As Libraries return to full operations during the COVID-19 pandemic, they will need to consider a variety of safe work practices, as well as guidelines issued by local, state and federal officials. These safe work practices must be developed in conjunction with the safety requirements established by The Occupational Safety and Health Administration (OSHA) and public health officials in each local jurisdiction.

This fact sheet provides guidance and considerations for a range of libraries, including community, higher education and school libraries. A special emphasis must be placed on physical distancing strategies, curbside service, meeting and study rooms, lobby and common areas, corridors, kitchens, restrooms, temperature, humidity, ventilation and enhanced cleaning practices. Policies regarding employees who have contracted, been exposed to or may have contracted COVID-19 — such as paid sick leave and screening — should also be a part of the library reopening plan. Additionally, communication and training on site plans, policies and procedures will be essential to the health and welfare of all library staff. Regardless of the library size, all of these aspects should be considered to ensure safety and health in the workplace.

Physical Distancing Strategies

Prior to opening the library, workers and management should work together and perform a detailed review of the configuration of workspaces and consider:

- Regulating the use of common areas with clear signage (including maximum occupancy) and physical distancing measures in accordance with public health rules and guidelines.
- Placing marks on floors wherever a line may develop to encourage proper physical distancing. Consider providing infographics on your website or posting signage as a visual reminder of the appropriate physical distancing protocol.
- Limiting the number of patrons in the library at one time.
- Devoting certain hours of operation for high-risk patrons (pregnant women, older individuals, or individuals with underlying medical conditions) to visit the library. Restrict entry to only those specific groups during the special hours.
- Automating certain library services (such as check-out) to limit contact.
- Allowing library patrons to pre-order books or other library materials and pick up at a secure outdoor location.
- Canceling or postponing library events such as story time, community gatherings and meetings and tutoring. These events may be conducted virtually.
• Positioning library computers, desks and chairs to ensure appropriate physical distancing. Consider staggering computer access times.
• Encouraging employees and families not to linger or socialize in the library. Consider limiting the amount of time patrons can spend in the library, limiting the hours of library operation or both.
• Closing or eliminating shared common areas to avoid crowds.
• Eliminating reception seating areas and requiring clients, visitors and guests to phone ahead for a specific time to enter the library.
• Installing a plastic partition at the reception area and in spaces where one-on-one meetings are conducted to provide a barrier between the public and library staff.
• Reviewing floorplans and removing or reconfiguring seats, furniture and workstations to achieve physical distancing in accordance with guidelines (generally six feet).
• Reconfiguring workstations so that employees do not face each other or installing partitions (plastic or other material) if facing each other cannot be avoided.
• Installing partitions between employees’ workspaces (e.g., desks) if physical distancing between employees is not possible.

Curbside Services

In order to provide curbside services, libraries will need to ensure that they have sufficient staff to provide these services, their staff are well-informed about the services and they can keep staff safe before, during and after the services. Things to consider include:

• What days and times will you offer curbside pickup and delivery services?
• How many staff will you need to provide these services? Have you created your process for curbside pickup and delivery?
• Have staff been trained on your process for curbside pickup and delivery?
• Are there adequate personal protective equipment (PPE), service equipment (e.g., book carts, tables and bins) and supplies (e.g., bags to pack materials) for staff to provide the services?
• Is there enough space for staff to stage materials requested by patrons?

In-Library Browsing

Libraries should reduce operating hours to allow for on-going, off-hour sanitation and cleaning. For example, some libraries plan to close for an hour in the middle of the day to allow for cleaning.

Libraries will need to determine the number of hours the library can reasonably be open to the public and consider:

• Are enough staff available to cover all the hours? How many staff do you need to deliver services? Will staff be able to stay appropriately distanced? How will hours and services be modified if staff are unable to work due to illness?
• How will the library screen staff for COVID-19 symptoms and do so in a confidential way?
• Which staff will be able to work from home when the building is open? How will that be determined?
• Which special hours will be offered to at-risk populations (e.g., elderly, pregnant women, special-needs populations)?

Public Computers and Shared Equipment

Public computers should be spaced at least six feet apart, or if that is not possible, equipment should be blocked off and chairs removed to maintain six-foot distancing between patrons. Public computers, shared technology and equipment accessible to multiple users must be wiped down and disinfected between uses. Provide wipes to patrons to wipe down equipment after use. Also consider:

• Who will be responsible for cleaning the computers?
• Are there covers or sleeves for shared equipment that patrons will use?
• How will staff assist patrons with computer equipment and still meet social distancing requirements?

