include wearing of additional PPE or introduction of new sanitizing equipment.

2. Using a risk matrix: determine the significance of the hazard based on the probability of the hazard occurring and the severity of its impact.

<table>
<thead>
<tr>
<th>Severity</th>
<th>Frequency</th>
</tr>
</thead>
<tbody>
<tr>
<td>Slight (First Aid)</td>
<td>Highly Unlikely</td>
</tr>
<tr>
<td></td>
<td>Never heard of in industry</td>
</tr>
<tr>
<td></td>
<td>Unlikely</td>
</tr>
<tr>
<td></td>
<td>Heard of in industry</td>
</tr>
<tr>
<td>Minor (Recordable)</td>
<td>Possible</td>
</tr>
<tr>
<td></td>
<td>Occurred &lt; 1 X per year in the industry</td>
</tr>
<tr>
<td>Significant (Lost Time)</td>
<td>Likely</td>
</tr>
<tr>
<td></td>
<td>Occurred &lt; 1 X per year in the company</td>
</tr>
<tr>
<td>Severe (Permanent Disability)</td>
<td>Likely</td>
</tr>
<tr>
<td></td>
<td>Occurred &gt; 1 X per year in the company</td>
</tr>
<tr>
<td>Catastrophic (Fatality)</td>
<td>Very Likely</td>
</tr>
</tbody>
</table>

Figure 1: Sample Risk Matrix

3. Using the risk matrix, determine control activities that reduce the risk to an acceptable level (the green and yellow segments). If a hazard remains in the red segment, work should cease until a more effective control is in place. Note the process is intended to eliminate the hazard. If this is not possible, the intent is to reduce the severity of the consequence and/or reduce the probability/frequency of the occurrence. Control activities may include:

   a. The elimination of the hazard. The administration of a COVID-19 vaccine would meet this control level.
   b. The substitution of a cleaning agent with another less hazardous chemical.
   c. An engineering control such as an equipment guards or blinds/plastic shield installed at an order station.
   d. An administrative control such as a policy, procedure or work requirements that when followed reduces the chances of an incident occurring. A pre-work temperature screening instruction is an example of this type of control.
   e. Changing behavior through the provision of training and awareness programs, so that an employee is capable of safety taking a temperature.
   f. Providing PPE. Note: PPE is the least effective level of control.
4. Implement the controls and address any shortcomings in the implementation. At a later date, it is important to review the effectiveness of the controls and make any additional changes to ensure that the controls effectively manage the hazard.
8. Hazardous Chemical Control

Restaurants may have changed cleaning chemicals to address Coronavirus. When new chemicals are introduced, it is essential that hazards are identified and communicated to employees who may be exposed. Regulatory requirements must be met as well.

Control activities to address this hazard include:

- An SDS is obtained for each new chemical and available to employees.
- New chemicals are added to the chemical inventory list.
- Any hazards for the chemicals are identified and mitigation measures developed to prevent employee exposure and injury, such as storage, handling and appropriate PPE.
- Containers are correctly labeled.
- Employees are trained so they understand the specific precaution measures that must be taken when working with the new chemical.
- Any new tasks or additional PPE, related to the chemical, are added to the hazard assessment.
9. Equipment Control

Most restaurants will not be adding equipment as part of the re-opening process. If new equipment, like a piece of sanitizing equipment, is added in response to COVID-19, then it should be evaluated for safety impact on the employee environment, considering the points below.

- Ergonomic Assessment. Perform an ergonomic assessment of equipment currently installed or in use to identify injury opportunities.

- Pre-start-up Safety Review. The initial start-up of equipment that has sat idle can present inherent dangers if not shutdown/secured or started properly. Review current process and identify any recommended enhancements.

- Mechanical Integrity/Maintenance Protocols. Review existing program/written procedures including items such as inspections and tests, referring to manufacturer recommendations. Assist in establishing policies or integration of elements into existing process.

- Guarding. Review status of equipment guarding, adding new information to current written policies where needed.

- Lockout/Tagout. Review the need for lockout/tagout control on new equipment. Establish documentation and train new policies in existing process.

- Noise. Perform noise-sampling assessment of equipment as well as identify exposure to employees. Review or assist in creation of a Hearing Conservation Program (HCP). If needed, provide recommendations to reduce noise levels below regulatory requirements.

