

# Viral Response Module

## Reference Guide

v2021-2022

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# Viral Response Module 2021-2022:

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# Introduction

The global spread of COVID-19 impacted nearly every aspect of our lives. In its wake, mitigating disease transmission within buildings has become a paramount concern—and a global imperative greatly accelerating the real estate industry's focus on health within the built environment.

Acute COVID-19 crisis has provided a prime opportunity to sustain focus on health-promoting design and operations—looking well beyond the current moment, to after the pandemic subsides. While the direct impetus for creating Fitwel's new Viral Response (VR) module was to prepare buildings and people for the emergence of novel contagious diseases, VR strategies also mitigate the transmission of other common infectious respiratory disease such as influenza and the common cold.

Fitwel's Viral Response (VR) module provides an annual, third-party certification for companies to mitigate the risk of contagious disease transmission, with a specific focus on infectious respiratory diseases, based on the very latest research. The module provides a set of evidence-based approaches representing best practices specific to the mitigation of diseases transmitted through respiratory droplets, and offers an opportunity for third-party certification and recognition. The VR module additionally provides detailed implementation guidance and turnkey policy templates that can be readily adapted and adopted at the corporate level in order to support a comprehensive viral mitigation strategy.

In line with Fitwel's mission of building health for all®, the VR module can be applied across a wide array of companies and their assets, regardless of age or location, emphasizing practical, cost-effective measures to ensure strategies remain effective, while still equitable and within reach.

The annual update to the Fitwel Viral Response Module (v2021-22) integrates the very latest research regarding contagious disease transmission in the built environment. Given the rigor of the science behind v2020-21, this update does not introduce new strategies. Instead, it provides clarifications and expanded pathways for achieving strategies, as well as additional policy templates to support implementation. The VRM remains a flexible tool to safeguard building occupants from contagious diseases caused by pathogens ranging from a novel virus, like the one that led to the COVID-19 pandemic, to better known viruses, like influenza A and B, which cause seasonal flu outbreaks.



## Development

Developed in partnership with leading academic advisors and industry experts, the Viral Response module operationalizes the very latest in public health research and synthesizes expert academic insights related to the transmission of infectious respiratory diseases.

Public health experts from leading institutions advised the Fitwel team on the development of the VR module to ensure it was based on the best available science to date. During multiple convenings throughout the VR development process, academic advisors provided feedback on targeted questions and shared broad insights that helped strengthen and enhance the impact of the module.

A parallel team of leading real estate industry advisors, representing a diversity of portfolios, geographies, and industries took part in early prototyping efforts to ensure the VR module's applicability and scalability within the industry.

The VR module released to the market represents the most comprehensive, up-to-date knowledge on contagious disease, vetted by subject matter experts, and tested by a leading cross-section of real estate advisors. Fitwel's operator, the Center for Active Design (CfAD), provides annual third-party certification of policies and protocols, and will annually update requirements in line with evolving science.

## Certification Process

The VR module establishes a unique, multi-step process to help companies adopt rigorous viral mitigation policies and practices and apply them at scale. The entire VR module certification process is hosted on Fitwel's Portal.

### Viral Response Certification at the company level

Viral Response Certification is the first step in the multi-step process, applies to a user-defined "entity," which encompasses any collection of assets that have consistent policies and practices—from a single building, to a regional portfolio, to an entire company. A company may choose to achieve separate certifications for multiple entities if internal policies and practices differ by geography, asset type, or another factor.



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**Step 1**  
**Viral Response Certification**  
(Entity-wide policies and practices)

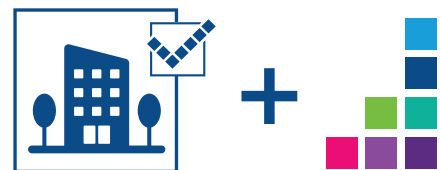
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**Step 2**  
**Viral Response Approval**  
(Asset-level)

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**Step 3**  
**Fitwel building Certification**  
(Asset-level)

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## INDUSTRY ADVISORS

Industry-leading companies who helped prototype the module include BentallGreenOak, Harrison Street, QuadReal Property Group, Tishman Speyer, Triovest Realty Advisors, and Vornado Realty Advisors.



HARRISON STREET



TISHMAN SPEYER



VORNADO  
REALTY TRUST

## ACADEMIC ADVISORS

Academic Advisors reflect a diverse array of health expertise from world-renowned institutions.

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## Viral Response Approval at the asset level

Once Viral Response Certification is achieved at the entity level, companies can demonstrate application across specific assets. In order to receive Viral Response Approval, an asset must fully align with all specified policies and practices achieved in the relevant entity's Viral Response Certification.

## Recertification

The VR module requires annual recertification, unlike Fitwel's standard 3-year certification period for buildings, in order to account for more frequent public health research on the topic of communicable and respiratory disease, especially in light of new COVID-19 research.

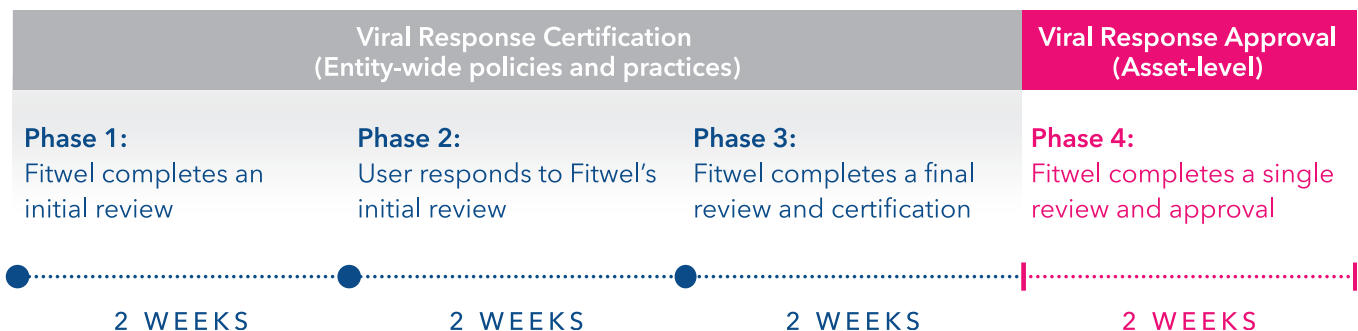
## Alignment with Fitwel Building Scorecards

The VR module serves as a natural entry point for advancing full project certification using a Fitwel Building Scorecard.

The VR module and Fitwel's building scorecards are seamlessly integrated, and the Fitwel Portal is designed to pre-populate module documentation within a relevant building scorecard, creating a streamlined and efficient process for assets looking to achieve dual certification.

## Review Timeline

For a Viral Response Certification of an entity, the process takes six weeks to complete from time of submission, involving one round of Fitwel reviewer feedback. Once an entity is Viral Response Certified, submitters may choose to apply that certification to any number of corresponding assets. Applying a module to an asset to become Viral Response Approved takes two weeks to complete, and is seamlessly integrated into the building scorecard certification process on the portal for those assets separately undergoing building certification.





## Module Structure

The VR module addresses viral transmission comprehensively, covering three key topic areas:

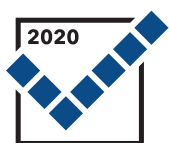
- **Enhance Indoor Environments:** This section focuses on building mechanical systems, protocols, and policies to reduce disease spread.
- **Encourage Behavioral Change:** This section focuses on building interventions that impede viral spread by prompting individual health behaviors and decision making.
- **Build Occupant Trust:** This section focuses on maximizing trust and resiliency via communications, occupant supports, preparedness planning, and collaboration.

The VR module introduces **minimum requirements** that are necessary to achieve an effective viral response. Minimum requirements are compulsory and must be achieved in order to submit for certification. Minimum requirements are based on scientific evidence that reflects the need for multi-faceted approaches as well as implementation rigor in order to effectively mitigate the spread of contagious disease.

In addition to introducing minimum requirements, the VR module introduces the concept of **dependent strategies**, which are strategies that enhance the impact of an achieved parent strategy, helping users expand health impacts to achieve the highest level of certification: Viral Response Certification with Distinction.

Strategies within the VR module are weighted according to their strength of evidence and level of health impacts, using a 100% scale. An entity achieving a score of 70-89% will be recognized as Fitwel Viral Response Certified. Entities achieving a module score of 90% or above will be recognized as Fitwel Viral Response Certified *with Distinction*. When an entity is certified and applies their module to a specific asset, that asset must align with **all** relevant strategies in order to become Fitwel Viral Response Approved on that asset. When an entity is certified *with Distinction*, and applies their module to a specific asset, that asset must align with **all** relevant strategies in order to become Fitwel Viral Response Approved with Distinction on that asset.

Certified entities and approved assets will both receive a digital decal, certificate, and letter of recognition, along with marketing and logo/brand guidelines. In addition, approved assets are eligible to order a physical decal for installation on site (for a separate fee). A variant of the physical decal for Viral Response Approved assets will also be made available for projects that separately certify a building using Fitwel at 1 star or higher and wish to signify VR module approval on a Fitwel building certification plaque.



