



Managing the Office in the Age of COVID-19

Effective September 13, 2021



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Summary

The guidance contained in this revised document is effective September 13, 2021. A [Definitions](#) section has been added.

To reduce the risk of COVID-19 transmission, the most important action any New Yorker can take is vaccination. Vaccination is free and convenient across the five boroughs and in bordering counties. Convenient sites can be found via <https://www.nyc.gov/vaccinefinder> or by calling 877-VAX-4-NYC.

The document is divided into four sections.

1. [Prepare the Building](#): provides guidance on risk mitigation strategies related to building infrastructure and public areas in buildings managed by City agencies.
2. [Prepare the Workspace](#): provides guidance on risk mitigation strategies related to an agency's physical workspaces, including workplace best practices, physical distancing, occupancy planning, and cleaning.
3. [Prepare the Workforce](#): provides guidance on risk mitigation strategies related to the City's workforce, including alternative work schedules; face coverings and health screening requirements; personal hygiene best practices; testing and vaccination recommendations and resources. It also includes COVID-specific personnel policies, accessibility considerations, and employee support resources.
4. [Communication](#): provides guidance on establishing and maintaining centralized, two-way, multi-channel communications with the staff and the public.

This guidance was prepared by the Department of Citywide Administrative Services (DCAS) in partnership with the Mayor's Office, the NYC Health Department, New York City Office of Labor Relations (OLR), and the New York City Law Department. Recommendations are advisory and should be used for planning purposes only; agencies are encouraged to make their own decisions based on their unique workspaces and workforces. Please be advised that the information contained herein represents current guidance as of the date of release, and agencies should reference the primary resources included throughout this document when establishing their policies and protocols.

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DEFINITIONS

Covered employees: “Covered Employees” are persons (i) employed by a contractor or subcontractor holding a contract with the City; (ii) whose salary is paid in whole or in part from funds provided under a City contract; and (iii) who perform any part of the work under the contract within the City of New York; and (iv) whose work under the contract includes physical interaction with City employees or members of the public.

Visitors: “Visitors” are prescheduled or expected guests who the agency anticipates will have a prolonged visit and will interact closely with agency employees (e.g., a court reporter coming for a deposition), but who are not seeking services from the agency. Visitors also include, but are not limited to, maintenance workers, consultants, and individuals coming from other entities for conferences and meetings.

Clients: “Clients” are members of the public who are seeking services from City agencies as walk-ins or by appointment.

Infection Period: For symptomatic employees, the infectious period starts 2 days before symptom onset and ends 10 days after symptom onset. For asymptomatic employees, the infectious period starts 2 days before collection of the test specimen (2 days before the employee was tested) and ends 10 days after the collection of the test specimen (10 days after the employee as tested).

Close Contact. A “Close Contact” is defined as someone who was within 6 feet of an infected person, for at least 10 minutes over a 24-hour period, starting from 2 days before illness onset (or, for asymptomatic person, 2 days prior to test specimen collection) and continuing 10 days after onset. See <https://www1.nyc.gov/assets/doh/downloads/pdf/covid/covid-19-understanding-quarantine-and-isolation.pdf>

Fully Vaccinated: An individual is considered fully vaccinated two or more weeks following receipt of second dose in a 2-dose series of a COVID-19 vaccine, or 2 or more weeks following receipt of one dose of a single-dose COVID-19 vaccine. A booster vaccine is not required to be considered fully vaccinated.

Proof of Vaccination: Proof must be either:

- An official CDC card or other government-issued record bearing the employee’s name and date(s) of vaccine administration, either viewed in person or via a photograph;
- An Excelsior Pass issued by the State of New York;
- The NYC COVID SAFE app that clearly displays an image of the CDC or other government issued card with the above noted requirements. The NYC COVID SAFE app can be downloaded for Apple or Android (or by searching “NYC COVID Safe” on Apple app store or Google Play store).

Note: It is possible that someone was vaccinated outside of the country with a non-FDA approved vaccine. Only vaccines authorized for emergency use by the World Health Organization are acceptable and they can submit their vaccine record from the place where it was administered.

PREPARE THE BUILDING

This section provides guidance on risk mitigation strategies related to building infrastructure and public areas in buildings. It is intended for agencies that manage buildings. Agencies in buildings either managed by another agency or a private landlord should work with their building management to address the measures described in this section.

BUILDING SYSTEMS

This section provides high-level guidance only. See the government and industry resources referenced within this section and the [Resources](#) section at the end of this document for more details.

Vacant Buildings

- Verify mechanical systems' operation and restore all sequences, setpoints, and schedules modified during the rollback of operations.
- Evaluate the building and its mechanical and life safety systems to determine if the building is ready for occupancy. Check for hazards associated with a prolonged facility shutdown such as mold growth, rodents or pests, or issues with stagnant water in building systems, and take appropriate remedial actions.
- For building heating, ventilation, and air conditioning (HVAC) systems that have been shut down or have been operated on a reduced schedule, review [Standard Practice for Inspection and Maintenance of Commercial Building](#) from the American Society of Heating, Refrigerating, and Air-Conditioning Engineers (ASHRAE).

HVAC Systems

Below is a list of ventilation interventions recommended by the [Centers for Disease Control & Prevention \(CDC\)](#) that can help reduce the concentration of virus particles in the air. They represent a list of “tools in the mitigation toolbox,” each of which can contribute towards a reduction in risk. The specific combination of tools chosen for use at any point in time can change. It is up to the building owner or operator to identify which tools are appropriate for each building throughout the year.