- HVAC/Indoor Air Quality (IAQ). Coordinate review of existing settings/maintenance of equipment, identify post COVID 19 recommended changes and additional enhancements to equipment. Professional industrial hygiene testing may be needed.

- Training. Assess current training process and documents. Review from initial onboarding to recurrence, perceived effectiveness and documentation. Update documentation as appropriate.

- Regulations/Standards. Identify additional known or potential regulatory issues concerning safety aspects of equipment in use or proposed.
10. Ergonomic Controls

As restaurants rearrange tasks to create physical distance, ergonomic issues can arise, particularly in kitchens. Restaurant companies also have office and support staff working from their homes. When working from home, this same attention to the work environment is also advised, as home working is something that employees typically do not do or only do from time to time. Given current response to the pandemic, it is likely that many employees will work from home for an extended period. Industry best practices on ergonomics recommend that companies evaluate hazards related to all work environments to prevent potential injuries.

Whatever the work environment, organizations need to determine if their COVID-19 response has introduced new ergonomic hazards into the work environment. To do this, restaurant leaders should review changes to work practices using an ergonomic hazard approach.

An examination should include whether the changed work practice requires the employee to:

- Reach down below 22 inches
- Reach up above 54 inches
- Reach out
- Bend and twist
- Carry a heavy load
- Repeat an action multiple times
- Increase duration or intensity of any task he/she was doing before

If the answer to any of the above is yes, there is potential for an ergonomic issue.
11. Emergency Procedures

COVID-19 has brought many changes to the way we work in restaurant operations. It is essential from a life safety and business continuity aspect that any procedural and physical changes are compliant, tested and sustainable.

Updating your emergency plan may include these items:

- Review - examine the existing Emergency Action Plan (EAP) and note any currently implemented or planned changes required as a component of the COVID-19 response.
- Test - perform a tabletop review of the EAP inclusive of the COVID-19 updates. Identify gaps and opportunities for improvement concerning potential emergencies, notification, evacuation procedures, drills, employee responsibilities, checklists, training, documentation and other aspects of the EAP.
- Assess - if feasible, conduct a physical assessment of the restaurants. In the light of the review and test activities, identify any non-compliance or enhancements to items identified such as ingress/egress load, signage, emergency equipment and employee engagement.
- Improve - make changes to the EAP based on the finding of the prior three steps, specifically resolving any potential areas of contradiction or that are unclear/subject to misinterpretation.
- Enhance - schedule an additional tabletop exercises to test readiness of plans and correct any deficiencies.
- Review and debrief - after every use of the EAP, conduct an after action review with the EAP team to further develop strengths and weaknesses.
12. Response Communications and Engagement

It is likely that restaurants have been addressing communications and engagement challenges as the pandemic has evolved. Engagement is key to effectively implementing and sustaining the COVID-19 response. To that end, a comprehensive COVID-19 Communications and Engagement (C&E) Plan is essential to encourage effective commitment from all impacted by the changes.

The following list provides a series of steps to implement a C&E Plan:

- **Set the direction** - the Pandemic Support Team (PST) should agree on the goals of the plan. These goals will likely include raising employee awareness of the restaurants’ COVID-19 response, explaining requirements for employees, guests and others, advising training plans as well as providing an avenue for employees to provide feedback and ask questions.

- **Identify and segment stakeholders** - in this instance the stakeholder groups includes anyone interfacing with the restaurant and required to behave differently given the response to COVID-19. The PST (or their delegate/s known as the C&E team) should segment the stakeholders into groups, determine how each group interfaces with the COVID-19 response, the expected outcome for each group and then what information each group requires.

- **Planning** - the C&E team should then build a plan based on the goals identified during the previous activity. Communications may consist of signs, postings, emails, shift start talks, etc. Frequency should also be determined.

- **Implementation** - the communications should be designed, tested and then issued.

