

**VA**



U.S. Department  
of Veterans Affairs

# **CHARTING THE COURSE: Maintaining Continuous Services to Veterans while Supporting a COVID-19 Safe Workplace**

**Updated March 2021**

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## Summary of Revisions

| Version | Version Date  | Description of Major Revisions   |
|---------|---------------|--|
| 1.0     | May 7, 2020   | First version of document released publicly.   |
| 2.0     | March 3, 2021 | Aligned with new guidance in Office of Management and Budget Memorandum M-21-15. Updated scope and applicability to include VA contractors, buildings and land. Added timeline for VA Administrations and selected Staff Offices to develop/update Annexes, plans and policies. Included reference to VA's "Fourth Mission" and COVID-19 vaccine efforts. Added information about VA's COVID-19 Coordination Team. Emphasized mask requirements as a Federal mandate. Incorporated additional guidance for contact tracing, testing, symptom screening, quarantine and occupancy rates. Added travel restrictions guidance. Elaborated on guidance for enhanced cleaning and ventilation protocols. Included references to available guidance from other Federal agencies. |
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## Introduction

The Department of Veterans Affairs' (VA) mission is to take care of our Veterans and their families. VA employees across the Nation are dedicated to serving Veterans, Servicemembers, caregivers and their families, as well as the larger public, with healthcare, benefits and memorial services. In the face of the historic coronavirus disease 2019 (COVID-19) pandemic, VA is committed to protecting its workforce and those interacting with the workforce while ensuring continuity of mission-critical and essential services as part of the Nation's overall response and preparedness efforts.

## Purpose, Applicability and Scope

This document provides a framework for VA to protect its workforce and safely maintain continuous services to Veterans in accordance with the January 2021 ["National Strategy for the COVID-19 Response and Pandemic Preparedness,"](#) the Executive Order on ["Protecting the Federal Workforce and Requiring Mask-Wearing,"](#) issued on January 21, 2021, and the Office of Management and Budget (OMB) Memorandum M-21-15, ["COVID-19 Safe Federal Workplace: Agency Model Safety Principles."](#) This document applies to all VA employees, contractors, patients and visitors in VA's buildings and on VA's lands. VA will also work closely with the General Services Administration (GSA) and building owners to apply this framework at leased properties. Due to the rapidly evolving nature of the COVID-19 pandemic, this document is dynamic and is not meant to be comprehensive. Additional implementing guidance will follow as necessary.

To ensure the safety of the workforce, VA Administrations and selected Staff Offices are required to develop and/or update cascading guidance and protocols in the form of Annexes to include return-to-work plans, bulletins and policy documents within one month of major revisions to the Charting the Course framework.

## Objectives

The overall objective of this framework is to provide Department-level guidelines for supporting a safe workplace while maintaining mission-critical services and activities. Specific framework objectives include:

- Aligning VA activities with national and Federal guidance.
- Providing an executable roadmap for safe operations as the situation evolves.
- Clearly communicating guidance and criteria to the VA workforce, Veterans, patients, visitors and stakeholders.
- Mitigating risk of resurgence and spread and protecting the most vulnerable populations.
- Utilizing the best available data and science-based public health measures to drive decision-making to assure mission readiness.
- Protecting the VA workforce and individuals interacting with the workforce.

## Planning Assumptions and Challenges

COVID-19 response and preparedness present VA with unprecedented challenges due to variances amongst Department mission areas supporting Veterans, workforce demographics, geographic locations, occupations, facilities and available resources. As such, this framework is based on the following planning assumptions:

- Pandemic is ongoing and VA continues to provide response and preparedness efforts.
- Duration and severity can vary depending on the characteristics of the virus and the public health response.
- Resources required to mitigate identified risk may be limited.
- Occupancy and staffing in VA workplaces will vary due to mission needs and differing rates of community transmission across localities.
- Active engagement with key stakeholders will occur throughout planning efforts at the national and local levels.
- All safety measures put in place will continue as COVID-19 vaccines are administered throughout the Department and local communities.

## COVID-19 Response and Preparedness Efforts

VA carried out an aggressive public health response to protect and care for Veterans, their families, healthcare providers and staff in the face of the COVID-19 pandemic. During the early onset of the pandemic, VA quickly realigned various activities and operations around the country while continuing its core missions. VA also implemented specific protective measures, such as targeted outreach to Veterans and staff, COVID-19 screening and limiting access to healthcare activities. Moreover, as part of VA's "Fourth Mission," the Department provided personal protective equipment (PPE) and COVID-19 testing, deployed healthcare personnel and admitted non-Veteran citizens for care at VA medical centers in support of national, state and local efforts.