- Increase the introduction of outdoor air:
 - Open outdoor air dampers beyond minimum settings to reduce or eliminate HVAC air recirculation. In mild weather, this will not affect thermal comfort or humidity. However, this may be difficult to do in cold, hot, or humid weather, and may require consultation with an experienced HVAC professional.
 - Open windows and doors, when weather conditions allow, to increase outdoor air flow. Do not open windows and doors if doing so poses a safety or health risk (e.g., risk of falling, triggering asthma symptoms) to occupants in the building. Even a slightly open window can introduce beneficial outdoor air.
- Use fans to increase the effectiveness of open windows. To safely achieve this, fan placement is important and will vary based on room configuration. Avoid placing fans in a way that could potentially cause contaminated air to flow directly from one person to another. One helpful strategy is to use a window fan, placed safely and securely in a window, to exhaust room air to the outdoors. This will help draw fresh air into the room via other open windows and doors without generating strong room air currents.
- Ensure ventilation systems operate properly and provide acceptable indoor air quality for the current occupancy level for each space.

- Rebalance or adjust HVAC systems to increase total airflow to occupied spaces when possible.
- Turn off any demand-controlled ventilation (DCV) controls that reduce air supply based on occupancy or temperature during occupied hours. In homes and buildings where the HVAC fan operation can be controlled at the thermostat, set the fan to the “on” position instead of “auto,” which will operate the fan continuously, even when heating or air-conditioning is not required.
- Maintain maximized central air filtration:
 - Increase air filtration to as high as possible without significantly reducing design airflow. Increased filtration efficiency is especially helpful when enhanced outdoor air delivery options are limited.
 - Make sure air filters are properly sized and within their recommended service life.
 - Inspect filter housing and racks to ensure appropriate filter fit and minimize air that flows around, instead of through, the filter.
- Ensure restroom exhaust fans are functional and operating at full capacity when the building is occupied.
- Inspect and maintain local exhaust ventilation in areas such as kitchens, cooking areas, etc. Operate these systems any time these spaces are occupied. Consider operating these systems, even when the specific space is not occupied, to increase overall ventilation within the occupied building.
- Use portable high-efficiency particulate air (HEPA) fan/filtration systems to enhance air cleaning (especially in higher risk areas such as a nurse's office or areas frequently inhabited by people with a higher likelihood of having COVID-19 and/or an increased risk of getting COVID-19).
- Generate clean-to-less-clean air movement by evaluating and repositioning as necessary, the supply louvers, exhaust air grilles, and/or damper settings.
- Use ultraviolet germicidal irradiation (UVGI) as a supplement to help inactivate SARS-CoV-2 when options for increasing room ventilation and filtration are limited. Upper-room UVGI systems can be used to provide air cleaning within occupied spaces, and in-duct UVGI systems can help enhance air cleaning inside central ventilation systems.
- Run the HVAC system at maximum outside airflow for 2 hours before and after the building is occupied.

Water Systems

- Review and implement NYC Health Department’s [Guidance for Returning Building Water Systems to Service After Prolonged Shutdown](#).
- Work with water treatment service provider to ensure chemical levels are within defined ranges for cooling towers, closed water systems, water features, etc.
- Ensure drinking water systems are current with maintenance schedules.
- Post [reminders](#) for proper hand hygiene at water fountains and sinks.
- Consider replacing manually operated systems with motion-sensor drinking water systems.

Restrooms

- Ensure restrooms are supplied with soap at all times.
- Ensure restrooms are under negative pressure.

- Run toilet exhaust systems continuously during occupancy periods and a minimum of two hours before and after occupancy.

CLEANING

See the [Prepare the Workspace](#) section for more information on cleaning and personal hygiene within the workspace.

- Follow CDC's [Cleaning and Disinfecting Your Facility](#) to develop, follow, and maintain a cleaning plan. Use NYC Health Department's [Cleaning and Disinfection Log Template](#) to keep track of actions taken.
- Inventory cleaning supplies and check for compliance with the EPA's [List N: Disinfectants for Coronavirus \(COVID-19\)](#); procure supplies as needed.
- Establish protocols for cleaning after a suspected or confirmed case of COVID-19 following the [CDC's guidance](#). See also the [Remedial Cleaning](#) section of the [Managing COVID-19 Cases](#) for more details.
- For agencies that manage multi-tenant buildings (the "managing agency"), establish and communicate procedures for how a tenant should notify the managing agency after a tenant learns that an individual with a positive COVID-19 test result has been in the building.
- Install hand sanitizer in high traffic and public areas.
- Ensure cleaning equipment and tools are in working condition.
- Ensure that cleaning staff are trained on the proper use and limitations of personal protective equipment (PPE), personal hygiene protocols, mixing/applying and disposal of approved cleaning and disinfecting agents ([following OSHA Hazard Communication Standard](#)) and are appropriately supervised to promote ongoing quality control.
- Establish protocols for proper disposal of PPE used by building staff following government regulatory requirements.

ACCESS CONTROL AND CIRCULATION

Controlling access to the building is critical in minimizing the spread of COVID-19 and reassuring workers and visitors that actions are being taken to help protect them. The level of control will depend on both the nature of the business being conducted in the building, the building owner and the number of tenants in the building.

This section is intended for agencies that control the entrance to their buildings only. Agencies should refer to the [Prepare the Workforce](#) section for guidance related to health screenings and face coverings for the agency's employees, covered employees, visitors, and clients.

Face Coverings

- Establish a face covering protocol that:
 - Enforces the requirement that everyone able to medically tolerate a face covering wear a face covering that covers their mouth and nose at all times (except when eating or drinking) when entering the building or when in a shared indoor City workspace.¹
 - Includes a process for providing services to a client that is not medically able to tolerate a face covering.
 - Includes a process for providing a face covering to an individual entering the building who does not have a face covering.
 - For a sample protocol, see [DCAS Building Policies & Procedures During COVID-19](#).
- Procure a supply of face coverings to supply to individuals entering the building who do not have a face covering.
- Post requirements at the entrances of the building and throughout the building as appropriate.
- See DOHMH's [COVID-19 Face Coverings: Frequently Asked Questions](#) for more information.