- **Assessment** - the C&E team should also determine the effectiveness of the communications. Data points may be collected through observation, findings from the COVID-19 Response Audit and Management Review activities, the number of COVID-19 positive tests, etc. As this is a fast moving issue, guidance from regulators and other advisory agencies may change daily or weekly. The C&E team should meet regularly, be nimble and prepared to promptly make changes to the plan to reflect this guidance.
13. Response Training and Development

Changes needed to respond to the pandemic in the short and long-term are immense and ever evolving. These changes require additional safety training beyond what restaurants are already doing. An outline of restaurant training information is included in this section.

The more employees know about the COVID-19, the more cooperative and passionate they will be protecting themselves, their family and restaurant customers. Restaurant operations have changed drastically and business may not resume to normal or predictable patterns. Everything restaurants do to minimize exposure and infection must be communicated.

Every role in the restaurant has changed. This requires additional training to ensure that the restaurant is as safe as it can be.

- **General Information**
  - General information about the COVID-19 virus.
  - Explanation on how COVID-19 virus spreads.
  - Health and hygiene etiquette, including covering coughs and sneezes.
  - Symptoms of COVID-19.
  - What to do if you feel sick while at work or at home.
  - Information on PPE.
  - The importance of frequent and thorough hand washing.
  - Direction for workers to stay home if they are sick.
  - Social distancing guidelines.
  - Communication of any changes in the employee benefit package, such as increase in the number of days for paid sick leave.
  - Guidance to stop or limit sharing of work tools and equipment (pens, tools, etc.) when possible.
  - Guidance on influencing guest behavior such as travel paths, physical distancing, etc.

- **Specific information**
  - Restaurants will likely need to update their training programs to address OSHA standards and directives. These include:
    - Bloodborne Pathogens standard (29 CFR 1910.1030) which provides protection of workers from exposures to blood and body fluids that may contain infectious agents. This standard is applicable to restaurants providing first aid to employees.
    - Personal Protective Equipment standard (29 CFR 1910.132) requires employers to ensure that personal protective equipment be “provided, used, and maintained in a sanitary and reliable condition whenever it is necessary to prevent injury or illness. PPE used to protect against COVID-19 is included in this standard.
    - Respiratory Protection standard (29 CFR 1910.134) which provides protection for workers when exposed to contact, droplet and airborne transmissible infectious agents.
The respiratory protection standard applies to the use of standard and surgical N95, N98, N99, and N100 respirators, but not to ordinary dust or surgical masks.

If restaurants issue a facemask other than a respirator to employees or allow employees to bring in their own masks, they should also advise how to minimize the chance of contaminating the mask when putting it on, removing it and storing it. Mask sanitation should also be addressed. Employees not used to wearing face covering may be tempted to adjust masks or touch their face/nose/eyes more frequently. This adjusting can cause contamination.

Restaurants should develop cleaning and sanitizing guidelines for common touch points for restaurant opening.

If new tasks are created, additional OSHA training requirements may apply. Additional training topics for cleaning and sanitation could include:
- Hazard Communication (29 CFR 1910.1200) - requires employee training about the hazards of cleaning materials such as disinfectants and how they can protect themselves and where to find copies of applicable chemical SDS.
- Eye and Face Protection (29 CFR 1910.133) - splashes to the face and eyes may be possible during disinfection tasks.
14. Response Incident Review and Learning from Incidents

Continuous improvement underpins best practice and draws deeply on understanding why a safety incident occurred in order to avoid it from happening again. This section provides some simple tips to guide an incident review so that any breakdown or failure in the COVID-19 response or its outcomes can be understood and corrective action taken. This insight from one restaurant can be used as the basis of learning and shared widely across the restaurant system.

Process and Deliverables: after an incident, like person-to-person transmission of COVID-19, an incident review should be conducted to determine if a control was insufficient to prevent a hazard. At its simplest, the review should consist of the following components:

- **Record the incident:** the purpose of this step is to capture the facts. This can be done by determining: where the incident occurred, when it occurred, who was present, what they were doing and what was happening in the environment. This information can be captured by interviewing the parties concerned, reviewing images/video, examining documentary records etc. Best practice requires that this activity be documented. A simple form, or a Word document, will suffice.

- **Determine a root cause or causes:** while it is beyond the scope of this document to describe a sophisticated root cause analysis, the use of the five whys should provide significant insight into the root cause of the incident and lead to the implementation of a new or improved control. To use the five whys, ask why did the incident happen? Based on the response, again ask why did the response happen? Proceed until you cannot move onto a subsequent response. Once you get to this stage, you are likely to have found the root cause.

