

Daily Cleaning Checklist for Office Space

- Ensure hand sanitizer stations are filled with hand sanitizer and surface wipes
- Remove any reading materials, including magazines or newspapers, from reception or waiting areas
- Clean and sanitize chairs (top and under) in conference rooms and any other shared areas
- Daily vacuuming of all common areas, offices, hallways, and conference rooms
- Clean and sanitize conference room surfaces, phones, screens
- Sanitize following commonly touched areas every four (4) hours
 - Doorknobs and stairway railings
 - Light switches
 - Elevator buttons and railings
 - All common area countertops and surfaces
 - Common area touch screens
 - Break area coffee, water dispensers, refrigerator and cabinet handles
 - Areas surrounding printing/copying station
 - Inventory closets
 - Restrooms
- Between shifts/visitors:
 - Re-sanitize conference rooms between visitors/meetings, including chairs, door handles, phones, pens, surfaces, and other touch-areas
 - Re-sanitize desk, keyboard, phone, pens, desk surfaces, and chair at any workstation used for multiple shifts of people during the day (such as reception or security desks)

1. This content has been informed or adapted from CDC and WHO guidelines, from online conversations with the Venture and Business Community, publicly available information, including original content in the [Safe Work Playbook by Lear Corporation](#) and www.lifelabslearningcorporation.com, Newmark Knight and Frank <http://www.ngkf.com/> and generously shared online.
2. This is not legal advice
3. The author of this document made every effort to remove confidential/company identifying information before distribution. Please notify the author if any such information was missed so that updates can be made

Data Collection Form – Symptomatic Individuals at the Workplace

Date: _____

Time: _____

Symptomatic Individual's Name: _____

- Visitor
- Employee
- Contractor
- Other _____

Work Site Address / Building Number / Floor: _____

Symptoms noticed:

- Temperature >38°C (100.40F) or higher
- Shortness of breath, difficulty breathing
- Cough
- Running nose Sneezing Muscle Pain
- Tiredness
- Chills
- Repeated shaking with Chills
- Headache
- Sore Throat
- New Loss of Taste or smell

→ Check www.cdd.gov guidelines for additional symptoms as these are being updated often

→ Refer to <https://www.osha.gov/SLTC/covid-19/> for guidance regarding privacy and information retention.

Time of symptom on-set: _____

Time and location of isolation: _____

Where referred to: _____

Names of Employees Symptomatic Individual Interacted within Last 72 Hours:

Notes:

Signature of Symptomatic Individual _____

Name of reporter: _____

Signature of Reporter _____