Health Screenings

- Establish protocols and procedures for conducting building health screenings for employees, visitors, and clients. For a sample health screening protocol, see [DCAS Building Policies & Procedures During COVID-19](#).
 - Employees and visitors:
 - Follow the [NYC Agency Employee COVID-19 Screening Tool](#)² distributed by AgencyRestart.
 - If an Agency manages a building with tenants, coordinate with tenants on entry protocols for their employees and visitors. Keep a log confirming review of confirmatory questions of all employees and visitors screened for purposes of entering the building (i.e., the log should *only* include confirmation that (1) the health screen questionnaire was completed and (2) that the person was cleared to enter the building).
 - Clients:
 - The Mayoral Restart Taskforce leaves it to each agency's discretion to implement a responsible health screening policy for clients that accounts for its services and needs.
 - Agencies are strongly encouraged, however, to employ the most stringent health screening process feasible to equally protect the health and safety of their employees and all members of the public.
 - Agencies that elect to screen clients should follow the [NYC Agency COVID-19 Screening Tool for Clients](#) distributed by AgencyRestart.

¹ A shared indoor City workspace is a space in which an individual is physically present with at least one other individual and the individuals cannot be separated by a closed door.

² A link to the [NYC Agency Employee COVID-19 Screening Tool](#) and the [NYC Agency COVID-19 Screening Tool for Clients](#) is intentionally omitted as the screening tool is regularly updated. Agencies should consult with their General Counsel or Agency Chief Restart Officer (ACRO) for the latest version and guidance.

- Train screeners to ensure effective, non-discriminatory application of screening protocols; and on maintaining confidential information.
- At all entrances, post requirements for health screenings, as well as on agency websites where appropriate. Ensure all signage meets the Mayor's Office for People with Disabilities (MOPD) standards.
- Communicate all screening policies to tenants.
- Consider accessibility (review [Accessibility Considerations for a Return to the Office Plan](#)) when developing, communicating, and deploying policies and protocols.

Elevators & Stairs

- Require face coverings be worn by all individuals while in an elevator.
- Open stairways, additional access doors, and freight elevators for travel where possible.
- Post reminders or signage near elevators for the option of using open stairways.
- Encourage occupants to take stairs when possible, especially when elevator lobbies are crowded or only walking a few flights.
- Ensure regular cleaning schedule of all surfaces.
- Cover buttons with anti-microbial plastic to protect the electronic components from being damaged by cleaning supplies.
- Consider adding supplemental air ventilation or local air treatment devices in frequently used elevator cars if feasible.

PREPARE THE WORKSPACE

This section provides guidance on risk mitigation strategies related to an agency's physical workspaces, including workspace best practices, physical distancing, occupancy planning, and cleaning. applies to both city-owned and leased workspaces.

Workspaces

- Physical distancing is only required when interacting with the public, not in shared workspaces limited to employees and covered employees.

Reception Areas

- Install physical barriers (e.g., plexiglass or similar materials) at reception and security desks.
- Remove pens and paper sign-in and have receptionists log guests. If this is not feasible, require a visitor to use their own pen or request a single-use pen if needed; or set out separate holders for clean pens and used pens and sanitize the used pens before moving them back to the clean holder.
- Keep the hand sanitizer dispensers in plain view or if a dispenser is not located in a reception area, set out bottles of hand sanitizer.

Shared Spaces

- Provide hand sanitizer dispensers in public engagement areas.
- Limit the use of shared workstations to the extent practicable.
- Minimize touchpoints by removing coffee pots and similar shared equipment.

CLEANING

While cleaning predominately falls within the [Prepare the Building](#) section, some measures can be taken within the workspace to facilitate and augment cleaning. Also, see the [Managing COVID-19 Cases](#) section for guidance on cleaning after an individual receives a positive COVID-19 test result after having been in a DCAS managed building or exhibits COVID-19 symptoms.

- Refer to the CDC's [Cleaning and Disinfecting Your Facility](#) for detailed guidance, additional information, and recommendations.
- Routinely clean all frequently touched surfaces in the workspace, such as workstations, keyboards, telephones, handrails, printer/copiers, drinking fountains, and doorknobs.
- Clean and disinfect shared workstations before and after use.
- Make cleaning wipes and sanitizer accessible; post signage requiring employees to clean workspace surfaces and equipment before and after use.
- For agencies that manage buildings, review the tenants' occupancy plans to ensure building services meet the tenant agencies' needs.
- For agencies that are tenants, review building cleaning protocols and request changes to cleaning scope or additional services, if necessary.
- Make cleaning highly visible to assure employees that spaces are being cleaned.
- Institute a clean desk policy that requires employees to remove all items from their desks at the end of the day to facilitate regular cleaning of work surfaces.

- Where possible, consider installing contact-free motion sensor-controlled hand sanitizer dispensers.
- Place hand sanitizer in all areas with shared surfaces and equipment, in break rooms, conference rooms, elevator lobbies, and other high traffic and common areas where hand sanitizer dispensers have not been installed.
- Ensure bathroom cleaning and trash removal align with employee schedules.
- Keep all bathrooms well stocked with soap and paper towels.
- Increase frequency of cleaning appliances, such as refrigerators and microwaves.
- Remove shared items and equipment from common rooms.
- Use no-touch waste receptacles when possible.
- Disable touch screens on shared devices.

PREPARE THE WORKFORCE

This section provides guidance on employees' risk mitigation strategies, including alternative work schedules, face coverings, and health screenings requirements; personal hygiene best practices; and testing and vaccinations recommendations and resources. It also includes COVID-specific personnel and leave policies, accessibility considerations, and employee support resources.

SCHEDULING

Alternative work schedules (AWS) may continue to be considered based on the agency's specific needs and capabilities of the building and workspace.

AWS Considerations:

- Business needs and how service levels will be maintained.
- Logistics and how schedules will be coordinated amongst staff.
- Employee preferences.
- Employee productivity.
- Supervisory and management requirements.
- Fairness and equity.
- How effective communications will be maintained.
- Impact on overtime.