- **Resolve the root cause:** based on your five whys analysis, agree an improvement plan to create or extend an existing control. This may take the form of new cleaning chemical, better training in the use of a thermometer or improved documentation. In any case, once agreed, you need to implement the change. The use of the management of change process from your safety management system is appropriate. This way you will be confident that the solution will be properly implemented with all interested parties aware and trained on the new process or plan.

- **Share the learning:** after every incident review, you should share the key insights from the review (situation, cause, solution) with your employees. Given the widespread challenges presented by the Coronavirus pandemic, providing information including the proactive response by the PST should assuage concern and reduce anxiety among employees.

- **Assure:** the final step of this approach is to assure the change. Leaders throughout the restaurant should be confident of the controls. One way of remaining confident is to check the control through observation. Another option is to speak with employees who work closely in the area where the control exists to check their understanding of the control and to probe their level of confidence. Should something appear remiss, the leader should act promptly so that another incident does not occur.

Note: the intent of incident review and learning from incidents is not to allocate blame but to see the incident as a learning opportunity and prevent it from happening again.
15. Response Effectiveness Assessment

This section describes the COVID-19 Response Effectiveness Assessment which comprises of two key activities: an audit of COVID-19 activities and a management review of the COVID-19 response. The impact of changes to operations must be assessed for effectiveness. To this end, a review of the COVID-19 review interventions is essential to identify gaps and improvement opportunities that may require changes to the response.

The COVID-19 Audit assesses whether the response activities such as employee screenings are being completed as defined. The COVID-19 Management Review builds on any audit findings to determine whether activities need to be modified or updated. Steps to complete the Effectiveness Assessment include:

- Development of a COVID-19 audit checklist by the Technical Advisor. This audit should include all control activities categorized by component activities. Where Job Safety Analyses (JSA) (JHA) have been developed, the component activities may be obtained from these analyses and incorporated in the audit. Alternatively, the Technical Advisor should review any and all instructional documents to develop this checklist.
- Using the audit checklist, the Technical Advisor should observe the implementation of COVID-19 control activities such as the use of PPE, physical distancing, chemical storage and use, etc. and determine whether the tasks are being conducted as defined.
- It is very important that the Auditor thank and compliment staff for completing their COVID-19 control activities in compliance with the instructions as positive reinforcement is a powerful motivator. Where non-compliance is observed, the Auditor can use this as an opportunity to provide feedback and to make this a “what could be better” moment. Implementing this guidance will encourage the adoption and maintenance of the desired behaviors.
- After completing the audit, the Auditor should review and summarize the results and identify opportunities for improvement with the staff.
- The Technical Advisor should report the findings to leadership and discuss opportunities for improvement. At this time, the PRT can determine next steps. This may include a Management Review, the seeking of additional information and then a subsequent change to COVID-19 control activities.
- As a final assessment related activity, the Technical Advisor, in association with restaurant management, should provide feedback to the staff on the findings of the assessment as well as next steps. This is an essential step.

Note: given the rapidly developing nature of this community health emergency, nimbleness will be required. Given these circumstances, the PST should conduct either a formal or an informal audit as soon as appropriate to check implementation, correct problems and continue to improve the response.
16. Safety Culture

We are currently responding to a public health emergency unprecedented in our lifetimes. Given the widespread impact of COVID-19 on virtually all aspects of life, everyone is experiencing anxiety and stress in varying degrees. In addition, restaurants are going through significant changes to operations, staff roles and team structures. This means that there may be an increase in the frequency and severity of safety due to distraction. To help avoid this, organizations should focus on developing and maintaining an effective safety culture.

Developing an organizational culture in which safety permeates all activities is a multi-year undertaking. However, even in the current challenging environment, restaurants can take active measures to enhance their safety culture, while simultaneously building a supportive environment for employees and customers. One benefit of this approach may be the reduction of the potential for distraction.