**Fitwel®**  
Viral Response  
Certified



**Fitwel®**  
Viral Response  
Certified



# SECTION 1

## Enhance Indoor Environment

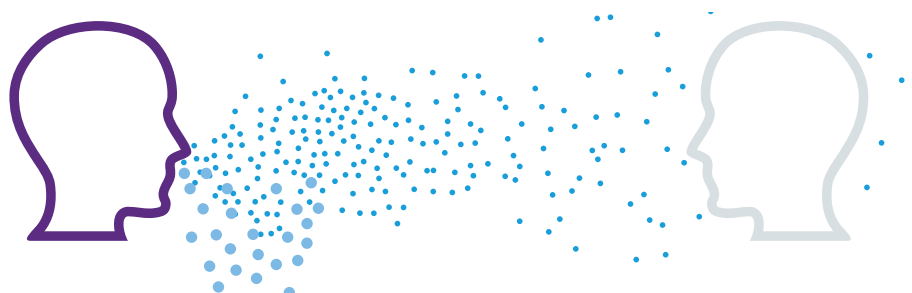
Optimizing the indoor environment for health plays a vital role in defending against harmful viral and bacterial pathogens, especially those that can be transmitted through the air or picked up from surfaces. In Section 1 of Fitwel's Viral Response module, the strategies offer guidance on how to optimize the indoor environment to mitigate risk of infection, while also benefiting other chronic conditions, such as asthma.

The COVID-19 pandemic generated heightened awareness of the importance of indoor environments, with epidemiologists discovering that a vast majority of outbreaks impacting three or more people were occurring indoors rather than outdoors.<sup>[1]</sup> Infectious respiratory diseases can spread through the air we breathe and the surfaces we touch, elevating the importance of maintaining high quality indoor air and clean surroundings. Aerosol transmission occurs when infectious material remains suspended in the air for long periods of time and travels more than one meter from its source. Meanwhile surface-to-person transmission, also known as fomite transmission, occurs when a person touches a surface where respiratory

secretions carrying infectious material have landed, and then touches their mouth, nose, or eyes.

While the risk of aerosol and fomite transmission are highest in indoor environments, these risks can be significantly mitigated through optimizing ventilation and filtration systems and regularly cleaning and disinfecting high-touch surfaces and frequently-trafficked areas.

Airborne infectious particles can accumulate within indoor environments, especially when there is poor airflow and high levels of recirculated air. A review of 40 original articles found a conclusive association



**Small droplets (<5  $\mu\text{m}$ ) spread through air as a cloud, remain in the air for long periods of time, and can be carried long distances.**

Source: Tang, J. W., et al. (2006). Factors involved in the aerosol transmission of infection and control of ventilation in healthcare premises. *Journal of Hospital Infection*, 64, 100-114.

[1] Qian, H., Miao, T., Liu, L., Zheng, X., Luo, D., & Li, Y. (2020). Indoor transmission of SARS-CoV-2. *medRxiv*.

between ventilation and the spread of infectious disease through the air. Specifically, findings indicate that higher ventilation rates are associated with decreased disease spread.<sup>[2]</sup> One model exploring how ventilation could prevent aerosol transmission suggests that for diseases transmitted by droplet nuclei, such as influenza, having good ventilation would be as effective as vaccinating 50-60% of the population in a poor-ventilation scenario.<sup>[3]</sup>

Air filtration is another means of improving air quality indoors. Rather than exchanging indoor air for outdoor air, filtration can remove contaminants from the air. Evidence suggests that by removing microscopic contaminants from the air such as dust, vapors, bacteria, fungi, and viral particles, filtration can support mitigation of viral transmission. One modeling study predicts that the risk of infection in a 500 square meter office with 3 meter ceiling and 25 regular occupants using MERV 13 or greater levels of filtration is 31-47% lower than in a similar space without any filtration.<sup>[4]</sup>

Establishing a legionella water management plan is another tactic that is vital to supporting high quality indoor air. When usage of water supplies is drastically reduced or discontinued for a period of time (such as during recent COVID-19 shutdowns), legionella growth can occur due to water stagnation and disrupted disinfectant use. When this occurs, water droplets carrying the legionella bacteria are released into the air and can be inhaled by building occupants. Inhalation of this bacteria can result in an outbreak of Legionnaires' disease. A legionella water management plan enables monitoring and maintenance of a water system to prevent Legionella growth, reducing exposure to harmful bacteria and promoting high-quality indoor air.

Cleaning, disinfecting, and ongoing maintenance also play a major role in creating a high-quality indoor environment, and are particularly important in mitigating risk of surface-to-person disease transmission. Most viruses can be inactivated by a range of disinfectants including safer products with active ingredients such as ethanol, hydrogen peroxide, and l-lactic acid.<sup>[5][6]</sup> It is important to prioritize the cleaning of high-touch areas, such as tables, doorknobs, light switches, countertops, handles, desks, phones, keyboards, toilets, faucets, and sinks. Products with active ingredients including hydrogen peroxide, ethanol, citric acid, L-lactic acid, caprylic acid, and thymol, have been found to be safer than other disinfectants that can have unintended health consequences, especially for those with asthma.<sup>[7]</sup>

People spend a substantial amount of their time indoors—up to 90% of their time in some parts of the world.<sup>[8]</sup> As such, optimizing indoor environments plays an essential role in mitigating transmission of contagious diseases, and the strategies in Section 1 serve as a guide for enhancing those environments.

- **Establish an Enhanced Indoor Air Quality Policy**
- **Establish a Humidity Control Policy**
- **Establish an Enhanced Indoor Air Quality Testing or Monitoring Protocol**
- **Establish a Legionella Water Management Policy**
- **Establish an Enhanced Cleaning, Disinfecting, and Maintenance Policy**
- **Establish an Enhanced Green Purchasing Policy**

- 
- [2] Li, Y., et al. (2007). Role of ventilation in airborne transmission of infectious agents in the built environment – a multidisciplinary systematic review. *Indoor Air*, 17(1), 2-18.
- [3] Smieszek, T., Lazzari, G., & Salathé, M. (2019). Assessing the Dynamics and Control of Droplet- and Aerosol-Transmitted Influenza Using an Indoor Positioning System. *Scientific Reports*, 9(1).
- [4] Azimi, P., & Stephens, B. (2013). HVAC filtration for controlling infectious airborne disease transmission in indoor environments: Predicting risk reductions and operational costs. *Building and Environment*, 70, 150-160.
- [5] Rewar, S., Mirdha, D., & Rewar, P. (2016). Treatment and Prevention of Pandemic H1N1 Influenza. *Annals of Global Health*, 81(5), 645.
- [6] United States Environmental Protection Agency. (2020). List N: Disinfectants for Use Against SARS-CoV-2 (COVID-19), retrieved from <https://www.epa.gov/pesticide-registration/list-n-disinfectants-use-against-sars-cov-2-covid-19>
- [7] Siracusa, A., et al. (2013). Asthma and exposure to cleaning products - a European Academy of Allergy and Clinical Immunology task force consensus statement. *Allergy*, 68(12), 1532-1545.
- [8] Klepeis, N. E., et al. The national human activity pattern survey (NHAPS): A resource for assessing exposure to environmental pollutants. Ernest Orlando Lawrence Berkeley National Laboratory. Retrieved from <https://indoor.lbl.gov/sites/all/files/lbnl-47713.pdf>



## 1.1 Enhanced Indoor Air Quality Policy

# Establish an Enhanced Indoor Air Quality Policy

### *Minimum Requirement Strategy*

*Points Allocated 8.64% / Alternative Compliance 7.73%*

## Rationale

An Enhanced Indoor Air Quality (IAQ) policy identifies areas for improvement in air quality and provides benchmarks to ensure air quality remains high over time contributing to mitigation of viral transmission and promotion of respiratory and mental health.

significantly reduce risk of airborne viral transmission by removing or diluting indoor airborne pollutants, such as viral particles. When not implemented the concentration of viral particles in the environment can increase considerably.

Strategy 1.1 is a Minimum Requirement because adequate ventilation and filtration has been shown to

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## Requirements

Establish and implement an enhanced Indoor Air Quality policy that:

1. is at least as rigorous as the Fitwel Enhanced Indoor Air Quality (IAQ) Policy (can be found on page 15 or downloaded at [www.fitwel.org/fitwel-standards](http://www.fitwel.org/fitwel-standards))
2. is included in either relevant leases or a tenant manual.

## Alternative Compliance

Establish and implement an indoor air quality policy that:

1. is at least as rigorous as all of the following sections of the Fitwel Enhanced Indoor Air Quality (IAQ) Policy (found on page 14 or can be downloaded at [www.fitwel.org/fitwel-standards](http://www.fitwel.org/fitwel-standards)):
  - Asset Type Applicability
  - Ventilation and Filtration
  - Managing Closures + Significant Reductions in Occupancy
2. is included in either relevant leases or a tenant manual.

