

COVID OPERATION PLAN FOR BUSINESSES

Business Name: _____

Site Address: _____

This business plans to: (check the box that applies. Update this plan as conditions change)

Operate with curb side pickup and call in services only at this time.

Required plan elements are pre-checked. Skip Section C.

Operate with limited indoor/outdoor services at this time.

Required plan elements are pre-checked. Complete all Sections.

A. **SIGNAGE** (check all that apply- premade signs will be posted on the County COVID webpage)

1. Signs are posted at each entrance of the business reminding customers and employees:
 - Not to enter the facility if they have a fever, cough, or shortness of breath
 - Maintain a minimum of 6-foot distance from other individuals
 - Avoid unnecessary physical contact (no hand shaking/hug etc.)
 - It is recommended that you wear a face covering when visiting this establishment

B. **MEASURES TO PROTECT EMPLOYEES** (check all that apply)

1. All employees who can carry out their work duties from home are encouraged to do so
2. All employees have been informed not to come to work if sick.
3. Implement flexible sick policies to discourage anyone from working when sick
4. All employees have reviewed this COVID Operation Plan
5. Follow all State and County face covering guidance
6. Employers and/or managers must be vigilant for signs of illness including but not limited to: fever, cough, and shortness of breath
7. Employees are not required to handle customer's reusable bags. (Items may be bagged by customer in own bags).
8. All individual work stations (desks, registers, etc.) are separated by at least 6 feet or include physical barriers (Plexiglas, plastic sheeting) when separation is not possible.
9. Disinfectant and related supplies are available to all employees at the following location(s):
-
10. Handwashing facilities are available to all employees at the following location(s):
-

C. **MEASURES TO PREVENT GATHERINGS** (check all that apply)

1. Limit the number of people in the business at one time. Limits should be set using the following standard: 1 person (or household unit) per 200 square feet of retail space or approximately 30% of normal capacity.

Total square feet of retail space: _____ Maximum allowable COVID capacity: _____

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2. Assign an employee(s) to make sure the maximum number of people in the facility set forth above is not exceeded
3. Establish a set traffic flow through the business. Markings should be placed on the floor establishing direction of flow as well as markings indicating 6 feet of separation. Use an individual entrance and exit when possible.

D. MEASURES TO PREVENT UNNECESSARY CONTACT (check all that apply)

1. Provide contactless payment methods or, if not feasible, disinfect payment station between uses
2. Place tape or other markings at least 6 feet apart in customer line areas both inside and outside the business as needed
3. Customer refillable containers or mugs for food or drinks will not be used unless items are first sanitized by facility

E. MEASURES TO INCREASE SANITATION (check all that apply)

1. Disinfect all high-contact surfaces frequently (e.g., door handles, shopping carts/baskets counters touched by customers).
2. Hand sanitizer effective against COVID-19 is available to all employees at the following location(s):
-
3. Hand sanitizer and/or handwashing facilities are available to all customers at the following location(s):
-
4. Breakrooms, restrooms, and other common areas are being disinfected frequently, following this schedule:
Restrooms:
Breakrooms:
Other:
Other:

F. ALTERNATE MEASURES IMPLEMENTED BY BUSINESS (please attach another page as needed)

G. OWNER CERTIFICATION: I understand that this plan or another written COVID-19 operating plan must be made available to Plumas County upon request.

Name and Title: _____ Phone Number: _____

Signature: _____ Plan Date: _____ Revision #: _____

COVID OPERATION PLAN APPENDIX F.

OUTDOOR LODGING FACILITIES

CHECK LIST FOR CAMPGROUNDS AND RV PARKS SERVING ESSENTIAL WORKFORCE, SEASON LONG AND CLOSE TO HOME GUESTS

Business Name: _____

Required plan elements are pre-checked.

1. ENHANCED SANITATION

- i. Ensure that sanitary facilities stay operational and stocked at all times. Provide additional soap, paper towels, and hand sanitizer as needed
- ii. Equip high traffic areas such as entry ways, check in counters, workstation, etc. with sanitation products, including hand sanitizer and sanitization wipes or spray
- iii. Use approved disinfectants for all cleaning.
 - A bleach solution of 1000 ppm with contact time of 1 minute will be used for disinfecting
1/3 cup bleach + 1 gallon of water = 1000 ppm bleach solution
1 Tablespoon bleach + 25 fluid ounces of water = 1000 ppm bleach solution
 - An alternate EPA approved disinfectant will be used from this list
<https://www.epa.gov/pesticide-registration/list-n-disinfectants-use-against-sars-cov-2>
- iv. Frequently touched surfaces must be cleaned on a routine basis. Increase cleaning frequency from pre-COVID protocols. Frequency should be based on guest traffic and must be done at least daily.

2. ADDITIONAL MEASURES TO PREVENT GATHERINGS

- i. Limit stays per site to members of the same household. No group or club rentals are permitted and no gatherings other than household units are permitted at this time
- ii. Community areas, with the exception of sanitation facilities, must be closed at this time.
Community areas include, but are not limited to: pools, spas, club houses, recreation areas, game rooms, etc.

3. ADDITIONAL MEASURES

- i. Local Health Orders and County Guidance must be provided for review by patrons during pre-trip outreach or as on-site postings
- ii. Encourage reservations and prepaying to decrease contact with patrons
- iii. Implement hands free check in whenever possible
- iv. All meals served and provided as amenities to the stay must follow Restaurant guidelines see <https://www.plumascounty.us/275/Food-Safety> for details

Signature: _____ Plan Date: _____ Revision #: _____

This page should be attached to the full COVID Operation Plan for this business