Materials and Collections

Books and other materials should be placed in marked containers after being handled or returned by patrons and subject to 24-hour quarantine before being returned to shelves by library workers. All materials that have been checked out and returned to the library, placed on a shelving cart or are found out of place in the library (e.g., on tables) need to be quarantined for 24 hours.

Meeting and Study Rooms

If in-person meetings are essential, or study rooms are used, consider limiting the size of the meetings in accordance with local, state and federal guidelines. In-person meetings should only take place if physical distancing can be achieved. Meeting and study rooms that are used should be disinfected regularly and after each use. Disinfectant wipes or spray should be left in each conference room, and employees should be encouraged to wipe down all surfaces and equipment (e.g., mouse, keyboard and phone) touched during conference room meetings. Lingering and socializing before and after meetings should be discouraged, and employees should be encouraged to use virtual meeting tools, including phone and video conferencing, in lieu of in-person meetings, whenever possible.

Lobby and Common Areas

Common areas (e.g., lobby, security check-in and delivery-receiving areas) should be cleaned and disinfected at least daily. Prominently display signage encouraging staff and visitors to:

• Follow physical distancing recommendations.
• Practice good personal and environmental hygiene (e.g., handwashing, respiratory etiquette and cleaning frequently touched objects).
• Respect occupancy limits.
• Not linger or socialize in common areas and around building entrances and exits or loading docks.
Additionally, libraries should eliminate literature, pamphlet and promotional tables from common areas. If feasible, libraries should end cash transactions and move to an electronic or pre-payment system for goods, permits, fees, etc. Where kiosks and electronic portals are used to obtain services, all portals, pens and styluses should be disinfected after each use. Disinfectant, cleaning supplies and hand sanitizer with at least 60% alcohol should be made available for visitors to use in common areas.

**Breakrooms**

Breakroom areas should be cleaned and disinfected at least twice daily. There should be a special emphasis on cleaning after typical break times (coffee and lunch hours). Congregating in kitchen areas should be discouraged, and the occupancy of the space should be limited to achieve physical distancing.

Kitchen equipment and utensils should be cleaned on a regular basis. This includes coffee machines, refrigerator handles, dishwashers, microwaves, toasters, water and beverage faucets and ice machine handles.

All silverware, dinnerware, utensils and coffee pots should be cleaned in the dishwasher. This helps ensure thorough cleaning and disinfection. If silverware and dishes cannot be kept clean and covered, disposable, individually wrapped options are recommended.

Ice machines that require a handheld scoop should be disconnected and taken out of service.

If vending machines are available for employee use, disinfecting should be required after each use. Eliminate public access to vending machines.

**Restrooms**

Keep bathrooms clean and disinfect them on a consistent basis. Limit occupancy if a multi-stall restroom exists. Provide disposable, foldable paper towels that can be dispensed freely, without having to touch a handle on a dispenser; or install automated touch-free dispensing machines. Disconnect or tape off hand air dryers. Doors to restrooms should be able to be opened and closed without touching handles if possible. For bathrooms intended for staff use only, provide a key to each employee so disinfection measures can be better controlled. Additionally, workplaces should:

- Place a trash can and disposable towels by the door if the door cannot be opened without touching the handle.
- Place signs indicating that toilet lids (if present) should be closed before flushing. SARS-CoV-2 — the virus that causes COVID-19 — may be aerosolized when flushing the toilet.
- Place signs asking employees and the public to wash hands before and after using the restroom.
- Clean and disinfect restrooms available for public use on an hourly basis.
- Vent separately where possible (e.g., turn exhaust fan on if vented directly outdoors and run fan continuously).
- Keep bathroom windows closed if open windows could lead to re-entrainment of air into
other parts of the building (i.e., if the exhausted air could re-enter the building through air intakes or other openings).

- Have an ample supply of hand soap and sanitizer available for use.

**Ventilation, Temperature and Humidity**

Proper temperature and humidity and adequate flow of fresh air to workspaces is essential. Ventilation and filtration provided by heating, ventilating and air-conditioning systems can reduce the airborne concentration of SARS-CoV-2 and thus the risk of transmission through the air. Disabling of heating, ventilating and air-conditioning systems is not a recommended measure to reduce the transmission of the virus.