AWS Guidance

- Staff should document the alternative work schedule (see [Alternative Work Arrangement Form](#) for a sample template) to ensure the employee and their supervisor understand duties and scheduling.
- Ensure work schedules are consistent yet flexible, account for high travel periods and days, and building congestion.
- Align alternative work schedules with business needs.
- An employee's responsibilities should be evaluated before determining if an alternative work schedule is appropriate.
- Work that must be performed at specific times of the day may not be appropriate for an alternative work schedule.
- Ensure work schedules do not contravene negotiated collective bargaining agreements. Implementation of a new alternative work schedule for represented employees should be coordinated with the Office of Labor Relations.

- Flexible workdays:
 - Flexible workdays provide for a work schedule where employees have flexible days off (e.g., granting Mondays and Tuesdays off instead of the weekend) to handle responsibilities that may have changed since the beginning of the crisis. Most titles allow for work to be performed any day of the week.
 - Consider using flexible workdays to alleviate crowding in offices while allowing office space to be utilized, minimize congestion at entrance points, lobbies, and elevators, and assist families with childcare and dependent care needs.
- Flexible arrivals:
 - Flexible arrivals provide a wider window for staff to begin their workday (e.g., allowing for an arrival between 7 am and 10 am).
 - Consider using flexible arrival times to allow employees to commute to work at different times, resulting in less congestion on public transport, entrance points, lobbies, and elevators.
 - If a flexible arrival is not appropriate, consider allowing at least a 30-minute flexible band to allow employees to pass through COVID-19 related entry procedures such as health screening assessments and allow the additional time needed for commuting on public transit systems.
 - Agencies are encouraged to allow managers to use discretion in adjusting employees' reporting times in CityTime to account for delays or lines while entering a building.

TIME AND LEAVE

The City has set forth the following policies that are applicable during the outbreak of COVID-19.

- Leave policy: [Updated Guidance for City Agencies on Leave Policy Applicable During the Outbreak of Coronavirus Disease 2019 \(COVID-19\)](#).
- Time off and rewarding of compensatory time for receiving a COVID vaccine: ([PSB 600-4: Temporary Citywide Policy for Vaccination of City Employees against SARS-CoV-2](#)).

FACE COVERINGS

- Implement a face covering policy that:
 - Requires everyone, even if vaccinated, able to medically tolerate a face covering wear a face covering that covers the mouth and nose at all times (except when eating or drinking) while in a shared indoor City workspace. A shared indoor City workspace is a communal or open office setting in which individuals cannot be separated by a closed door. See [DCAS Commissioner's Directive 2020-1](#).
 - Under no circumstances may an employee who has not provided proof of vaccination remove their face covering in the workplace (except when eating or drinking).
 - Strongly encourages that face coverings fit snugly against the sides of the face and fully covers the nose and mouth without slipping, and (a) is made of two or three layers of tightly woven, breathable cloth material, or (b) consists of a cloth face covering worn over a disposable mask.
 - Includes a process for providing face coverings to employees, visitors, and clients at no cost to them.

- Includes a process for providing services to clients that are not medically able to tolerate a face covering.
- Includes the process by which an employee may request a reasonable accommodation if they are unable to wear or have difficulty wearing face coverings due to a disability.
- Includes actions that will be taken by an agency if an employee is not compliant with the face covering policy.
- Require employees and visitors to affirm their understanding and compliance with the City’s face covering policy using the Health Screening Tool.
- Procure a supply of face coverings to provide to employees, visitors, and clients.
- Employees working in a privately-managed office building are required to comply with the City’s face covering policy (see [DCAS Commissioner’s Directive 2020-1](#)) while in that building, regardless of the policy of building management.
- See DOHMH’s [COVID-19 Face Coverings: Frequently Asked Questions](#) for general information related to face coverings.

PHYSICAL DISTANCING

- Physical distancing is not required for employees unless they are interacting with the public.
- Implement a physical distancing policy for when employees are interacting with the public that requires individuals to stay at least 6 feet (about 2 arm lengths) from each other in both indoor and outdoor workspaces, where feasible.

HEALTH SCREENINGS

Agencies must implement a health screening assessment for employees, covered employees, and visitors and may implement a health screening assessment for clients..

Employees and Visitors

- Agencies must implement a protocol that follows the [NYC Agency Employee COVID-19 Screening Tool](#)³ for employees, covered employees, and visitors.
 - Health screenings for employees, covered employees, and visitors can be conducted via a mobile health screen application, secure webform, paper form, or verbally..⁴
 - If screenings are conducted verbally:
 - Make every effort to ensure others do not hear the individual’s responses to the confirmatory questions.
 - Ask the questions in a private area and at a volume that minimizes the risk of overhearing.
 - Whenever possible, health screenings should be conducted before an individual arrives at the workplace.

³ A link to the [NYC Agency Employee COVID-19 Screening Tool](#) is intentionally omitted as the screening tool is regularly updated. Agencies should check with their General Counsel or Agency Chief Restart Officer (ACRO) for the latest version and guidance; or email, RTOGuidance@dcas.nyc.gov or agencyrestart@cityhall.nyc.gov.

⁴ If done verbally, the agency must still collect written confirmation from the employee or visitor that (1) the health screen questionnaire was completed and (2) that the person was cleared to enter the building.

- Health screenings must be conducted on the day the individual is entering the workplace.
- Health screenings need only be conducted once a day.
- Guidance on information management:
 - Do not retain the actual responses to the health screen questionnaire. Only collect and retain the following information:
 - Name and agency they work for or are visiting.
 - Confirmation from the employee or visitor that they completed the health screen questionnaire.
 - Whether, based on the completed health screen questionnaire, the employee or visitor is cleared to enter the building.
 - Only share information collected with the agency’s Human Resources department or designated agency employees trained to maintain confidential information.
 - Store information securely and treat it as confidential medical information; maintain it in a separate confidential medical file.
 - The above information must be retained for four (4) years and then deleted as required by the New York City Department of Records and Information Services (DORIS).
- Refer to the [Updated Guidance for City Agencies on Leave Policy Applicable During the Outbreak of Coronavirus Disease 2019 \(COVID-19\)](#) for how leave should be processed for an employee who does not pass the health screening.