Restaurants should consider including the following points:

- Leveraging this Playbook: implementing the suggestions contained in this Playbook, particularly communications and engagement, training and development and learning from incidents will demonstrate the organization is pro-actively reducing the potential for COVID-19 transmission in the workplace.
- Emphasizing behavioral safety initiatives: encourage Supervisors to increase the frequency of behavioral safety interventions such as safety walks, shift start conversations and sharing learning from incidents. In addition, Supervisors should praise desired safe behaviors four times more frequently than correcting errors. This does not devalue the important role of the Supervisor in stopping unsafe work, which remains a key leadership responsibility. However, focusing on desired behaviors is more effective and builds trust. Other behavioral safety tools such as the ABC approach (antecedent, behavior, consequence) can also be leveraged by Supervisors to encourage desired behaviors such as the correct wearing of PPE.
- Improving access to employee assistance programs: organizations should enhance their leave policies so that employees do not come to work while ill. Supervisors should ensure that employees do not feel pressured to attend work when sick, as this is a key vector of infection. Changes to policy should be integrated with existing employee assistance and wellness programs so that employees have a wide range of support programs to draw on should COVID-19 related issues (either in-work or outside of work) impact their ability to focus and attend to the work at hand. In a restaurant, like other workplaces, inattention and distraction may lead to workplace safety incidents.
17. Management Systems Integration

This section discusses how management system integration aligns the COVID-19 response with a restaurant’s existing management system. Given the expected continuation of COVID-19 transmission and response until the development of a vaccine and/or the development of community immunity, changes to operating practices need to be included within the pre-existing safety management system. This additional risk management step is intended to assure that no COVID-19 related controls impinge on existing control procedures and inadvertently introduce additional risk into an organization’s operations.

The Safety Director (or other accountable executive) should be tasked with integrating changes to operations into the current management system. The ISO 45001 aligned Marsh Safety Management System (M-SMS) framework is used as an example of how to align the COVID-19 response with a management system.

Relevant questions include:

- **Scope**
  - Has the scope of the management system been extended?
  - Are there additional stakeholders and what are their specific expectations?
  - Are there additional regulatory considerations and how will they be addressed?

- **Lead**
  - Does the safety policy need to be modified to accommodate the changed environment?
  - Who is accountable for the COVID-19 response?
  - Are roles and responsibilities clearly defined?
Is there a role for employees to participate in the development and implementation of the management system, particularly in the roll out of the COVID-19 response?

- **Plan**
  - Is the risk matrix up to date?
  - Are newly identified COVID-19 hazards effectively controlled? Do these controls have any unintended or unexpected impact on other hazard control measures?
  - Does the Annual Safety Plan need modification?

- **Support**
  - How does the COVID-19 response impact resources earmarked for other preplanned safety improvement activities?
  - Will the COVID-19 response interfere with safety training and competency maintenance and development?
  - How effectively have COVID-19 policies and procedures been incorporated into the existing document management process?
  - Are COVID-19 instructions, policies and procedures easy for staff to access?

- **Operate**
  - Are operating procedures up to date and inclusive of changes required as part of the COVID-19 response?
  - If contractors are used, are they effectively integrated into operations? Is there an updated Contractor Safety Management program in place?
  - Was the Management of Change process followed when implementing operation changes associated with the COVID-19 response?

- **Measure**
  - How is the COVID-19 Response Effectiveness assessment (audit and management review) integrated with safety management system monitoring and measurement activities?
  - Are COVID-19 response activities included in safety performance benchmarks and reported on the safety performance dashboard or in another method?

- **Improve**
  - Should a COVID-19 related incident occur in the restaurant, was an incident investigation process applied? If so, were any lessons learned shared across the restaurants?
  - How are lessons learning integrated into the safety management system continuous improvement process?
18. COVID-19 OSHA Recording Requirements

This section clarifies the latest guidance from OSHA on the recordability of COVID-19 cases (note: this section only addresses recordability and does not address the compensability of an incident). Restaurants are partially exempt from OSHA recordkeeping, with the exception of those restaurants that are located in the state of Minnesota. However, individual restaurants may need to participate in the annual survey if requested by OSHA.