With approximately 90% of the workforce engaged in providing healthcare to Veterans, most employees have remained in their daily work environments throughout the pandemic. The remaining workforce ensured that cemeteries remained open for visitation and interment of Veterans and eligible individuals, and sustained Veterans benefits claims processing operations. Moreover, VA Staff Offices and headquarters components of the VA Administrations maximized telework and digital processes to continue providing seamless mission support services.

VA continues to work in close collaboration with the Centers for Disease Control and Prevention (CDC) and other Federal partners to provide COVID-19 vaccinations to frontline VA healthcare workers, onsite support personnel and Veterans residing in long-term care units in VA medical centers across the country. Based on availability of the vaccine, VA is also providing vaccinations for critical infrastructure employees, including employees in the Veterans Benefits Administration and National Cemetery Administration. The Veterans Health Administration released its [COVID-19 Vaccination](#)

[Plan](#) in December 2020 and is revising this plan to include COVID-19 vaccination plans for the rest of the Department as vaccine supply becomes available. The revised version of the COVID-19 Vaccination Plan is expected to be released in March or April 2021.

## Risk Assessments: Data and Other Considerations

VA will continue to ensure continuity in delivery of critical services and to protect the health and safety of the workforce forging a stronger, better, more equitable whole-of-government response. VA carefully assesses the risks (and identifies potential mitigations and opportunities) before returning employees to workplaces. The Department's return to workplaces has been safe, cautious, iterative and data driven. Not all facilities, work units or functions have the same threats, risks, hazards and mitigation opportunities. While VA Administrations and Staff Offices may tailor risk assessments to meet business-line specific needs and weigh the criticality of certain face-to-face Veteran services, workforce safety is a key priority in meeting mission requirements. VA will incorporate the CDC's phased risk mitigation strategy into Department guidance once that strategy is released and share additional information on the [Charting the Course intranet site](#).

### Use of COVID-19 Data

VA utilizes the best available data and local information to continue making mission-critical decisions on returning to workplaces. VA will regularly consult CDC's [COVID Data Tracker County View](#) and develop associated tools to help VA organizations assess conditions across the country. Depending on local conditions, data collected, and lessons learned, VA may determine to implement additional safety measures at specific facilities and localities.

The Department tracks national and state conditions centrally at VA Central Office while VA Administrations and Staff Offices break down their regions into smaller sub-regions to calibrate with local data and information. Additionally, VA relies upon OMB resources to track state and local status.

### Other Key Considerations

In addition to available data, VA considers several factors, including, but not limited to:

- Availability of PPE and face masks.
- Capabilities of laboratory testing for COVID-19.
- Availability of hand sanitizer and disinfecting wipes for employees' use.
- Ability to safely store hand sanitizer in accordance with Occupational Safety and Health Administration (OSHA) quantity and storage requirements.
- Availability of facility cleaning and disinfection supplies.
- Status of schools and daycares.
- Functionality of mass transit and availability of parking.

- Required office space alterations needed to ensure appropriate physical distancing.
- Specific VA business line requirements.
- Additional community characteristics (e.g., state-wide directives, county-wide/city directives, etc.).

## Essential Workplace Standards and Principles

VA is committed to addressing essential work requirements consistent with best public health practices. The Department's paramount concern is the health and safety of all its employees, on-site contractors and individuals interacting with the VA workforce. VA Administrations and Staff Offices adhere to the latest [CDC guidance](#) and established public health best practices, based on evolving understanding of the pandemic. VA will reassess standards and principles in this document over time, as conditions warrant.

### VA Health and Safety

Before employees return to workplaces, VA prioritizes the safety of its workforce while considering any staffing shortages and assessing the criticality of certain positions for implementing COVID-19 response efforts in accordance with Office of Personnel Management (OPM) guidance.

### *Telework and Workplace Flexibilities*

VA continues to maximize telework whenever possible to meet mission requirements and during widespread community transmission, regardless of location, in accordance with *VA Handbook 5011, Part II, Chapter 4*. VA also provides telework flexibilities to all eligible employees with family care challenges due to COVID-19 (such as school and daycare closures) and those within populations that the CDC has identified as being at higher risk for serious complications from COVID-19.<sup>1</sup> VA Administrations and Staff Offices do not require certification by a medical professional and accept self-identification by employees who are in one of these populations. Telework guidance and resources are available on VA's [telework intranet site](#).