Clients

- Establish a policy for clients and health screenings.
 - The Mayoral Task Force on Restart leaves it to each agency's discretion to implement a responsible health screening policy for clients that accounts for its services and needs.
 - However, agencies are strongly encouraged to employ the most stringent health screen process feasible to equally protect the health and safety of their employees and all members of the public, whether they are visitors, clients, or customers.
 - If screening clients, follow the [NYC Agency COVID-19 Screening Tool for Clients](#).⁵
- Only ask clients for the following information verbally:
 - Confirmation that the client read the health screen questionnaire.
 - Confirmation that the client, based on their health screen questionnaire responses, is cleared to enter the workspace.
- Do not retain any information or written documentation from clients.
- Train screeners to ensure effective, non-discriminatory application of screening protocols.

COVID SAFE REQUIREMENT

- Per [Executive Order 78](#), City employees and Covered Employees must either
 - Provide proof of full vaccination; or

⁵ A link to the [NYC Agency COVID-19 Screening Tool for Clients](#) is intentionally omitted as the screening tool is regularly updated. Agencies should check with their General Counsel or Agency Chief Restart Officer (ACRO) for the latest version and guidance.

- On a weekly basis, provide proof of a negative COVID-19 PCR diagnostic test (not an antibody test)
- Fully vaccinated people should also get tested if they are symptomatic with COVID-like symptoms.
- Information on testing and testing locations can be found at nyc.gov/covidtest

VACCINATIONS

All persons newly hired for employment by any City agency on or after August 2, 2021 must be vaccinated per [Executive Order 75](#) and [Executive Order 76](#).

The City's Vaccine Command Center is coordinating access to vaccination for eligible City employees. Please contact your Agency Vaccination Lead for the latest information and resources on vaccinations for employees.

- Everyone 12 years of age and older is eligible to be vaccinated and the City strongly encourages all City employees to be get vaccinated.
- Walk-in vaccinations are available at all City-run sites. Employees may also register [online](#) to schedule a vaccination appointment.
- There are vaccination sites dedicated to City employees. When you register as a City employee when scheduling an appointment at the link above, sites dedicated to City employees will be included.
- Alternatively, employees can also use the City's [vaccine finder website](#) to find vaccination locations.
- Vaccinations are not mandatory for City employees.
- The City has implemented a time and leave policy for employees to allow time off for vaccination.
 - The policy provides up to four hours of excused leave during work hours for travel (to and from) and administration of the vaccine.
 - Upon successful completion of the vaccination of being fully vaccinated, the employee is eligible for three hours of comp time.
 - See [PSB 600-4: Temporary Citywide Policy for Vaccination of City Employees against SARS-CoV-2](#) for the full policy.
- Vaccine resources:
 - Information about vaccines: nyc.gov/covidvaccine
 - Vaccination site locator: nyc.gov/vaccinefinder
 - Vaccination site scheduler: [COVID-19 Vaccine Hubs Appointment Scheduler](#)

MANAGING COVID-19 CASES

Agencies must implement procedures to take action when an individual who tests positive for COVID-19 has been in the workplace or develops symptoms while in the workplace. The information provided in this section is general guidance only; agencies should consult with their Human Resources Department, General Counsel Office, EEO Officer, Safety and Health Coordinator, and Agency Chief Privacy Officer when developing procedures.

If an employee tests positive for COVID-19, they will be contacted by the [NYC Test and Trace Corps \(T2\)](#), a public health program to fight the threat of COVID-19 through free diagnostic testing, safe isolation and quarantine, and specialized contact tracing. T2 also closely monitored a safe return to school in NYC.

- T2 conducts a tracing investigation for any positive case in NYC, including City employees. If an employee tests positive, T2 will contact and support the employee through their isolation and case investigation.
- T2 will contact the positive case and identify any close contacts outside of the agency and, as necessary, close contacts inside the agency.
- The T2 tracing investigation will run in parallel to the Rapid Response Team and each positive case will be treated as any non-City employee positive case in NYC.

Additionally, agencies should take the below steps. Similar steps, as applicable, should be taken if a visitor or client tests positive for COVID-19.

Rapid Response Teams

Each agency must establish a Rapid Response Team (“RRT”) to manage COVID-19 cases in the workplace, composed of the agency’s Agency Chief Restart Officer (ACRO), Safety and Health Coordinator, and HR appointee; and trained by DOHMH, Test and Trace Corp (“T2”), the Law Department, and DCAS.

Notifications

- An employee must notify HR if they develop symptoms of COVID-19 while in the office.
- An employee who tests positive for COVID-19 and was in the office during their infectious period must notify HR of their positive test.
- HR must notify the HR representative on the Rapid Response Team.
- The HR representative on the Rapid Response Team must immediately:
 - Engage the Rapid Response Team to:
 - Establish if cleaning is required (time dependent, see [Remedial Cleaning](#) section below).
 - If cleaning is required,
 - Close off the area that needs to be cleaned such that the identity of the individual is not revealed (e.g., include multiple workstations in addition to the one assigned to the individual who tested positive).
 - Designate with signage that the area is closed for cleaning.
 - Notify building management or cleaning vendor to provide remedial cleaning.
 - Establish whether the case was confirmed positive with a diagnostic test.
 - If a confirmed positive case, interview staff and compile a list of Close Contacts ensuring not to disclose any information that identifies the employee without the employee’s consent.
- The Rapid Response Team can call DOHMH’s dedicated hotline for additional guidance. This number will be provided directly to Rapid Response Teams.
- The Rapid Response Team (or designee) must:
 - Direct the employee and any close contacts who have not been fully vaccinated within the agency not to return to the workplace until such time as their return can be made in a manner consistent with DCAS’ return to work policies. Refer to the [Updated](#)

[Guidance for City Agencies on Leave Policy Applicable During the Outbreak of Coronavirus Disease 2019 \(COVID-19\)](#) for additional guidance.