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## Compliance Documentation

Submit all of the following:

1. the official qualifying indoor air quality (IAQ) policy.
2. an official statement detailing how the qualifying policy is shared with tenants.

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*For pursuit of Asset Approval, no additional documentation is required. Project teams must confirm the policy is implemented within the asset upon submission.*

Note:

- Official statements must be dated and on company letterhead.
- Official policies must include policy duration and be on company letterhead.

# Fitwel Enhanced Indoor Air Quality Policy

This document provides project teams with a policy that can be used as a template and adopted in full to comply with requirements of the Fitwel Enhanced Indoor Air Quality Policy. Project teams can either use the exact contents of this document to establish new policies, or update existing policies by adding any missing components from the below.

A qualifying enhanced indoor air quality (IAQ) policy must include the following:

## 1. Implementation

- ☐ when implementing the policy in a multi-tenant commercial or residential asset, the policy will apply to all areas and HVAC system elements under the control of the building management, including common elevator banks on tenant floors.
- ☐ when implementing the policy in a single tenant asset or a commercial interior asset, the policy will apply to all areas within tenant spaces and HVAC system elements under the control of the tenant. For HVAC systems that are controlled by the building management, the tenant must coordinate with building management to implement the qualifying IAQ policy.

## 2. Management and Maintenance

- ☐ Source Control:
  - Implement strategies to manage pollutant sources, for example:
    - properly sealing doors, floors, and windows,
    - regularly checking for and eliminating mold,
    - installing appliances so that they vent to the outside,
    - diluting and removing pollutants through ventilation.
  - Implement strategies to manage moisture, for example:
    - using moisture tolerant materials,
    - setting up systems to divert water away from the building.
  - Implement a building-wide smoke-free policy
  - Provide separate source ventilation for all areas that include the use or storage of chemical products that do not meet the below qualifying standards:
    - Green Seal
    - California Code of Regulations
    - Ecologo

☐ Housekeeping:

- Detail best housekeeping practices to improve the indoor air. Examples of best practices may include:
  - Maintenance of interior plants (watering, pruning, etc.) where necessary
  - Regular disposal of garbage and other waste
  - Hygienic storage of foods, including refrigeration where necessary
  - Prohibiting products or other sources of harmful or bothersome odors and contaminants.

### 3. Ventilation and Filtration

☐ Assessment

- Consult with a certified professional to assess the ventilation system and identify the following:
  - Ventilation needs based on occupancy levels
  - The air changes per hour capacity of the ventilation system
  - Opportunities to increase the outdoor air supply and decrease recirculation of air
  - Impacts of ventilation adjustments on energy use, thermal comfort, and maintenance needs
- Consult with a certified professional to assess the filtration system and identify the following:
  - The efficacy of current air filtration practices in removing particulates from the indoor air
  - Applicable strategies for increasing air filtration as needed

☐ HVAC Enhancements

- Ventilation
  - When spaces are occupied, align with ASHRAE ANSI standard, as applicable to the building and space(s)
    - 62.1 - 2019: Commercial Buildings
    - 62.2 - 2019: Residential Buildings



- When spaces are occupied, ensure implementation of **one** of the following ventilation approaches during a contagious disease outbreak as defined by the national, regional, and/or local public health authority:

<input type="checkbox"/> 30% higher ventilation levels than those outlined in the relevant ASHRAE ANSI standard, as applicable to the building and space(s): <ul style="list-style-type: none"> <li>62.1 - 2019: Commercial Buildings</li> <li>62.2 - 2019: Residential Buildings</li> </ul>	OR	<input type="checkbox"/> <b>One</b> of the following ventilation rates: <ul style="list-style-type: none"> <li>People Outdoor Air Rate (Rp): 10cfm/person or 5L/s*person</li> <li>Area Outdoor Air Rate (Ra): 18cfm/ft<sup>2</sup> or .9L/s*m<sup>2</sup></li> <li>Combined Outdoor Air Rate: 22cfm/person or 10.4L/s*person</li> </ul>	OR	<input type="checkbox"/> Align with <b>one</b> of the following, whichever is greater: <ul style="list-style-type: none"> <li>≥ 4 air changes per hour (ACH) in all applicable areas</li> <li>CDC recommended ACH for infection control for specific spaces, found here: <a href="https://www.cdc.gov/infectioncontrol/guidelines/environmental/appendix/air.html">https://www.cdc.gov/infectioncontrol/guidelines/environmental/appendix/air.html</a></li> </ul>
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- Filtration

- When spaces are occupied, install MERV 8+ filters
- When spaces are occupied, ensure implementation of **one** of the following filtration approaches during a contagious disease outbreak as defined by the national, regional, and/or local public health authority:
  - MERV 13+ filters
  - UV light filtration that meets a minimum of **one** of the following:
    - Upper Room UVGI Light: ASHRAE GPC 37: Guideline for the Application of Upper Air (Upper Room) Ultraviolet Germicidal (UV-C) Devices to Control the Transmission of Airborne Microorganisms)
    - UV-C Light: ASHRAE Standard 185.1: Method of Testing UV-C Lights for use in Air Handling Units or Air Ducts to Inactivate Airborne Microorganisms
  - Mobile filtration units or portable air cleaners.
    - Units should be placed where air intake and discharge are not impeded
    - Devices may include any or combinations of air cleaning technologies (filters, sorbents, UV, etc.)
    - Manufacturer instructions should be used to guide placement

☐ Maintenance

- Describe regular maintenance of ventilation and filtration systems, which should include **all** of the following:
  - Inspection of HVAC system and peripheral devices to check efficiency, air balance, filter status, and status of the mechanical systems
  - Replacement of filters and any worn or non functioning parts as needed

- Cleaning evaporators and condensers
  - Removals of standing water from drain pans
- Avoid the blockage of ventilation supplies, exhausts and other grilles
- Establish an indoor air quality notification system to alert building management of potential issues

#### 4. Managing Closures and Significant Reductions in Occupancy

Ensure that in the event of a closure of 2 weeks or more, **all** of the following steps are completed before reoccupancy:

- ☐ The building will be assessed for mold, excess moisture, and legionella, and any identified issues will be remediated.
- ☐ When the HVAC system has not been active for 2 weeks or more, it should be operated for 48 - 72 hours to “flush out” the system.
- ☐ After the “flush out” period, filters should be examined and replaced if necessary
- ☐ When odors are detected during the “flush out” period, identify the source and remediate any residual mold.
- ☐ Develop a schedule for weekly inspection of the HVAC system for the first month of occupancy. These inspections can be gradually reduced to monthly or quarterly depending on the system’s maintenance needs.

#### 5. Procurement

- ☐ Ensure that all new products and materials procured within the project meet the required thresholds from at least **five** of the product categories below. For each product category selected, ensure products and materials are either naturally low-emitting products (stones, ceramics, concrete, untreated solid wood) or meet the applicable certification and testing standards below:
  - **Interior Insulation:** 100% of insulation
  - **Flooring Systems:** 100% of all systems
  - **Ceiling Systems:** 90% of systems by square feet or meters
  - **Wall Paneling:** 100% of all paneling including, but not limited to, interior wall assemblies, gypsum board, doors, frames, wall coverings, window systems, and interior surfaces of exterior walls)
  - **Paints and Coatings:** 90% by volume for emissions and 100% for VOC content of paints and coatings applied on-site and used on the interior of the air barrier
  - **Adhesives and Sealants:** 90% by volume for emissions and 100% for VOC of adhesives and sealants applied on-site and used on the interior of the air barrier.
  - **Furniture:** 90% by cost of furniture
  - **Composite Wood:** 100% of composite wood for cabinetry, excluding flooring, ceiling, wall panels, or furniture.
- ☐ Accepted certification and testing standards:
  - Certified to UL GREENGUARD Gold (accepted for all categories’ VOC emission requirements except Composite Wood)

- California Department of Public Health Standard Method V1.2 2017 (accepted for all categories' VOC emission requirements except Furniture and Composite Wood)
- California Air Resources Board (CARB) 2007 Suggested Control Measure (SCM) for Architectural Coatings (accepted for Paints and Coatings VOC content requirements )
- California Air Resources Board (CARB) requirements for ultra-low-emitting formaldehyde (ULEF) resins or no-added formaldehyde based resins (Accepted for Composite Wood)
- South Coast Air Quality Management District SCAQMD Rule 1113 (accepted for Paints and Coatings VOC content requirements)
- South Coast Air Quality Management District SCAQMD Rule 1168 (accepted for Adhesives and Sealants VOC content requirements)
- ANSI/BIFMA e3 2019 credits 7.6.1, 7.6.2, and 7.6.3 (accepted for Furniture)
- EPA TSCA Title VI for ultra-low-emitting formaldehyde (ULEF) resins or no added formaldehyde resins (NAF) (accepted for Composite Wood)
- AgBB Testing and Evaluation Scheme 2010 (accepted for all categories' VOC emissions requirements except Furniture)
- EN16402 (accepted for Paints and Coatings VOC content requirements)
- EN13999 (Parts 1-4) (accepted for Adhesives and Sealants VOC content requirements)
- Green Star - Interiors v1.2 credit 12 for Indoor Pollutants to show compliance with low-emitting materials (accepted for Paints and Coatings, Adhesives and Sealants, and Composite Wood)
- European Decopaint Directive (2004/42/EC) (accepted for Paints and Coatings, Adhesives and Sealants VOC content requirements)
- Canadian VOC Concentration Limits for Architectural Coatings (accepted for Paints and Coatings, Adhesives and Sealants VOC content requirements)
- Hong Kong Air Pollution Control (VOC) Regulation (accepted for Paints and Coatings, Adhesives and Sealants VOC content requirements)