As conditions change, VA will review, and revise telework policies and agreements as necessary. In general, an employee is eligible to participate in the telework program when the following criteria are met:

- Occupy a suitable position.
- Have a performance rating of at least Fully Successful or equivalent.
- Has not been officially disciplined for being absent without permission for more than five days in any calendar year.
- Has not been officially disciplined for violations of subpart G of the Standards of Ethical Conduct of Employees of the Executive Branch for reviewing,

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<sup>1</sup> Vulnerable populations include adults 65 and older and people of any age who have serious underlying medical conditions. Other at-risk populations include pregnant people, people experiencing homelessness and people with disabilities. Refer to the [CDC website](#) for additional guidance.



downloading, or exchanging pornography, including child pornography, on a Federal Government computer or while performing official Federal Government duties [Public Law 111-292; 5 U.S.C. § 6502(a)(2)(A)(B)].

Suitability is based on the functions and duties of the positions. Telework criteria may be found in *VA Handbook 5011, Part II, Chapter 4, Paragraph 7*. The minimum requirements include but are not limited to:

- Work activities must be portable and can be performed effectively outside the traditional office location.
- Job tasks are quantifiable or primarily project oriented.
- Contact with other employees, the supervisor or manager, and serviced clientele is predictable and normally scheduled.
- Computer technology needed to perform work off-site is currently available or can be acquired.

In addition to telework, VA utilizes other HR flexibilities in accordance with OPM guidance, such as Weather and Safety Leave, approval of other paid leave, flexible work schedules (e.g., maxi-flex) and new work arrangements to support mission-critical services, while balancing the health and safety of the workforce. HR guidance, frequently asked questions (FAQs) and other resources are available on VA's [HR Emergency Resource Center intranet site](#). VA also continues to maintain information technology (IT) capacity to assure access to, and the security of, VA's systems supporting telework.

### *Communications with Workforce and Key Stakeholders*

Successful implementation of this framework will require frequent messaging to VA employees, contractors, visitors and key stakeholders, both nationally and locally. VA Administrations and Staff Offices should consult the VA Charting the Course Communications Plan on the [Charting the Course intranet site](#) and develop business-line specific communications toolkits, as needed, to provide quick and direct updates to the workforce.

VA will provide employees and the appropriate union representatives with advance notice and guidance before returning to the physical workplace. VA Administrations and Staff Offices should coordinate any such communications with appropriate HR, equal employment opportunity and general counsel officials to address compliance questions including Department requirements pursuant to collective bargaining agreements and employee requirements regarding return-to-work directives.

VA Administrations and Staff Offices should plan for proactive and iterative union engagement and continue to be transparent with information provided to labor organizations as practicable. Organizational changes that trigger labor obligations will require those obligations be met at the appropriate organizational level. Any references within this document found to conflict with existing bargaining agreements shall defer to



those labor agreements. VA will follow existing labor contracts, as appropriate, with respect to PPE, union participation on local safety committees and testing of employees who have a reasonable belief that they were exposed to COVID-19.

### *VA COVID-19 Coordination Team*

The Department is standing up the VA COVID-19 Coordination Team (CCT) to include representatives from the executive leadership team and working level staff from VA Administrations, Staff Offices and experts from HR, occupational safety and health, general counsel and public health fields. The CCT is responsible for sharing information and developing coordinated Department-wide workplace safety guidance in collaboration with the [Safer Federal Workforce Task Force](#), OPM, CDC, OSHA and GSA.

The CCT will meet regularly to review and update COVID-19 workplace safety plans and conduct assessments establishing, implementing and monitoring compliance with safety protocols and determinations of on-site work and telework. VA will post additional information about the CCT on the [Charting the Course intranet site](#). The CCT will report to the VA COVID-19 Senior Leader Team, which manages Department-wide non-medical COVID-19 preparedness and response initiatives. The CCT will provide updates as part of VA's critical information requirements and provide briefings to the COVID-19 Senior Leader Team as needed.

### *Face Masks Requirements*

All on-duty or on-site Federal employees, on-site Federal contractors and other individuals in Federal buildings or on Federal lands must wear face masks, maintain physical distance **and** adhere to other public health measures as provided by [CDC guidelines](#). Masks must cover the nose and mouth, fit snugly around the nose and chin with no large gaps around the sides of the face and adhere to [CDC](#) and [OSHA](#) guidance. Novelty/non-protective masks, masks with exhalation valves or vents, or face shields worn without a face mask are not substitutes for masks.