- Enter the names of close contacts who have not been fully vaccinated into the secure webform for recording close contacts. This website will be provided directly to Rapid Response Teams.
- If the employee who tested positive had close contact with someone who works at a different agency, notify the human resources department of the agency for which the close contact works to notify them that one of their employees has been identified as a close contact.
- An employee's name or any information that may reveal their identity may not be disclosed without the employee's consent. Supervisors and managers may be informed regarding necessary restrictions on the work or duties of the employee and necessary accommodations.

Remedial Cleaning

If an employee develops symptoms or has been in the workplace prior to testing positive for COVID-19, the following remedial cleaning requirements apply:

- If it has been less than 4 days since the employee was last in the workplace:
 - To the greatest extent practicable, close off the area around the employee's office or workstation in a manner that will not reveal the identity of the employee. For example, the area to be closed may include an office and workstations nearby, or the workstation that the positive employee used and workstations proximate to it. Signage should be used to indicate no one should enter the blocked-off area during the remedial cleaning process.
 - Where possible, also close off areas visited by the employee for longer than 10 minutes. As with the employee's workstation, any areas that are closed off must be done so in a manner so as not to reveal the identity of the employee.
 - Clean and disinfect all areas blocked off (as indicated above), bathrooms, common areas, and shared electronic equipment used by the employee following the CDC's [guidance on cleaning and disinfecting](#). See the [Cleaning](#) section for more information.
 - Employees who can affirm clearance as per the health screening assessment may resume using their workstations as soon as cleaning is completed.
 - If the employee showed symptoms while at work, notify the building management on generally where the employee has been throughout the building and that the employee has tested positive. Do not disclose the employee's name or specific work locations unless the employee has expressly authorized it, preferably obtained in writing.
- If it has been more than 3 days since the employee was last in the workplace, no remedial cleaning is needed.

QUARANTINE

Note that quarantine guidelines continue to be updated frequently as new information emerges. Contact your General Counsel and your Human Resources Departments for the most current information pertaining to City agencies, and visit [COVID-19: Understanding Quarantine and Isolation](#).

PERSONAL HYGIENE BEST PRACTICES

- Remind employees to clean and disinfect individual workspaces and surfaces, and equipment before and after use.
- Encourage employees to wash their hands with soap and water for at least 20 seconds.
- Make hand sanitizer containing at least 60% alcohol readily available.

CHILDCARE AND DEPENDENT CARE GUIDANCE

- If an employee is having difficulty securing care for a child under the age of 18 whose school or daycare facility is closed due to COVID-19 restrictions, they may be eligible for leave under the Emergency Family and Medical Leave Expansion Act (Division C of the Families First Coronavirus Response Act (FFCRA)).
- The employee should contact their agency's human resources department for additional information pertaining to FFCRA.
- An employee may telework for any FFCRA-qualifying event, if they are able to do so. With regards to child and dependent care, this includes care of someone under a quarantine or isolation order, or care for a child whose childcare provider is unavailable due to COVID-19 precautions. The employee must be approved to telework by their HR manager, have provided appropriate documentation, and be able to complete their work successfully.

CITY VEHICLE OPERATORS AND PASSENGERS

- All individuals operating or riding in a city vehicle, regardless of vaccination status, must wear a face covering that complies with the City's guidance on face coverings.
- Vehicle Operators must follow the NYC Health Department's [COVID-19: General Guidance for Vehicle Operators](#):
 - Clean and disinfect the vehicle routinely.
 - Pay special attention to surfaces and objects often touched by passengers, such as door handles, window buttons, locks, payment machines, armrests, seat cushions, buckles, and seatbelts.
 - Wipe down surfaces frequently touched, such as the steering wheels, radio buttons, turn indicators, and cup holders.
 - Remove visible dirt and grime first with water and soap or detergent. Use a regular disinfectant product (for example, bleach, peroxide, or alcohol-based multi-purpose products) that is effective against the virus that causes COVID-19 and is appropriate for the surface to remove germs. Disinfectants are the most effective on clean surfaces. Read and follow the labels on the cleaning and disinfectant products.
 - Wear disposable gloves and any other appropriate protective gear when cleaning and disinfecting. Throw gloves in the trash after use, wash hands with soap and water, or use an alcohol-based hand sanitizer if soap and water are not available.
 - Keep the vehicle doors open while cleaning and disinfecting.
 - Wait until all surfaces have dried before accepting passengers.
- For additional information about cleaning and disinfecting, see the NYC Health Department's [General Guidance for Cleaning and Disinfection for Non-Health Care Settings](#).

ACCESSIBILITY CONSIDERATIONS

- See [Accessibility Considerations for a Return to the Office Plan](#) for more information and FAQ's.
- The [Reasonable Accommodations at a Glance](#) flowchart can be included in messaging to remind employees of the process for requesting a reasonable accommodation.

SUPPORT FOR EMPLOYEES

- Share and make easily accessible all employee resources the City offers to promote health and wellness.
- In addition to sharing information regarding the [Employee Assistance Program](#), agency personnel representatives should also familiarize themselves with the citywide and agency-specific programs offered by [Work Well NYC](#) and [Thrive NYC](#).
- There are also generally available resources from NYC Well:
 - [COVID-19 Digital Mental Health Resources](#)
 - 24/7 counseling and referrals to care:
 - Call: 888-NYC-WELL (888-692-9355).
 - Text “WELL” to 65173.
 - Chat online at nyc.gov/nycwell

COMMUNICATION

Communication is key to keeping the workforce informed and engaged. Timely and consistent communication will also support the agency's efforts to address employee concerns as they arise effectively. All measures taken in the areas of the building, the workspace, and the workforce need to be communicated across various mediums. It is recommended that communications be centralized to ensure all individuals receive the same message.