## 6. Construction and Renovations

Includes a plan for managing indoor air quality during any construction and major renovations and prior to occupancy. The plan must at a minimum control for the following categories:

- ☐ Moisture, for example:
  - storing all absorbent products and materials separately in areas that are protected from dust and moisture.
  - avoiding enclosing wet materials during construction.
- ☐ Particulates, for example:
  - protecting permanently installed ventilation systems during construction
  - employing entryway systems at all construction site entrances and exits
- ☐ VOCs, for example:
  - storing VOCs separately from absorbent products and materials
  - installing all possible paints/coatings and adhesives and sealants prior to absorbent products and materials

- ☐ Outdoor emissions, for example:
  - Developing a plan to protect occupied spaces from outdoor fumes generated by construction activities.
- ☐ Tobacco, for example:
  - prohibiting smoking within the construction site
- ☐ Noise and vibrations, for example:
  - Reducing noise and vibrations from construction equipment
- ☐ Ensuring that construction crews wear protective gear.



## 1.1.1 Humidity Control Policy

# Establish a Humidity Control Policy

*Dependent Strategy*  
*Points Allocated 1.52%*

## Rationale

A Humidity Control Policy supports optimal air quality and prevents environments from becoming overly dry, which can promote physiological defense against viral

infection, or becoming overly humid, which prevents mold growth.

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## Requirements

Establish and implement a humidity control policy that is at least as rigorous as the Fitwel Humidity Control Policy (can be found on page 22 or downloaded at [www.fitwel.org/fitwel-standards](http://www.fitwel.org/fitwel-standards)).

Note: Compliance with Strategy 1.1 is required in order to achieve Strategy 1.1.1.

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## Compliance Documentation

Submit the qualifying humidity control policy.

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*If seeking Asset Approval,, no additional documentation is required. Project teams must confirm the policy is implemented within the asset upon submission.*

Note: Official policies must include policy duration dates and be on company letterhead.

# Fitwel Humidity Control Policy

This document provides project teams with a policy that can be used as a template and adopted in full to comply with requirements of the Fitwel Humidity Control Policy. Project teams can either use the exact content of this document to establish new policies, or update existing policies by adding any missing components from the below.

A qualifying humidity control policy must include the following:

## 1. Implementation

- ☐ when implementing the policy in a multi-tenant commercial or residential asset, the policy will apply to all areas and HVAC system elements under the control of the building management, including common elevator banks on tenant floors.
- ☐ when implementing the policy in a single tenant asset or a commercial interior asset, the policy will apply to all areas within tenant spaces and HVAC system elements under the control of the tenant. For HVAC systems that are controlled by the building management, the tenant must coordinate with building management to implement the qualifying IAQ policy.

## 2. Relative Humidity Control:

Implement strategies for controlling the relative humidity (RH), for example:

- ☐ Prevent infiltration by sealing any cracks and gaps around windows, doors, lighting fixtures or any other areas
- ☐ Ensure pipe insulation meets requirements established in ASHRAE ANSI 90.1 - 2019.

## 3. Microbe and Mold Control:

Implement strategies for microbe and mold control in applicable areas, for example:

- ☐ Regular inspections for condensation, water damage, and mold growth
- ☐ Notification system to report mold or water damage
- ☐ Use of mold-resistant materials
- ☐ Support air flow
- ☐ Implement protocol for drying any damp areas and fixing any leaks within 24 to 48 hours of discovery.

## 1.2 Enhanced Indoor Air Quality Testing or Monitoring

# Establish an Enhanced Indoor Air Quality Testing or Monitoring Policy

*Points Allocated 7.42% / Alternative Compliance 6.52%*

## Rationale

An Enhanced Indoor Air Quality Testing and Monitoring Policy sets benchmarks to identify ventilation and filtration issues and ensure air quality remains high over

time, contributing to mitigation of viral transmission and promotion of respiratory and mental health.

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## Strategy Requirements

Establish and implement an indoor air quality (IAQ) monitoring policy that:

1. is at least as rigorous as the Fitwel Enhanced Indoor Air Quality (IAQ) Monitoring Policy (can be found on page 25 or downloaded at [www.fitwel.org/fitwel-standards](http://www.fitwel.org/fitwel-standards)).
2. is included in either relevant leases or a tenant manual

## Alternative Compliance

Establish and implement an indoor air quality testing policy that:

1. is at least as rigorous as the Fitwel Enhanced Indoor Air Quality (IAQ) Testing Policy (can be found on page 27 or downloaded at [www.fitwel.org/fitwel-standards](http://www.fitwel.org/fitwel-standards)).
2. is included in either relevant leases or a tenant manual

# Compliance Documentation

Submit the following:

1. one of the following
  - an official indoor air quality (IAQ) monitoring policy
  - an official indoor air quality (IAQ) testing policy (for Alternative Compliance only)
2. an official statement detailing how the qualifying policy is shared with tenants.

---

*For pursuit of Asset Approval, project teams must provide a narrative upon submission detailing the following:*

1. If all the required IAQ testing and/or monitoring limits outlined in the attached policies are met in the asset:
  - a list of the zones where testing and/or monitoring has been conducted. Required testing or monitoring zones applicable to the asset type are outlined in the attached policy.
  - the highest and lowest average result reported for each required air quality metric. The required testing or monitoring air quality metrics are outlined in the attached policy.
  - a statement confirming that the IAQ testing and/or monitoring conducted within the asset adheres to the specifications and testing methodologies outlined in the attached policy.
2. If not all the required limits are met, or if the building has been unoccupied for more than 12 consecutive months, a statement confirming that the plan for improving the indoor air quality to meet the required limits as outlined in the attached policy, is implemented in the asset.



# Fitwel Enhanced Indoor Air Quality Monitoring Policy

This document provides project teams with a policy that can be used as a template and adopted in full to comply with requirements of the Fitwel Enhanced Indoor Air Quality Monitoring Policy. Project teams can either use the exact content of this document to establish new policies, or update existing policies by adding any missing components from the below.

A qualifying enhanced indoor air quality (IAQ) monitoring policy must include the following:

## 1. Implementation

- ☐ when implementing the policy in multi-tenant commercial and residential buildings, the protocol will apply to all areas under the control of the building management, including common elevator banks on tenant floors.
- ☐ when implementing the policy in single tenant buildings and commercial interior spaces, the protocol will apply to all areas within tenant spaces.

## 2. Required Monitoring Metrics

All indoor air quality monitoring will follow the protocols under Section 3, and will meet the following metrics:

- ☐ Required metrics for PM<sub>2.5</sub> and CO<sub>2</sub>:
  - The following air quality monitoring metrics must be monitored to confirm compliance with the recommended metrics:
    - PM<sub>2.5</sub>: less than 12 µg/m<sup>3</sup>
    - CO<sub>2</sub>: less than 1000 ppm.
- ☐ Additional required metrics:
  - A minimum of **three** of the following air quality metrics must be monitored\* to confirm compliance with the recommended limits:
    - TVOC: less than 500 µg/m<sup>3</sup> or 132.73 ppb (ug/m<sup>3</sup> = ppb \* 3.767).
    - Relative Humidity: between 30-60%
    - Ozone: less than 0.07 ppm
    - CO: less than 9 ppm
    - Formaldehyde: less than 27ppb.

\*Testing, following the protocols under Section 4 may be used instead of monitoring to demonstrate compliance with the required metrics under section b.

### 3. Monitoring Protocols

Air quality monitoring must be conducted:

- ☐ To continuously show monthly averages and peaks lasting for more than one hour during work hours while HVAC systems are operating at design parameters
- ☐ On every 25,000 square foot or per Air Handling Unit (AHU) zone, whichever is more stringent
- ☐ Using monitors that meet **all** of the following requirements:
  - Has a data output of at least once every 5 minutes
  - Has a data loss rate of 10% or less
  - Has a minimum operating range for temperature of 0 - 40 °C (or 32 - 104 °F).
  - Has a minimum operating range for relative humidity of 5-85% RH, non-condensing
  - Requires permanent installations
  - Is calibrated and confirmed functional without defect prior to shipping.