Signage requiring masks must be posted conspicuously at each public entrance on VA properties and communicated regularly to the workforce and visitors. In general, contract guards or Federal Protective Service (FPS) Protective Security Officers (PSOs) may prohibit entry of persons who are not in compliance with mask requirements at entry control points. When a supervisor observes an employee at the workplace not wearing a mask, the supervisor should remind the employee of the Federal government-wide policy requiring mask wearing in Federal buildings. If an employee raises a disability or religious issue as the reason for not wearing a mask, the supervisor should follow [VA's process](#) to review and consider what, if any, reasonable accommodation should be offered in accordance with existing [Equal Opportunity Employment Commission guidance](#). If an employee is not eligible for an accommodation and does not comply with the mask requirement, VA organizations may

pursue appropriate disciplinary action in consultation with local HR servicing offices and general counsel officials.

VA ensures masks are available for employees, contractors and visitors at work sites and follows CDC guidance on the design, use and maintenance of such masks. When appropriate, VA also provides PPE for specific frontline workers in a central location depending on the risk of exposure.<sup>2</sup> VA will continue to follow related guidance in place for healthcare settings. Masks do not provide the same level of protection as medical face masks or respirators and should not replace specific PPE requirements.

Masks must be worn in any common areas or shared workspaces (including open floorplan office space, cubicle embankments, conference rooms and while in VA vehicles). Masks should be worn in outdoor shared spaces when physical distancing cannot be maintained. VA Administrations and Staff Offices may provide for exceptions consistent with CDC guidelines, for example, when an individual is alone in an office with floor to ceiling walls and a closed door or for a limited time when eating or drinking and maintaining distancing in accordance with CDC guidelines. Requests for exceptions to the mask requirement must be submitted in memorandum format with a justification, signed by the responsible Under Secretary, Assistant Secretary or Other Key Official. All exceptions must be approved by the Secretary of VA (SECVA) in consultation with the VA COVID-19 Coordination Team.

### *Testing, Contact Tracing, Symptom Monitoring and Quarantine*

All VA facilities must have a process in place to screen for signs/symptoms (see [CDC's Symptoms of Coronavirus](#)) or to test employees and visitors for COVID-19. In collaboration with GSA, VA will continue to encourage commercial lessors to implement the same screening requirements implemented in buildings in the National Capital Region. Symptom screening may vary by facility with further guidance provided in VA Administration and Staff Office Annexes. VA organizations may ask employees to self-screen for symptoms or other risk factors of COVID-19 daily or before entering a facility. If a facility is using screening questionnaire signage, the signage must be posted at the main entrance with a statement not to enter the facility if they answer "yes" to any of the questions posted on the signage. VA will also expand current [clinical](#) and [non-clinical](#) screening applications for mobile devices to ensure all VA Administrations and Staff Offices have access to tools for both clinical and non-clinical settings.

The CCT will collaborate with VA Administrations and Staff Offices to develop procedures to support contact tracing and identify, track and manage COVID-19 cases. If COVID-19 cases occur within a specific building or work setting, it is the responsibility of the appropriate local designees to determine next steps in consultation with local public health officials. VA will incorporate pending CDC plans for testing the Federal workforce and any additional contact tracing guidance as provided.

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<sup>2</sup> Generally, contract guards or FPS PSOs may not be assigned other duties, such as issuing face masks, since these other duties are a distraction from their core protection and security responsibilities.

If VA employees, onsite contractors or visitors are not feeling well, they are instructed to not enter the workplace. All VA employees and contractors working on site and visitors will be asked to regularly complete symptom screening upon entry into the workplace. VA will issue additional screening guidance in the Annexes and leverage available IT screening applications. Any individual who develops any symptoms consistent with COVID-19 during the workday must immediately isolate, notify their supervisor and promptly leave the workplace. Supervisors should work with their local HR Servicing Office for additional guidance and advice.

Any individual with suspected or confirmed COVID-19 is advised to isolate, in accordance with [CDC guidelines](#), and in compliance with local laws/regulations. VA will issue additional guidance in associated Annexes for developing protocols to ensure appropriate public health authorities are notified of cases (refer to CDC's [Health Department Directories](#) and National Association of County and City Health Officials [Directory of Local Health Departments](#)). Personnel who have had close contact with someone who has tested positive for COVID-19 are instructed to report their status to their supervisor and follow [CDC](#) and local guidance for quarantine practices.