- Consider hosting staff orientations and Q&A sessions with Human Resources and Offices of Safety and Health via video conferencing before staff return to work.
- Establish centralized, two-way communication to ensure a trusting and transparent culture for the workforce, visitors, tenants, and vendors.
- Use a wide range of communication channels and materials—email, employee portals, text messages, video, virtual live events, posters/digital displays, and others.
- Post signs and reminders at entrances and in strategic places providing instruction on hand hygiene, COVID-19 symptoms, cough, and sneeze etiquette. [CDC](#), [NYC Health Department](#), and [DCAS](#) have print materials available to download, some of which are translated into different languages.
- Develop and distribute an employee return to office handbook (see a sample, [The DCAS Office in the Age of COVID-19](#)).
- Provide information on what actions have been taken, new policies and protocols that have been put in place, and future changes to expect.
- Make messaging accessible to all by providing alternate formats, including braille, and ensuring that videos or online materials meet ADA standards and are available in American Sign Language (ASL).
- Provide employee training and information on COVID-19 risk factors, protective measures, cleaning, and disinfection products used in the workplace.
- Post the actions and measures that have been taken for each building in the lobby to alleviate concerns.
- Remind employees that City resources are available to them, including leave options, union benefits (including financial planning), confidential discussions with the agency's equal employment opportunity (EEO) officer for reasonable accommodations, health and wellness services provided by the [WorkWell NYC](#) and the [Employee Assistance Program](#), and benefits offered by their health care providers.
- Provide resources and information to facilitate commuting.
- Create and test communication systems for employees for self-reporting and notification of exposures.
- If covered employees are employed in the workplace, develop plans to communicate with the contracting company regarding modifications to work processes and requirements for the contractors to prevent transmission of COVID-19.

RESOURCES

NEW YORK CITY AGENCY AND EMPLOYEE RESOURCES

TOPIC	TITLE AND LINK
Accessibility	Accessibility Considerations for a Return to the Office Plan
Leave Policy	Updated Guidance for City Agencies on Leave Policy Applicable During the Outbreak of Coronavirus Disease 2019 (COVID-19)
Time off for Vaccination Policy	PSB 600-4: Temporary Citywide Policy for Vaccination of City Employees against SARS-CoV-2
Face Covering Policy	DCAS Commissioner’s Directive 2020-1
New Hire Vaccination Requirement	Executive Order 75 Executive Order 76
Contractor Requirement	Executive Order 77
COVID-Safe Vaccine or Test Requirement	Executive Order 78
Vaccination Confidentiality	Guidance for Designated Supervisors and Agency Staff for Handling Confidential Employee Vaccination Status Information for Purposes of Compliance with the City’s Face Covering Policy (access via CityShare only)
Sample Signs	Sample COVID-19 Signs for Buildings and Workspaces
APO Portal	Agency Personnel Officer Portal (access via CityShare only)
DCAS Sample Documents	The DCAS Office in the Age of COVID-19 DCAS Building Policies & Procedures During COVID-19

PUBLIC RESOURCES

General

SOURCE	TITLE	WEBLINK
New York City Department of Health and Mental Hygiene (DOHMH)	COVID-19 Resource Guide for New York City (NYC)	https://www1.nyc.gov/assets/doh/downloads/pdf/imm/covid-19-resource-snapshot-comprehensive.pdf
	COVID-19: Guidance for Businesses and Schools	https://www1.nyc.gov/site/doh/covid/covid-19-businesses-and-facilities.page
	COVID-19: Prevention and Groups at Higher Risk	https://www1.nyc.gov/site/doh/covid/covid-19-prevention-and-care.page
New York State Department of Health	COVID-19	https://coronavirus.health.ny.gov/home
Centers for Disease Control & Prevention (CDC)	Coronavirus (COVID-19)	https://www.cdc.gov/coronavirus/2019-nCoV/index.html
	COVID-19 Appendices	https://www.cdc.gov/coronavirus/2019-ncov/php/contact-tracing/contact-tracing-plan/appendix.html#contact
	COVID-19 Travel	https://www.cdc.gov/coronavirus/2019-ncov/travelers/index.html
	NIOSH COVID-19 Workplace Safety and Health Topic	https://www.cdc.gov/niosh/emres/2019_ncov.html
Occupational Safety and Health Administration (OSHA)	Protecting Workers: Guidance on Mitigating and Preventing the Spread of COVID-19 in the Workplace	https://www.osha.gov/coronavirus/safework

Cleaning

SOURCE	TITLE	WEBLINK
New York City Department of Health and Mental Hygiene (DOHMH)	COVID-19 Cleaning and Disinfection Log Template	https://www1.nyc.gov/assets/doh/downloads/pdf/imm/covid-19-cleaning-disinfection-log-template.pdf
Centers for Disease Control & Prevention (CDC)	Cleaning and Disinfecting Your Facility	https://www.cdc.gov/coronavirus/2019-ncov/community/disinfecting-building-facility.html
United State Environmental Protection Agency	List N: Disinfectants for Use Against SARS-CoV-2	https://www.epa.gov/pesticide-registration/list-n-disinfectants-use-against-sars-cov-2
Occupational Safety and Health Administration	OSHA Hazard Communication Standard	https://www.osha.gov/dsg/hazcom/