### 4. Testing Protocols

Air quality testing must be conducted:

- ☐ annually post-occupancy in all required areas
- ☐ after any construction and major renovations prior to occupancy within all required areas.
- ☐ post occupancy following all long-term closures (2 weeks or more) or significant reduction in occupancy (more than 25%), within all required areas.
- ☐ every 25,000 square ft, or per Air Handling Unit (AHU) zone, whichever is more stringent
- ☐ to show the average levels measured for each required zone
- ☐ during work hours while HCA systems are operating at design parameters
- ☐ in the breathing area between 3 to 8 feet from floor level
- ☐ using **one** of the following testing methods as applicable:
  - Direct reading from IAQ testing devices for TVOC, PM<sub>10</sub>, PM<sub>2.5</sub>, CO, CO<sub>2</sub> and relative humidity
  - EPA: Compendium Methods IP-10 (PM<sub>2.5</sub>) / IP-1 (TVOC) / IP-3 (CO<sub>2</sub> and CO) / IP-6 (Formaldehyde), TO-1 and TO-17 (TVOC), TO-11 (Formaldehyde)
  - ISO: 7708 (PM<sub>2.5</sub>) / 16000-6 (TVOC) / 4224 (CO) / 16000-3 (Formaldehyde) - ASTM D5197 or NIOSH 2016: (Formaldehyde).

### 5. Improvement Protocol

A protocol to improve the air quality will be implemented if the recommended limits for air quality metrics are not met.

# Fitwel Enhanced Indoor Air Quality Testing Policy

This document provides project teams with a policy that can be used as a template and be adopted in full to comply with requirements of the Fitwel Enhanced Indoor Air Quality Testing Policy. Project teams can either use the exact content of this document to establish new policies, or update existing policies by adding any missing components from the below.

A qualifying enhanced indoor air quality (IAQ) testing policy must include the following:

## 1. Implementation

- ☐ when implementing the policy in multi-tenant commercial and residential buildings, the protocol will apply to all areas under the control of the building management, including common elevator banks on tenant floors.
- ☐ when implementing the policy in single tenant buildings and commercial interior spaces, the protocol will apply to all areas within tenant spaces.

## 2. Required Testing Metrics

All indoor air quality testing will follow the protocols under section 3, and will meet the following metrics:

- ☐ Required metrics for PM<sub>2.5</sub> and CO<sub>2</sub>:
  - The following air quality metrics must be tested to confirm compliance with the recommended limits:
    - PM<sub>2.5</sub>: less than 12 µg/m<sup>3</sup>
    - CO<sub>2</sub>: less than 1000 ppm.
- ☐ Additional required metrics:
  - A minimum of **three** of the following air quality metrics must be tested\* for to confirm compliance with the recommended limits:
    - TVOC: less than 500 µg/m<sup>3</sup> or 132.73 ppb (ug/m<sup>3</sup> = ppb \* 3.767)
    - Relative Humidity: between 30-60%
    - Ozone: less than 0.07 ppm
    - CO: less than 9 ppm
    - Formaldehyde: less than 27 ppb.

\*Monitoring, following the protocols under Section 4 may be used instead of monitoring to demonstrate compliance with the required metrics under section b.

### 3. Testing Protocols

Air Quality testing must be conducted:

- ☐ annually post-occupancy in all required areas
- ☐ after any construction and major renovations prior to occupancy within all required areas.
- ☐ post occupancy following all long-term closures (2 weeks or more) or significant reduction in occupancy (more than 25%), within all required areas.
- ☐ to show the average levels measured for each required zone
- ☐ during work hours while HCA systems are operating at design parameters
- ☐ in the breathing area between 3 and 8 feet from floor level
- ☐ every 25,000 sq.ft., or per Air Handling Unit (AHU) zone whichever is more stringent.
- ☐ using **one** of the following testing methods as applicable:
  - Direct reading from IAQ testing devices for TVOC, PM<sub>10</sub>, PM<sub>2.5</sub>, CO, CO<sub>2</sub> and relative humidity.
  - EPA: Compendium Methods IP-10 (PM<sub>2.5</sub>) / IP-1 (TVOC) / IP-3 (CO<sub>2</sub> and CO) / IP-6 (Formaldehyde), TO-1 and TO-17 (TVOC), TO-11 (Formaldehyde)
  - ISO: 7708 (PM<sub>2.5</sub>) / 16000-6 (TVOC) / 4224 (CO) / 16000-3 (Formaldehyde) - ASTM D5197 or NIOSH 2016: (Formaldehyde).

### 4. Monitoring Protocols

Air Quality monitoring must be conducted:

- ☐ to continuously show monthly averages and peaks lasting for more than one hour during work hours while HVAC systems are operating at design parameters.
- ☐ on every 25,000 sq.ft., or per Air Handling Unit (AHU) zone, whichever is more stringent.
- ☐ using monitors that meet **all** the following requirements:
  - has a data output interval of at least once every 5 minutes
  - has a data loss rate of 10% or less
  - has a minimum operating range for temperature of 0-40 °C (or 32 - 104 °F).
  - has a minimum operating range for relative humidity of 5-85% RH, non-condensing
  - requires permanent installations
  - is calibrated and confirmed functional without defect prior to shipping.

### 5. Improvement Protocol

A protocol to improve the air quality will be implemented if the recommended limits for air quality metrics are not met.

## 1.3 Legionella Water Management

# Establish a Legionella Water Management Policy

*Points Allocated 6.52%*

## Rationale

A *Legionella* Water Management Policy supports the monitoring and maintenance of a water system to

address risks and prevent *Legionella* growth reducing exposure to harmful bacteria.

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## Strategy Requirements

Establish and implement a legionella water management policy that is at least as rigorous as the Fitwel Legionella Water Management Policy (can be found on page 30 or downloaded at [www.fitwel.org/fitwel-standards](http://www.fitwel.org/fitwel-standards)).

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## Compliance Documentation

Submit the official legionella water management policy.

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*For pursuit of Asset Approval, no additional documentation is required. Project teams must confirm the policy is implemented within the asset upon submission.*

Note: Official policies must include policy duration dates and be on company letterhead.



# Fitwel Legionella Water Management Policy

This document provides project teams with a policy that can be used as a template and adopted in full to comply with requirements of the Legionella Water Management Policy. Project teams can either use the exact content of this document to establish new policies, or update existing policies by adding any missing components from the below.

A qualifying legionella water management policy must include the following:

## 1. Implementation

- ☐ when implementing the policy in a multi-tenant commercial and residential asset, the policy will apply to the building's main water system.
- ☐ when implementing the policy in a single tenant asset or commercial interior asset, the policy will apply to all water supplies within tenant spaces.

## 2. Water Management Team

Establish a multidisciplinary water management program team that includes representatives from the following groups:

- ☐ building owner/management team
- ☐ technical experts

## 3. Water System Overview

Develop a description of the building water system in graphic and written form, that outlines the following:

- ☐ Water Source and Flow: provide a Process Flow Diagram (simple one page diagram) that clearly shows the following:
  - connections to external water sources
  - distribution system for drinking water supply, including the following:
    - receiving
    - cold water distribution
    - heating methods
    - hot water distribution
    - waste (water to drain or sewer)

- location of hot tubs, water heaters or boilers, and cooling tubs
- ☐ Water Use: a short description of how the water is processed and flows through the building to the point of distribution at fixture locations

#### 4. Legionella Mitigation

- ☐ Identify areas susceptible to Legionella growth & spread, due to the following conditions:
  - water temperature (77-108°F, 25-42°C)
  - stagnation or reduction in use
  - no or reduced use of disinfectant
- ☐ Establish hazard control measures that can be applied to reduce risk of Legionella contamination, for example:
  - flushing protocol with frequency (daily/weekly/monthly) and duration (minutes)
  - maintaining water heaters at appropriate temperatures
  - continuously maintaining and monitoring disinfectant and chemical levels

#### 5. Legionella Monitoring

Determine how control measures can be regularly monitored through one or more on-site strategies, for example:

- ☐ visual inspections
- ☐ flushing water system following extended closures or significant decreases in occupancy
- ☐ checking disinfectant levels
- ☐ checking temperatures

#### 6. Legionella Elimination

Establish interventions and/or contingency responses to eliminate legionella from water system (there is no known safe level of legionella, so the healthy limit for legionella is 0.00 cfu/ml), for example:

- ☐ setting water heater to at least 140°F or 60°C
- ☐ adding disinfectant
- ☐ flushing fixture for 3 minutes when oxidant levels are low

#### 7. Housekeeping

- ☐ Develop procedures to verify and validate the water management program is operational throughout the building water system:
  - verification: confirm that program is being implemented as designed (e.g. keeping records that the water management program team did what they said they would do)
  - validation: confirm program has been implemented as designed and is effectively controlling legionella throughout the building water system through the following:
    - Testing for legionella following any extended building closure (2 weeks or more) or significant reduction in occupancy

- Performing test(s) to determine if the water system is operating safely and when legionella results are outside healthy range/limits determine how to respond to bring water quality back into range/ limit. The healthy limit for legionella is 0.00 cfu.
- Document water management activities and inform building occupants about issues with drinking water quality and steps to take to prevent legionella growth.