OSHA issued a news release late on April 10, 2020 in which the agency changed their guidance for recording occupational COVID-19 cases in accordance with 1904 (OSHA Recordkeeping) rules. In summary:

- In most circumstances, only employers in the health-care industry, emergency response organizations such as police and fire departments, and correctional institutions will have to make a COVID-19 recordability (work-relatedness) determination.
- Employers in other industries will not have to make a COVID-19 recordability (work-relatedness) determination unless there’s “objective evidence that a COVID-19 case may be work-related” and “the evidence was reasonably available to the employer.” The guidance said objective evidence could include “a number of cases developing among workers who work closely together without an alternative explanation.”
- According to the enforcement memo, this policy change will “help employers focus their response efforts on implementing good hygiene practices in their workplaces and otherwise mitigating COVID-19’s effects.”
COVID-19 Screening Checklist

The screening checklist identifies key components of the pandemic response, which can be used to evaluate a restaurant’s readiness to address and control COVID-19 hazards. Based on their responses, gaps can be identified and an improvement process initiated.

To utilize the screening checklist, senior leadership should:
1. Review each item and score it as Yes or No.
2. After answering each question, list out all items that were scored as No.
3. Review each of these listed items and prioritize them into High, Medium or Low priority.
4. Develop a plan to address the highest priorities.
5. Implement the plan.
6. As deliverables are being achieved, review the priority list and select subsequent items to address.
7. As gaps continue to close, consider other items for completion. As necessary, add activities to enhance and improve the COVID-19 response.

<table>
<thead>
<tr>
<th>Item</th>
<th>Y/N</th>
<th>Section Reference</th>
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<tbody>
<tr>
<td>Do you have a coordinating body to manage your response to COVID-19?</td>
<td></td>
<td>Section 1</td>
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<td>Do you have a COVID-19 screening procedure in place?</td>
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<td>Section 2</td>
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<td>Do you conduct pre-work temperature checks?</td>
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<td>Section 2</td>
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<td>When an employee reports feeling unwell is there a dedicated location to isolate the employee?</td>
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<td>Section 3</td>
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<tr>
<td>Do you have a referral and transportation plan for employees presenting with COVID-19 type symptoms?</td>
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<td>Section 3</td>
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<tr>
<td>Do you have a plan to minimize contact between workers?</td>
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<tr>
<td>Do you have a general sanitization plan?</td>
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<td>Section 5</td>
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<tr>
<td>Do you have a sanitization plan for location/s for where an infected/suspected employee was working?</td>
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<tr>
<td>Do you have a plan to return an employee to work after a COVID-19 illness?</td>
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<td>Section 6</td>
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<td>Where you made physical changes to the work environment to respond to COVID-19, have you conducted a hazard review?</td>
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<td>Section 7</td>
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<td>In response to COVID-19, are there new chemicals on site or are there larger volumes of previously stored chemicals?</td>
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<td>Section 8</td>
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<td>Is there new equipment being deployed in response to COVID-19?</td>
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<td>Section 9</td>
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<tr>
<td>Where you made operational changes to respond to COVID-19, have you conducted a hazard review?</td>
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<td>Section 9</td>
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<tr>
<td>Have you introduced ergonomics hazards through the implementation of new equipment and/or procedures?</td>
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<td>Section 10</td>
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<tr>
<td>Do employees understand how to safety implement working from home?</td>
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<td>Are crisis management/emergency procedures in-place?</td>
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<td>Section 11</td>
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<tr>
<td>Have you updated the emergency communication plan?</td>
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<td>Are employees familiar with the organization’s COVID-19 response activities?</td>
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<td>Section 12</td>
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<tr>
<td>Do you have an updated training program that makes employees aware of changes to operational requirements due to COVID-19?</td>
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<td>Section 13</td>
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<td>Question</td>
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<tr>
<td>When making COVID-19 related changes, did you use your Management of</td>
<td>Section 14</td>
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<td>Change process to implement the changes?</td>
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<tr>
<td>Have you audited the effectiveness of new controls put in place to</td>
<td>Section 15</td>
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<td>address COVID-19 issues?</td>
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<td>Are employees making safety mistakes with the additional workload?</td>
<td>Section 16</td>
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<tr>
<td>Has the organization developed support services and programs for</td>
<td>Section 16</td>
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<td>employees affected by the pandemic, including financial support,</td>
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<td>emotional, and physical support?</td>
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<td>Have you integrated the COVID-19 response activities within your safety</td>
<td>Section 17</td>
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<td>management system?</td>
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