Workers and employers should consult with building owners and HVAC technicians to ensure maximum flow of fresh air is passing through the ventilation system. Additional steps that can be taken include:

- Ensuring restrooms are under negative pressure.
- Cleaning and disinfecting all HVAC intakes and returns daily.
- Making certain that the proper filtration to control SARS-CoV-2 transmission (minimum efficiency reporting value ≥ 13) is being used, instead of less effective filtration that might otherwise be recommended for normal office use.
- When feasible, disinfecting filters with a 10% bleach solution or another appropriate disinfectant, approved for use against SARS-CoV-2, before removal. Filters (disinfected or not) can be bagged and disposed of in regular trash.
- Maintaining temperature at 68.5-75°F in the winter, and from 75-80.5°F in the summer.
- Maintaining relative humidity at 40-60% throughout the year.

Another important consideration is whether to use portable and hard mounted fans. If these fans are used, take steps to minimize air from fans blowing from one person directly to another. Inspect windows and doors prior to reopening to ensure there are no leaks.

**Cleaning and Disinfecting**

Based on what is currently known about SARS-CoV-2, transmission of this coronavirus occurs much more commonly through respiratory droplets than through contact with surfaces and objects. However, current evidence suggests that SARS-CoV-2 may remain viable for hours to days on surfaces made from a variety of materials (plastics, glass, metal, linens, wood and cardboard). Cleaning of visibly dirty surfaces followed by disinfection is a best practice measure for prevention of COVID-19 and other viral respiratory illnesses in workplaces.

Employers should implement and workers should engage in routine cleaning of frequently touched surfaces (e.g., tables, doorknobs, light switches, handles, desks, toilets, faucets and sinks) with EPA registered disinfectants that are appropriate for surfaces and objects, following label instructions. Labels contain instructions for safe and effective use of the cleaning product, including precautions you should take when applying the product. Additionally, a Safety Data Sheet (SDS) should be available with each product available for employee use.
Employers are responsible for ensuring that workers are protected from exposure to SARS-CoV-2, including workers tasked with cleaning surfaces that may be contaminated with SARS-CoV-2. Employers are also required to make sure workers are protected from exposure to harmful levels of chemicals used for cleaning and disinfection. Employers must select PPE that will protect workers against SARS-CoV-2 and hazards associated with chemicals to which they may be exposed. Workers must wear PPE to help minimize exposure to the virus and chemicals through inhalation, contact or ingestion. Examples of PPE that may be needed during cleaning and decontamination include:

- Nitrile gloves.
- Goggles or face shields.
- Fluid-resistant or fluid-impermeable gowns, coveralls and aprons.
- Dedicated work clothing and washable shoes with shoe or boot covers.
- Facemasks (e.g., surgical masks) that cover the nose and mouth. In some cases, additional respiratory protection (e.g., N95, powered air-purifying respirators or better) may be necessary to protect workers from exposure to SARS-CoV-2 or disinfectants.

Workers must receive training on and demonstrate an understanding of:

- When to use PPE.
- Which PPE is necessary.
- How to properly don, use and doff PPE in a manner to prevent self-contamination.
- How to properly dispose of or disinfect and maintain PPE.
- The limitations of PPE.

Any reusable PPE must be properly cleaned, decontaminated and maintained after and between uses. Facilities should have policies and procedures describing a recommended sequence for safely donning and doffing PPE. Depending on the hazards posed by the size of a spill, degree of contamination or other factors, required PPE may be different than what is described in this fact sheet.

**Communication**

Workers and employers should collaborate and designate an effective means of communicating information on new workplace policies and changes prior to reopening and upon resuming operations. A communication policy that establishes formal and informal routes of communication for staff to express concerns, questions, comments and feedback is a necessity.

Consistent communication should include information on disinfection schedules, reporting policies for symptomatic staff, sick leave policies and health and safety protections in place. Additionally, communication on changes in hours of operations and building closures or limited building access will be required. If the workplace is in a multi-tenant location, a communication vehicle with other tenants to inform of potential and confirmed COVID-19 cases present in the building should be established.
Training

Education and training are important tools for informing staff about workplace hazards and controls so they can work more safely and be more productive. Another role of education and training, however, is to provide staff with a greater understanding of new workplace policies and changes, so that they can contribute to their development and implementation.

Education and training opportunities provide employers, managers, supervisors and workers with:

- Knowledge and skills needed to do their work safely and avoid exposure to SARS-CoV-2 that could place themselves or others at risk.
- Awareness and understanding of policies and procedures and how to identify, report and control exposure to SARS-CoV-2.
- Specialized training when their work involves unique hazards.