## 8. Informing Tenants and Residents

For multi-tenant commercial and residential buildings only: Inform tenants of how to prevent legionella by implementing the following:

- Direct tenants to implement the following legionella prevention protocols when they vacate space for more than 2 weeks:
  - Turn off water supply before leaving for an extended period
  - Upon return, flush plumbing by turning on all water faucets and let run for a few minutes until water feels colder than when first turned on.
- Share tenant communication through at least **one** of the following methods:
  - A digital platform, such as a website, digital application, or display screen in common areas.
  - Communication material, such as notification emails or newsletters.
  - In either relevant leases or a tenant manual (for multi-tenant commercial and residential buildings, only).

## 1.4 Enhanced Cleaning, Disinfecting, and Maintenance Policy

# Establish an Enhanced Cleaning, Disinfecting, and Maintenance Policy

*Minimum Requirement Strategy*  
*Points Allocated 7.73%*

## Rationale

Regular cleaning, disinfecting, and maintenance reduces transmission of contagious diseases by removing microbial

and viral pathogens from the environment.

Strategy 1.4 is a Minimum Requirement because cleaning, disinfecting, and maintenance has been shown to significantly reduce the risk of surface-to-person

and person-to-person viral transmission. When not implemented the concentration of viral particles in the environment can increase considerably.

---

## Requirements

Establish and implement an enhanced cleaning, disinfecting, and maintenance policy that is:

1. at least as rigorous as the Fitwel Enhanced Cleaning, Disinfecting, and Maintenance Policy (can be found on page 35 or downloaded at [www.fitwel.org/fitwel-standards](http://www.fitwel.org/fitwel-standards))
2. included in either relevant leases or a tenant manual

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## Compliance Documentation

Submit all of the following:

1. the official enhanced cleaning, disinfecting, and maintenance policy.
2. an official statement detailing how the qualifying policy is shared with tenants.

*For pursuit of Asset Approval, project teams must provide a narrative upon submission detailing the monthly auditing method(s) used in the asset.*

Note:

Official statements must be dated and on company letterhead

Official policies must include policy duration dates and be on company letterhead



# Fitwel Enhanced Cleaning, Disinfecting, and Maintenance Policy

This document provides project teams with a policy that can be used as a template and adopted in full to comply with requirements of the Fitwel Enhanced Cleaning, Disinfecting, and Maintenance Policy. Project teams can either use the exact content of this document to establish new policies, or update existing policies by adding any missing components from the below.

A qualifying enhanced cleaning, disinfecting, and maintenance policy must include the following:

## 1. Implementation

- ☐ when implementing the policy in multi-tenant commercial and residential buildings, the policy will apply to all areas under the control of the building management, including common elevator banks on tenant floors.
- ☐ when implementing the policy in single tenant buildings and commercial interior spaces, the policy will apply to all areas within tenant spaces.

## 2. Cleaning

The **twice** daily cleaning of the following areas, as applicable during a contagious disease outbreak, as defined by the national, regional, and/or local public health authority, and the **once** daily cleaning of the following areas during all other times:

- ☐ common activity spaces (for example, fitness and exercise rooms, lactation rooms, multipurpose rooms, break areas, game rooms, or other spaces designated for shared activity)
- ☐ shared kitchens (including kitchenettes, snack bars, or other areas that are used for shared eating or food preparation)
- ☐ shared bathrooms
- ☐ high-touch surfaces\*.

## 3. Upkeep

The **twice** daily upkeep of the following during a contagious disease outbreak, as defined by the national, regional, and/or local public health authority, and the **once** daily upkeep of the following during all other times:

- ☐ soap
- ☐ toilet paper
- ☐ paper towels

## 4. Disinfection Guidelines

Disinfection guidelines must meet the following:

- ☐ require disinfection of all high-touch surfaces\* **twice** daily during a contagious disease outbreak, as defined by the national, regional, and/or local public health authority.
- ☐ follow the CDC guidelines and manufacturer instructions for safe and effective disinfectant use.
- ☐ as available, limit disinfectant use to those listed on EPA List N that contain any of the following safer active ingredients:
  - Hydrogen peroxide
  - Ethyl alcohol/ethanol
  - Citric acid
  - L-lactic acid
  - Caprylic acid/
  - Thymol
- ☐ when chemical disinfectants with the active ingredients listed above are not available, select a disinfectant listed on EPA List N.
- ☐ limit use of chemical disinfectants to those that are not premixed with either peracetic acid or quaternary ammonium compounds.

The EPA List N can be found at <https://www.epa.gov/pesticide-registration/list-n-disinfectants-use-against-sars-cov-2-covid-19>

The CDC Guidelines can be found at <https://www.cdc.gov/coronavirus/2019-ncov/community/disinfecting-building-facility.html>

## 5. Inventory

Inventory must stock **all** of the following cleaning supplies:

- ☐ gloves
- ☐ paper towels
- ☐ multipurpose cleaning wipes or spray
- ☐ soap
- ☐ disinfecting wipes or spray
- ☐ trash bags

## 6. Provisions

All of the following must be provided for **all** cleaning, maintenance, and engineering staff:

- ☐ medical-grade masks
- ☐ reusable gloves
- ☐ eye protection.

## 7. Cleaning Logs

Must implement cleaning logs that:

- ☐ document cleaning and disinfection activity in all required areas
- ☐ outline a method for collecting feedback from building occupants.

## 8. Auditing

Must implement monthly auditing using **one** of the following methods:

- ☐ regular site inspections
- ☐ direct practice observation
- ☐ swab cultures
- ☐ fluorescent markers
- ☐ adenosine triphosphate (ATP) bioluminescence.

## 9. Confirmed or Suspected Case

Must implement the following steps after an occupant who is confirmed or suspected to be infected by a virus where no therapeutic or vaccine is currently available has left a space:

- ☐ closing of the area(s) used by the infected individual(s)
- ☐ waiting 24 hours before starting deep clean
- ☐ deep cleaning the space by disinfecting high-touch surfaces\*, as per EPA guidelines above, and cleaning all area(s)
- ☐ opening of outside doors and windows and ensuring use of adequate ventilation, prior to reoccupancy.

\*High-touch surfaces include, but are not limited to, door handles/knobs, elevator call buttons, hand-rails, light switches, faucets, drinking water stations, kitchen equipment, countertops, shared office equipment, and other surfaces that are frequently touched by occupants

## 1.4.1 Enhanced Green Purchasing Policy

# Establish an Enhanced Green Purchasing Policy

*Dependent Strategy*

*Points Allocated 1.52%*

## Rationale

A Green Purchasing Policy can ensure that materials brought into the building conform to standards that

preserve high Indoor Air Quality (IAQ) and sustainability, contributing to enhanced respiratory and mental health.

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## Requirements

Establish and implement a green purchasing policy for all cleaning, hygiene, and paper products and services that is:

1. is at least as rigorous as the Fitwel Enhanced Green Purchasing Policy (can be found on page 40 or downloaded at [www.fitwel.org/fitwel-standards](http://www.fitwel.org/fitwel-standards)).
2. included in either relevant leases or a tenant manual

\*Compliance with Strategy 1.4 is required in order to pursue Strategy 1.4.1

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## Compliance Documentation

Submit all of the following:

1. the official green purchasing policy
2. an official statement detailing how the qualifying policy is shared with tenants.

*For pursuit of Asset Approval, no additional documentation is required. Project teams must confirm the policy is implemented within the asset upon submission.*

Note:

- Official statements must be dated and on company letterhead
- Official policies must include duration dates and be on company letterhead.

# Fitwel Enhanced Green Purchasing Policy

This document provides project teams with a policy that can be used as a template and adopted in full to comply with requirements of the Fitwel Enhanced Green Purchasing Policy. Project teams can either use the exact content of this document to establish new policies, or update existing policies by adding any missing components from the below.

A qualifying green purchasing policy must include the following:

## 1. Implementation

- ☐ when the policy is implemented in multi-tenant commercial and residential buildings, the policy must apply to all areas under the control of the building management, including common elevator banks on tenant floors.
- ☐ when the policy is implemented in single tenant buildings and commercial interior spaces, the policy must apply to all areas within tenant spaces.

## 2. Cleaning and Hygiene Products and Services

All cleaning and hygiene products and services purchased must meet **one** of the following for all products not classified as disinfectants:

- ☐ follows the ISO 20400:2017 Sustainable Procurement-Guidance
- ☐ requires that products and services comply with a minimum of **one** of the following:
  - certified by the Global Ecolabelling Network (GEN)
  - EPA's Comprehensive Procurement Guideline (CPG) Program, with a listing under the CPG Product Supplier Directory
  - EPA's Safer Choice Label
  - Ecologo Certified
  - Green Seal Certified



### 3. Paper Products

All paper products (paper towels, napkins, and tissue paper) purchased must meet **one** of the following:

- ☐ GS-9 and GS01 for Paper Towels and Napkins, and for Tissue Paper.
- ☐ UL 175 Sanitary Paper Products.
- ☐ EU Ecolabel Paper Products.
- ☐ Good Environmental Choice Australia GECA 13-2007 Sanitary Paper Products
- ☐ Forest Stewardship Council

## Research Highlights

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## SECTION 2

# Encourage Behavioral Change

Section 2 of Fitwel's Viral Response module offers a variety of tactics proven to motivate behavioral change and increase compliance with new norms and practices proven to effectively reduce contagious disease transmission.