Individuals who have been fully vaccinated with the COVID-19 vaccine that have been exposed to someone with confirmed or suspected COVID-19 are not required to quarantine if they meet [certain criteria](#). However, they should continue to follow other safety measures including social distancing, hand hygiene, cleaning and disinfection, wearing masks and wearing PPE (if applicable to job duties).

### *Travel Restrictions for Personal and Official Business*

VA employees are instructed to adhere strictly to CDC [guidelines](#) before, during and after travel, regardless of whether the travel is personal or for official business. Travel is mission-critical (or essential) when it is for the purpose of carrying out the mission of VA. The following criteria should be used in determining if travel is mission-critical:

- The purpose of the travel is to perform essential duties related to the protection of life and property;
- Travel is required by statute or contract;
- Travel is for systems or equipment inspections that are essential to security, safety or mission support;
- Travel is required for meetings or trainings by a grant or to maintain grant funding;
- Travel is for training to meet certification or licensing requirements or to maintain critical functional or occupational competencies; or
- The travel is for activities essential to national security.

All travel requests must be closely reviewed to ensure approval supports providing for the safety and welfare of the workforce or providing care and benefits to Veterans. Review should be completed by the employee's supervisory chain of command and following procedures established by VA Administration or Staff Office leadership.

Absent these procedures, employees should follow locally established procedures in determining if travel is mission-critical.

Employees should carefully assess travel risk prior to travel, wear a mask during all portions of a trip, maintain physical distancing from non-household members, maintain good hand hygiene, get tested for COVID-19 three to five days after travel and stay home after [higher-risk travel](#) before returning to the workplace. Following [CDC guidance](#), employees should stay home and self-quarantine for seven full days after travel, even if the COVID-19 test results are negative. Employees who do not get tested should stay home and self-quarantine for 10 full days after travel.

VA employees are asked to consult [CDC guidelines](#) and [GSA resources](#) carefully before traveling. If individuals are entering the United States, they must present a negative COVID-19 test, taken within three calendar days of departure or proof of recovery from the virus within the last 90 days. VA is currently updating its travel restriction guidance (last updated in November of 2020 and available on VA's [HR intranet site](#)) and will disseminate it widely to the workforce.

Employees should be aware that they may be required to stay at home for a period of time after official or personal travel before they are allowed to return to the workplace. Employees should consult with their supervisor to determine whether they may telework or request leave. Employees should follow [CDC guidance](#) and the orders in place in the State in which they are traveling to and reside in to determine whether quarantine is required.

### *Confidentiality*

All medical information collected from VA personnel, including test results and any other information obtained as a result of testing and symptom monitoring, will be treated confidentially in accordance with applicable law and accessible only by those with a need to know in order to protect the health and safety of personnel. VA has identified a point of contact for all questions relating to personal medical data and will include this information in the COVID-19 HR Frequently Asked Questions posted on VA's [HR Emergency Resource Center intranet site](#).

## VA Workplace Operations

All VA Administrations and Staff Offices are responsible for ensuring they have procedures for supplying hygiene supplies, maintaining facility cleanliness, building airflow/ventilation, displaying consistent signage and maintaining physical distancing in accordance with [VA Directive 7700](#) and the [Department's Occupational Safety and Health Program](#). VA's Designated Agency Safety and Health Official, in consultation with the VA COVID-19 Coordination Team, will review and promulgate additional Department-level guidance and strategy as needed.

## *Occupancy, Physical Distancing, Shared Spaces and Elevators*

VA's administrative, non-healthcare facilities are operating below 25% of normal occupancy standards at any given time during periods of high community prevalence or transmission when it does not interfere with the provision of direct services to Veterans. Levels of community transmission are available on [state, tribal, local and territorial health department websites](#) and on the [CDC's COVID Data Tracker County View](#). The Department will centrally track the operating status of facilities across the Nation and regularly assess compliance with the occupancy limits. Most of the VA workforce, outside of the healthcare field, continue to maximize telework and digital technology to provide benefits and services. Employees that must report to worksites due to mission-critical, public-facing requirements are utilizing staggered work schedules and cohort-based scheduling to limit occupancy in facilities.

Requests for exceptions to the occupancy guidance must be submitted in memorandum format with a justification, signed by the responsible Under Secretary, Assistant Secretary or Other Key Official. All exceptions must be approved by the SECVA in consultation with the VA COVID-19 Coordination Team and Safer Federal Workforce Task Force. When reviewing exceptions, the SECVA will consider the impact to providing direct services and benefits to Veterans, use of the facility, type and size of facility, levels of community transmission, safety protocols in place to minimize risk/transmission to employees, etc.

