



TOWN OF UPTON

Board of Health Department

1 Main Street – mail slot 3, Upton, MA 01568
Telephone: 508-529-6813 Fax: 508-529- 0010 email: dtiernan@uptonma.gov

May 19,2020

To Our Local Establishments:

We are pleased that the MA Governor has given you approval to once again commence your business effective 5/25/2020! This news however comes with some restrictions so that each business reopens as safely as possible. Below, we have listed the mandatory requirements that must be implemented in order for you to reopen. (Click on the highlighted items below to view the documents and posters.)

- **Self-certification** – A written control plan is required for self-certification. We have included a template that satisfies this requirement, however you may develop your own if it will meet all requirements as indicated in the template
- **Display a Compliance attestation poster** – A poster that customer facing businesses are required to print, sign, and post in an area within the business premises that is visible to workers and visitors. This poster must be present to all businesses that have face to face customers.
- **Display Employer and Worker posters** – These posters must be displayed within your business premises to describe the rules for maintaining social distancing, hygiene protocols, and cleaning and disinfecting

For your convenience, we have attached the required documents and posters you may utilize. You are not required to return the self-certification back to us or to the state, however, if our office receives a complaint, you will be asked to produce the documents and posters for our review.

You are not *required* to reopen your establishment and if you are unable to follow the safety protocols at this time, you may not do so. Any establishment that opens and *fails* to follow the safety requirements will be subject to verbal warnings that will escalate to fines and revocation of your local permit if non-compliance continues.

Should you need further clarification or assistance, please contact us at 508-529-6813 or you may contact the Department of Labor Standards directly at 508-616-0461 or safepublicworkplacemailbox@mass.gov.

Upton Board of Health



TEMPLATE (I/II)

COVID-19 Control plan

All businesses in the state of MA must develop a written control plan outlining how its workplace will comply with the mandatory safety standards for operation in the COVID-19 reopening period. This template may be filled out to meet that requirement. Control plans **do not** need to be submitted for approval but must be kept on premise and made available in the case of an inspection or outbreak.

All individually listed businesses must complete a control plan, even if the business is part of a larger corporation or entity.

BUSINESS INFORMATION | please provide the following information

Business name: _____ Check if part of a larger corporation

Address: _____

Contact information (Owner/Manager): _____

Contact information (HR representative), if applicable: _____

Number of workers on-site: _____

SOCIAL DISTANCING | check the boxes to certify that you have:

Ensured that all persons, including employees, customers, and vendors remain at least six feet apart to the greatest extent possible, both inside and outside workplaces

Established protocols to ensure that employees can practice adequate social distancing

Posted signage for safe social distancing

Required face coverings or masks for all employees

Implemented additional procedures. Please describe them here: _____

HYGIENE PROTOCOLS | check the boxes to certify that you have:

Provided hand washing capabilities throughout the workplace

Ensured frequent hand washing by employees and provided adequate supplies to do so

Provided regular sanitization of high touch areas, such as workstations, equipment, screens, doorknobs, restrooms throughout work site

Implemented additional procedures. Please describe them here: _____



TEMPLATE (II/II)

COVID-19 Control plan

All businesses in the state of MA must develop a written control plan outlining how its workplace will comply with the mandatory safety standards for operation in the COVID-19 reopening period. This template may be filled out to meet that requirement. Control plans **do not** need to be submitted for approval but must be kept on premise and made available in the case of an inspection or outbreak.

All individually listed businesses must complete a control plan, even if the business is part of a larger corporation or entity.

STAFFING & OPERATIONS check the boxes to certify that you have: _____

Provided training for employees regarding the social distancing and hygiene protocols

Ensured employees who are displaying COVID-19-like symptoms do not report to work

Established a plan for employees getting ill from COVID-19 at work, and a return-to-work plan

Implemented additional procedures. Please describe them here: _____

CLEANING & DISINFECTING check the boxes to certify that you have: _____

Established and maintained cleaning protocols specific to the business

Ensured that when an active employee is diagnosed with COVID-19, cleaning and disinfecting is performed

Prepared to disinfect all common surfaces at intervals appropriate to said workplace

Implemented additional procedures. Please describe them here: _____