Contagious diseases, such as infectious respiratory infections, are largely spread through direct person-to-person transmission. The source of spread for many of these contagious diseases, including influenza, strep throat, meningitis, and COVID-19, are large respiratory droplets. Droplets carrying infectious material can be released when an infected individual coughs, sneezes, talks, sings, or even breathes. Shifting human behavior is essential to decreasing risk of person-to-person transmission. Risk of person-to-person transmission can be greatly reduced through important shifts in social norms, such as physical distancing, wearing of masks, and improved hand hygiene.

Tactics aimed at encouraging behavior change support the adoption of these new social norms and can play an essential role in preventing community spread of contagious diseases. According to the World Health Organization and the US Centers for Disease Control, hand-washing is the most effective thing an individual can do to limit the spread of contagious diseases.<sup>[1][2]</sup> The evidence strongly supports this assertion, with one study finding that hand hygiene, described as hand-washing frequency, duration, and hand sanitizer ownership, may reduce respiratory illnesses in shared living settings

and mitigate the impact of the influenza A (H1N1) pandemic.<sup>[3]</sup>

Despite hand-washing's efficacy and simplicity, a vast majority of individuals aren't practicing proper technique. A study of hand-washing behavior found that approximately 23% attempted to wash their hands, but instead simply wet their hands without using soap. A total of 10.3% did not wash their hands at all after using the restroom, and just 6% of the sample approached the recommended hand-washing duration of 20 seconds. Signage can help. The same study found that signs influenced both hand-washing behaviors and duration, with signs including messages about correct hand-washing or reminders to use soap increasing compliance.<sup>[4]</sup>

Health promotion signage is a well-studied tactic for encouraging behavior change, especially when it comes to promoting hand hygiene. During the H1N1 outbreak in 2009-2010, one study found that the most effective signs resulted in a 66% increase in hand sanitizer use. Even the least effective signs were associated with a 41% increase in hand sanitizer use, demonstrating the significant impact that signage can have on hand

[1] World Health Organization. (2020). WHO save lives: Clean your hands in the context of COVID-19. Retrieved from [https://www.who.int/infection-prevention/campaigns/clean-hands/WHO\\_HH-Community-Campaign\\_finalv3.pdf?ua=1](https://www.who.int/infection-prevention/campaigns/clean-hands/WHO_HH-Community-Campaign_finalv3.pdf?ua=1)

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[3] Allison, G., et al. (2010). Mask Use, Hand Hygiene, and Seasonal Influenza-Like Illness among Young Adults: A Randomized Intervention Trial. *The Journal of Infectious Diseases*, 201(4), 491-498.

[4] Borchgrevink, C. P., Cha, J. M., & Kim, S. H. (2013). Hand washing practices in a college town environment. *Journal of Environmental Health*, 75(8), 18-25.

sanitizing behavior. In this specific study, the most effective signs were those that highlighted the health benefits of hand hygiene.<sup>[5]</sup> Signage can also be helpful when it comes to raising awareness of and compliance with new policies such as mask-wearing and physical distancing protocols.<sup>[6]</sup>

Given the growing understanding of the role masks play in preventing transmission of infectious respiratory disease, encouraging mask-wearing is essential and important to creating a new social norm in many parts of the world where this is not a commonly accepted practice.

***According to an analysis by the Institute for Health Metrics and Evaluation out of the University of Washington, consistent mask-wearing could save approximately 70,000 lives in the United States in just 5 months.<sup>[7]</sup> Masks covering the mouth and nose reduce the amount of infectious material that a sick individual releases into the environment, and can also block inhalation of viral particles by others.<sup>[8]</sup>***

Encouraging behavior change also requires tactics that make healthier choices easier. One way this can be done is by providing accessible programs and services that can address pressing health concerns. For example, services such as on-site flu shots and contagious disease testing can increase likelihood of individuals obtaining vaccination and testing.<sup>[9]</sup>

The design and operational tactics outlined in Section 2 support enhanced awareness of policies and protocols, supporting the adoption of healthy behaviors and the creation of new norms.



**Consistent  
mask-wearing  
could save approximately  
70.000 lives  
in just 5 months**

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Source: Institute for Health Metrics and Evaluation. (2020). COVID-19 Projections. University of Washington, retrieved from <https://covid19.healthdata.org/global?view=total-deaths&tab=trend>

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- Establish Surface Cleaning Protocol
- Establish a Face Covering Protocol
- Establish a Face Covering Provision Protocol
- Establish a Hand Hygiene Protocol
- Establish a Health Promotion Signage Protocol
- Establish a Health Programming and Services Protocol
- Establish a Social Support Group Protocol

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[5] Updegraff, J. A., et al. (2011). Framing flu prevention--an experimental field test of signs promoting hand hygiene during the 2009-2010 H1N1 pandemic. *Health Psychol*, 30(3), 295-299.

[6] Nartea, T. J. (2020). COVID-19 social distancing signage for use at farmers markets. Virginia Cooperative Extension.

[7] Institute for Health Metrics and Evaluation. (2020). COVID-19 Projections. University of Washington, retrieved from <https://covid19.healthdata.org/global?view=total-deaths&tab=trend>

[8] Rengasamy, S., Eimer, B., & Shaffer, R. E. (2010). Simple respiratory protection--evaluation of the filtration performance of cloth masks and common fabric materials against 20-1000 nm size particles. *Annals of Occupational Hygiene*, 54(7), 789-798.

[9] Luz, P. M., Johnson, R. E., & Brown, H. E. (2017). Workplace availability, risk group and perceived barriers predictive of 2016-17 influenza vaccine uptake in the United States: A cross-sectional study. *Vaccine*, 35(43), 5890-5896.



## 2.1 Surface Cleaning Protocol

# Establish a Surface Cleaning Protocol

*Points Allocated 5.15% / Alternative Compliance 4.24%*

## Rationale

Surface cleaning stations enable regular disinfection of high-touch areas which supports the frequent removal of microbial and viral pathogens from the environment.

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## Requirements

Establish and implement a surface cleaning protocol for providing disinfection stations that:

1. is at least as rigorous as section A, "Surface Cleaning Stations," under the Fitwel Surface Cleaning Protocol (can be found on page 49 or downloaded at [www.fitwel.org/fitwel-standards](http://www.fitwel.org/fitwel-standards)).
2. is included in either relevant leases or a tenant manual

## Alternative Compliance

Establish and implement a surface cleaning protocol for providing surface cleaning closets that:

1. is at least as rigorous as section B, "Surface Cleaning Closets" in the Fitwel Surface Cleaning Protocol (can be found on page 49 or downloaded at [www.fitwel.org/fitwel-standards](http://www.fitwel.org/fitwel-standards)).
2. is included in either relevant leases or a tenant manual

## Compliance Documentation

1. Submit one of the following
    - an official surface cleaning protocol for providing cleaning stations
    - an official surface cleaning protocol for providing cleaning closets (for Alternative Compliance only)
  2. Submit an official statement detailing how the qualifying protocol is shared with tenants.
-

*For pursuit of Asset Approval, project teams must provide a narrative upon submission detailing one of the following:*

1. For surface cleaning stations, confirm that the stations are located within all of the following areas within the asset:
  - common activity spaces (such as fitness and exercise rooms, lactation rooms, multipurpose rooms, break areas, game rooms, or other spaces designated for shared activity)
  - shared kitchens (including kitchenettes, snack bars, or other areas that are used for shared eating or food preparation)
  - shared bathrooms
2. For surface cleaning closets, confirm that the closets are located on every floor

Note:

- Official statements must be dated and on company letterhead
- Official protocols must include protocol duration dates and be on company letterhead

# Fitwel Surface Cleaning Protocol

This document provides project teams with a list of the required elements that must be included in a surface cleaning protocol. Project teams can either use this document as a guide to establish and implement a qualifying protocol or highlight the required sections in existing policies or protocols.

## Surface Cleaning Stations

A qualifying protocol for surface cleaning stations must include the following:

### 1. Implementation

- ☐ when implementing the protocol in multi-tenant commercial and residential buildings, the protocol must apply to all areas under the control of the building management.
- ☐ when implementing the protocol in single tenant buildings and commercial interior spaces, the protocol must apply to all areas within tenant spaces.

### 2. Supply Guidelines:

Requires the following materials be included at **all** surface cleaning stations:

- ☐ cleaning agent and/or disinfectant following relevant guidelines in section 3 and/or 4)
- ☐ paper towels
- ☐ disposable gloves
- ☐ trash receptacle for safe disposal of paper towels
- ☐ educational material for safe use of cleaners and/or disinfectants that detail:
  - instructions for proper use
  - instructions to wash hands after use.