Staff should receive, at a minimum, awareness training on cleaning and disinfection products used in the workplace; proper handwashing; physical distancing and other workplace protections; and all related policies and procedures. For staff who will use disinfectants and cleaners, training should also include proper use, PPE, disposal and all precautionary measures.

Flexible Work Policies

Employers should adopt flexible work policies that minimize exposure to and transmission of the SARS-CoV-2 virus by reducing the number of workers in a workspace at the same time. This could include telework, either full time or at regular intervals (e.g., every other day), when feasible. Flexible work policies also include staggered work schedules that have workers in an office at different times during a day.

Telework also should be considered to address the needs of workers who cannot or should not return to an office setting at this time. These include workers:

- Who are quarantined or self-quarantined due to potential exposure to SARS-CoV-2.
- Who are at increased risk for severe illness (e.g., those who are 65 or older; have heart disease, diabetes, lung disease, HIV, underlying immune disorders or compromised immune systems; or are pregnant).
- Who have a household member at increased risk for severe illness.
- Who have children whose school or care provider is closed or unavailable.

In creating flexible work policies, consideration also should be given to changes in transportation options available to workers and CDC guidance encouraging the use of forms of transportation that minimize close contact with others. For example, using regular forms of public transportation or ride sharing to go to and from work may not be feasible for some workers while the pandemic continues.
Policies Regarding Employees Who Have Contracted, Been Exposed to or May Have Contracted COVID-19

A combination of leave, screening and related policies may be used to limit and address workplace exposure to individuals who have or may have contracted COVID-19.

Paid Sick Leave Policies

Sick leave policies during a pandemic have a major impact on safety and health. If employers do not offer paid sick leave, workers may come to work sick. This is a major risk factor for office staff. That is why the CDC recommends establishing non-punitive, emergency sick leave policies.

To overcome this, employers should provide paid sick leave for all employees and ensure leave policies are flexible and consistent with public health guidance related to individuals who have been diagnosed with, are exhibiting symptoms of or have been quarantined because of COVID-19. Government employers also should not deny any workers federally required, emergency paid sick leave by classifying them as emergency responders. Government workers are otherwise entitled to this leave through the end of 2020.

Screening and Stay-at-Home Policies

Policies that may be adopted to determine whether employees may have contracted COVID-19 include asking symptom screening questions before or upon arrival at the workplace, taking employees’ temperature and requiring employees to be tested for COVID-19. Any screening also should apply to visitors to a workplace. Employers may require employees exhibiting symptoms of COVID-19 to leave the workplace and stay home from work. Similarly, employers may ask employees calling out sick whether they are exhibiting symptoms of COVID-19. The U.S. Equal Employment Opportunity Commission (EEOC) has issued guidance that these policies are permitted under federal law.

Screening questions about COVID-19 symptoms should be consistent with CDC and other guidance from public health and medical professionals. Questions may need to change as understanding of the disease evolves. According to current CDC guidance, symptoms may include fever or chills, cough, shortness of breath or difficulty breathing, fatigue, muscle or body aches, headache, new loss of taste or smell, sore throat, congestion or runny nose, nausea or vomiting and diarrhea. Policies and procedures must be implemented to protect the confidentiality of each employee’s personal health information, including answers to screening questions and temperature. Failure to do that could violate an employee’s right to medical privacy.

For employees who have a confirmed diagnosis, policies should specify how long a worker should remain on leave, consistent with current medical recommendations. Current guidance provides that someone with COVID-19 should remain in isolation until: (1) there has been no fever for three days without taking fever-reducing medication (e.g., ibuprofen); (2) respiratory symptoms have improved; and (3) at least 10 days have elapsed since symptoms began. The same guidance would apply to someone who has been required to stay home due to exhibiting symptoms, unless she has subsequently tested negative.
Policies for When Individuals Exhibit Symptoms in the Workplace or COVID-19 Is Confirmed

Policies and procedures are needed to address circumstances in which individuals become sick at work or have COVID-19 symptoms when they arrive at work. Generally, this should include isolating the person from others, providing that person a mask if needed and sending the person home and to get medical treatment. Further, contact tracing should done to identify and inform those who may have come into close contact with the person, while protecting the identity of the infected or potentially infected person.

In any case in which someone who was in the workplace is confirmed to have COVID-19 or is showing symptoms but awaiting a diagnosis, extensive cleaning should be done. This should include closing off for 24 hours any area in which the person recently spent significant time, such as an office, in order to allow any aerosolized droplets to settle before cleaning starts. Cleaning should be done consistent with the approach described above, including with the provision of appropriate PPE.

Additional Resources and Source Material