The decision to open or close a Federally owned or leased building under GSA's authority are, by regulation, made by the building's Designated Official (the chair of the building's Facility Security Council), in consultation with the building manager and law enforcement organization responsible for protecting the facility. Beyond the "open or close" determinations, VA may make decisions concerning utilization of specific space (e.g., floor, office, suite, etc.) within any multi-occupant facility that it inhabits.

To the extent practicable, individuals must always maintain distance of at least six feet from others, consistent with CDC guidelines, including in offices, conference rooms and all other communal spaces. **Distancing is not a substitute for wearing a mask. Individuals should maintain distance and properly wear masks.** VA will implement one-way walkways where practicable, reconfiguration of workspaces, assigned workstations or office assignments and other mitigation strategies to minimize interactions.

As employees and contractors return to worksites to a greater degree, VA will issue specific guidance in associated Annexes and return-to-work plans around the disinfecting of shared tools and equipment by users after each use or anytime the equipment is used by or transferred to a new person. This includes phones, computers, and other communication devices, kitchen equipment and other office equipment. VA provides disinfecting wipes, as necessary, and has installed visual markers and signage to promote physical distancing within common spaces.



VA occupational health professionals have assessed elevators to determine safe occupancy and posted occupancy limits. Individuals must wear masks in elevators and in elevator lobbies. VA strongly encourages the use of stairs by those who are physically able. Signage and risk assessment charts have been posted to explain current procedures.

### *Visitors to VA Facilities*

The number of visitors to VA workplaces should be minimized and efforts should be made to conduct visits virtually where possible. VA Administrations and Staff Offices should limit in-person conferences and events to the maximum extent possible. VA continues to provide the necessary IT capacity to facilitate virtual communication. In-person conferences and events must be reviewed on a case-by-case basis through each VA organization's chain of command to determine whether to cancel or proceed (see latest HR Emergency Preparedness FAQs on VA's [HR Emergency Resource Center intranet site](#)). Any visitor should be screened, tested if appropriate, and asked to answer a symptom questionnaire before entering the workplace. Mask requirements apply to all visitors to VA or leased facilities.

### *Staggered Work Times and Cohort-Based Scheduling*

VA Administrations and Staff Offices use telework where feasible, staggered work times, alternating schedules, rotating tours of duty and cohort-based scheduling to reduce density, minimize traffic volume in common areas and reduce contact among work units. When considering new work arrangements, VA Administrations and Staff Offices balance operational constraints with employee needs, such as family care and transportation. VA issued guidance (available on the VA's [HR intranet site](#)) on September 29, 2020, that communicated the various types of alternative work schedules available for employees and how premium pay interacts with these work schedules.

### *Environmental Cleaning and Hygiene*

VA has implemented enhanced cleaning and disinfection services in common use/high touch/high density spaces, such as lobbies, restrooms, elevators and stairwells in accordance with [CDC](#), [GSA](#) and [DOL](#) guidance. Refer to the Environmental Protection Agency's [List N: Disinfectants to Coronavirus \(COVID-19\)](#) for a list of products that kill COVID-19 when used according to the label directions. Office space in regular use is cleaned regularly and in accordance with CDC guidelines.

VA provides wipes and gloves to clean workstations and related personal property. VA prioritizes the availability of supplies and cleaning services to services that are the most public-facing, as well as those most critical to implementing COVID-19 response efforts. VA is also installing plexiglass shields, standing dividers or other barriers where appropriate. VA provides hand sanitizer stations at building entrances and throughout workspaces with Food and Drug Administration approved hand sanitizer (see [CDC's guidance on how to select and use hand sanitizer](#)). Personnel are encouraged to

exercise proper hand hygiene with soap and water or hand sanitizer with at least 60 percent alcohol.

If an employee or contractor tests positive for COVID-19, VA ensures all areas the individual traversed are cleaned and disinfected based on contact tracing data gathered by the impacted organization in accordance with [CDC](#) and [GSA](#) guidance.

### *Ventilation and Air Filtration*

To the maximum extent feasible, VA optimizes indoor ventilation to increase the proportion of outdoor ventilation, improve filtration and reduce or eliminate recirculation. VA will identify and implement improvements in accordance with [CDC](#) guidance in consultation with building management staff and/or GSA as supplies or equipment is available.