Airborne Transmission & Ventilation

SOURCE	TITLE	WEBLINK
Centers for Disease Control & Prevention (CDC)	Scientific Brief: SARS-CoV-2 and Potential Airborne Transmission	https://www.cdc.gov/coronavirus/2019-ncov/more/scientific-brief-sars-cov-2.html
	How COVID-19 Spreads	https://www.cdc.gov/coronavirus/2019-ncov/prevent-getting-sick/how-covid-spreads.html
	Ventilation in Buildings	https://www.cdc.gov/coronavirus/2019-ncov/community/ventilation.html
United State Environmental Protection Agency (EPA)	Ventilation and Coronavirus (COVID-19)	https://www.epa.gov/coronavirus/ventilation-and-coronavirus-covid-19
	Indoor Air and Coronavirus (COVID-19)	https://www.epa.gov/coronavirus/indoor-air-and-coronavirus-covid-19
World Health Organization (WHO)	Coronavirus	https://www.who.int/health-topics/coronavirus#tab=tab_1
American Society of Heating, Refrigerating and Air-Conditioning Engineers (ASHRAE)	HVAC and COVID-19	https://www.ashrae.org/file%20library/technical%20resources/covid-19/20-29_light.pdf
	ASHRAE Position Document on Infectious Aerosols	https://www.ashrae.org/file%20library/about/position%20documents/pd_infectiousaerosols_2020.pdf
	Core Recommendations for Reducing Airborne Infectious Aerosol Exposure	https://www.ashrae.org/file%20library/technical%20resources/covid-19/core-recommendations-for-reducing-airborne-infectious-aerosol-exposure.pdf
	ASHRAE Filtration/Disinfection	https://www.ashrae.org/technical-resources/filtration-disinfection#mechanical
International Laboratory for Air Quality and Health	Expiratory Aerosols and Infection Spread (includes a link to Airborne Infection Risk Calculator (AIRC))	https://research.qut.edu.au/ilqh/projects/expiratory-aerosols-and-infection-spread/

Building Management (General)

SOURCE	TITLE	WEBLINK
	Guidance for Building Operations During the COVID-19 Pandemic	https://www.ashrae.org/news/ashraejournal/guidance-for-building-operations-during-the-covid-19-pandemic
	ASHRAE Offers COVID-19 Building Readiness/Reopening Guidance	https://www.ashrae.org/about/news/2020/ashrae-offers-covid-19-building-readiness-reopening-guidance

SOURCE	TITLE	WEBLINK
American Society of Heating, Refrigerating and Air-Conditioning Engineers (ASHRAE)	ASHRAE Standard 180-2018, Standard Practice for the Inspection and Maintenance of Commercial Building HVAC Systems	https://www.ashrae.org/File%20Library/Technical%20Resources/Bookstore/previews_2016639_pre.pdf

Managing Cases and Quarantine

SOURCE	TITLE	WEBLINK
DOHMH	Handling COVID-19 Cases in the Workplace: What Employers Need to Know	https://www1.nyc.gov/assets/doh/downloads/pdf/covid/businesses/covid-19-reopening-cases-workplace.pdf
	COVID-19: Understanding Quarantine and Isolation	https://www1.nyc.gov/assets/doh/downloads/pdf/covid/covid-19-understanding-quarantine-and-isolation.pdf
NYC Health/Test & Trace Corps	Information for Employers on NYC’s COVID-19 Testing Recommendations	https://www1.nyc.gov/assets/doh/downloads/pdf/covid/businesses/covid-19-testing-employers.pdf
CDC	When to Quarantine	https://www.cdc.gov/coronavirus/2019-ncov/if-you-are-sick/quarantine.html
	Options to Reduce Quarantine for Contacts of Persons with SARS-CoV-2 Infection Using Symptom Monitoring and Diagnostic Testing	https://www.cdc.gov/coronavirus/2019-ncov/more/scientific-brief-options-to-reduce-quarantine.html

Face Coverings & Health Screenings

SOURCE	TITLE	WEBLINK
New York City Department of Health and Mental Hygiene (DOHMH)	NYC Face Coverings	https://www1.nyc.gov/site/coronavirus/resources/facecoverings.page
	COVID-19 Face Coverings: Frequently Asked Questions	https://www1.nyc.gov/assets/doh/downloads/pdf/imm/covid-19-face-covering-faq.pdf
	The Basics About Face Coverings	https://www1.nyc.gov/assets/doh/downloads/pdf/covid/basics-about-face-coverings.pdf
	COVID-19 Employer Health Screen Review Documentation Template	https://www1.nyc.gov/assets/doh/downloads/pdf/imm/covid-19-health-screen-template.pdf
	Your Guide to Masks	https://www.cdc.gov/coronavirus/2019-ncov/prevent-getting-sick/about-face-coverings.html

SOURCE	TITLE	WEBLINK
Centers for Disease Control & Prevention (CDC)	Requirement for Face Masks on Public Transportation Conveyances and at Transportation Hubs	https://www.cdc.gov/coronavirus/2019-ncov/travelers/face-masks-public-transportation.html

Testing & Vaccines

SOURCE	TITLE	WEBLINK
New York City Department of Health and Mental Hygiene (DOHMH)	NYC COVID-19 Testing Recommendations	https://www1.nyc.gov/assets/doh/downloads/pdf/covid/covid-19-testing-recommendations.pdf
	COVID-19: Vaccine Facts	https://www1.nyc.gov/site/doh/covid/covid-19-vaccine-facts.page
	COVID-19 Testing: Frequently Asked Questions (FAQ)	https://www1.nyc.gov/assets/doh/downloads/pdf/imm/covid-19-testing-faq.pdf
	COVID-19: Vaccine Requirements	https://www1.nyc.gov/site/doh/covid/covid-19-vaccine-eligibility.page
	What New Yorkers Need to Know About COVID-19 Vaccines	https://www1.nyc.gov/assets/doh/downloads/pdf/covid/covid-19-vaccines-faq.pdf
New York City	COVID-19 Vaccine Finder	https://vaccinefinder.nyc.gov/
	COVID-19 Vaccine Scheduler	https://vax4nyc.nyc.gov/

ADA

SOURCE	TITLE	WEBLINK
U.S. Equal Employment Opportunity Commission (EEOC)	What You Should Know About COVID-19 and the ADA, the Rehabilitation Act, and Other EEO Laws	https://www.eeoc.gov/wysk/what-you-should-know-about-covid-19-and-ada-rehabilitation-act-and-other-eeo-laws
	Pandemic Preparedness in the Workplace and the Americans with Disabilities Act	https://www.eeoc.gov/laws/guidance/pandemic-preparedness-workplace-and-americans-disabilities-act

DCAS

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