### 3. Cleaning Agent Guidelines

Requires outlining the following when supplying cleaning agents at surface cleaning stations:

- ☐ As available, limit cleaning agent use to products that comply with a minimum of **one** of the following:
  - certified by the Global Ecolabelling Network (GEN)
  - EPA's Comprehensive Procurement Guideline (CPG) Program, with a listing under the CPG Product Supplier Directory

- EPA's Safer Choice Label
- Ecologo Certified
- Green Seal Certified

#### 4. Disinfectant Guidelines

Requires outlining the following when supplying disinfectants at surface cleaning stations:

- ☐ as available, limit disinfectant use to those listed on EPA List N (or other equally rigorous international standards) that contain any of the following safer active ingredients:
  - Hydrogen peroxide
  - Ethyl alcohol (ethanol)
  - Citric acid
  - L-lactic acid
  - Caprylic acid (octanoic acid)
  - Thymol.
- ☐ when disinfectants with the active ingredients listed above are not available, select disinfectants listed on EPA List N\*.
- ☐ limit use of disinfectants to those that are not premixed with either peracetic acid or quaternary ammonium compounds.
- ☐ limit use to the lowest concentration of disinfectant that is still effective in killing viruses.

\*The EPA List N can be found at <https://www.epa.gov/pesticide-registration/list-n-disinfectants-use-against-sars-cov-2-covid-19>

#### 5. Placement Plan

Requires surface cleaning stations be located in **all** the following spaces, when available:

- ☐ common activity spaces (such as fitness and exercise rooms, lactation rooms, multipurpose rooms, break areas, game rooms, or other spaces designated for shared activity)
- ☐ shared kitchens (including kitchenettes, snack bars, or other areas that are used for shared eating or food preparation)
- ☐ shared bathrooms

## Surface Cleaning Closets: (Use for Fitwel's Alternative Compliance pathway)

A qualifying protocol for surface cleaning closets must include the following:

### 1. Implementation

- ☐ when implementing the protocol in multi-tenant commercial and residential buildings, the protocol must apply to all areas under the control of the building management.
- ☐ when implementing the protocol in single tenant buildings and commercial interior spaces, the protocol must apply to all areas within tenant spaces.

### 2. Cleaning Supply Closet Guidelines

Requires supply closets to meet all of the following:

- ☐ provided at a minimum of one per floor
- ☐ accessible to all occupants
- ☐ made known to occupants through appropriate signage.
- ☐ equipped with surface cleaning supplies that meet the requirements in section 2: "Supply Guidelines" above.

## 2.2 Face Covering Protocol

# Establish a Face Covering Protocol

### *Minimum Requirement Strategy*

*Points Allocated 6.36%*

## Rationale

A face covering protocol establishes clear expectations for where and when face coverings need to be worn, increasing compliance and decreasing community spread of respiratory infections.

Strategy 2.2 is a Minimum Requirement because consistent and correct use of face coverings can

significantly reduce the spread of respiratory infections, such as COVID-19 and Influenza, and is described by experts as one of the best available defenses against infectious respiratory diseases. When face masks are not employed, community spread can increase significantly.

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## Requirements

Establish and implement a face covering protocol that:

1. is at least as rigorous as the Fitwel Face Covering Protocol (can be found on page 54 or downloaded at [www.fitwel.org/fitwel-standards](http://www.fitwel.org/fitwel-standards))
2. is included in either relevant leases or a tenant manual

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## Compliance Documentation

Submit all of the following:

1. the official face covering protocol
2. an official statement detailing how the qualifying protocol is shared with tenants

*For pursuit of Asset Approval, no additional documentation is required. Project teams must confirm the policy is implemented within the asset upon submission.*

Note:

- Official statements must be dated and on company letterhead
- Official protocols must include protocol duration dates and be on company letterhead

# Fitwel Face Covering Protocol

This document provides project teams with a list of the required elements that must be included in a face covering protocol. Project teams can either use this document as a guide to establish and implement a qualifying protocol or highlight the required sections in existing policies or protocols.

A qualifying protocol for face coverings must include the following:

## 1. Implementation

- ☐ when implementing the protocol in multi-tenant commercial and residential buildings, the policy must apply to all areas under the control of the building management, including common elevator banks on tenant floors
- ☐ when implementing the protocol in single tenant and commercial interior spaces, the policy must apply to all areas within tenant spaces

## 2. Execution

Requires execution during a contagious disease outbreak, as defined by the national, regional, and/or local public health authority

## 3. Utilization

Requires all occupants and visitors to wear face coverings in common spaces.

## 4. Third Party Utilization

Requires inclusion of protocols for operations, maintenance, engineering staff, and third party contractors that:

- ☐ require face coverings to be worn at all times while on-site.
- ☐ require face coverings to be provided to all operations, maintenance, and engineering staff.
- ☐ require the implementation of **one** of the following:
  - all third party contractors provide face coverings for their staff.
  - face coverings provided for all third party contractors staff, when not provided by third party contractors.

## 5. Trainings

Requires a training that is provided for operations, maintenance, engineering staff, and third party contractors that:

- ☐ is updated annually.



- ☐ is provided through **one** of the following:
  - in-person training
  - virtual training
  - written instructions
- ☐ is included in training resources that are shared upon first hire.
- ☐ includes instructions on how to properly use face coverings, including proper care, maintenance, storage, and disposal.
- ☐ provides educational language on the health benefits of face covering use.

## 6. Provision of Educational Materials

Requires the distribution of educational materials that:

- ☐ meet the guidelines provided by the national, regional and/or local public health authority.
- ☐ provide guidance on proper use of face coverings, including proper care, maintenance, storage, and disposal.
- ☐ outline the health benefits of face covering use.

## 7. Distribution of Educational Materials

Requires mechanisms to share educational materials with occupants of applicable areas based on building and/or space typologies that include **one** of the following:

- ☐ a digital platform, such as a website, digital application, or display screen in common areas.
- ☐ communication material, such as notification emails, newsletters, or signage.

## 2.2.1 Face Covering Provision Protocol

# Establish a Face Covering Provision Protocol

*Dependent Strategy*

*Points Allocated 1.52%*

## Rationale

A face covering provision protocol increases access to face coverings and other relevant PPE that comply with guidance from national, regional, and/or local public

health authorities, improving compliance and reducing community spread of respiratory infections.

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## Requirements

Establish and implement a face covering provision protocol that:

1. is at least as rigorous as the Fitwel Face Covering Provision Protocol (can be found on page 58 or downloaded at [www.fitwel.org/fitwel-standards](http://www.fitwel.org/fitwel-standards)).
2. is included in either relevant leases or a tenant manual

\*Compliance with Strategy 2.2 is required in order to pursue Strategy 2.2.1.

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## Compliance Documentation

Submit all of the following:

1. The official face covering protocol
2. An official statement detailing how the qualifying protocol is shared with tenants

*For pursuit of Asset Approval, no additional documentation is required. Project teams must confirm the policy is implemented within the asset upon submission.*

Note:

- Official statements must be dated and on company letterhead
- Official protocols must include protocol duration and be on company letterhead

# Fitwel Face Covering Provision Protocol

This document provides project teams with a list of the required elements that must be included in a face covering protocol. Project teams can either use this document as a guide to establish and implement a qualifying protocol or highlight the required sections in existing policies or protocols.

A qualifying protocol for face covering provision must include the following:

## 1. Implementation

- ☐ when implementing the protocol in multi-tenant commercial and residential buildings, the protocol must apply to all areas under the control of the building management, including common elevator banks on tenant floors
- ☐ when implementing the protocol in single tenant and commercial interior spaces, the protocol must apply to all areas within tenant spaces.

## 2. Procurement Plan

Requires a procurement plan for face coverings to ensure they are available on-site, and provided free of charge for the following occupants of the required areas:

- ☐ all employees
- ☐ all third party contractor staff, when not provided by third party contractors.

## 2.3 Hand Hygiene Protocol

# Establish a Hand Hygiene Protocol

### *Minimum Requirement Strategy*

*Points Allocated 6.36%*

## Rationale

A hand hygiene protocol supports improved handwashing practices, reducing contagious disease transmission, increasing sense of safety and contributing to feelings of well-being.

Strategy 2.3 is a Minimum Requirement because hand hygiene has been shown to have a significant impact on contagious disease transmission, and plays a vital role

in defending against the spread of harmful pathogens, yet a majority of the population does not practice recommended hand hygiene practices, indicating the severe need for additional supports. Without the proper support, proper hand hygiene will not be broadly adopted.

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## Requirements

Establish and implement a hand hygiene protocol that is at least as rigorous as the Fitwel Hand Hygiene Protocol (can be found on page 60 or downloaded at [www.fitwel.org/fitwel-standards](http://www.fitwel.org/fitwel-standards)).

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## Compliance Documentation

Submit the official hand hygiene protocol.

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*For pursuit of Asset Approval, project teams must provide a narrative upon submission confirming that the stations are located within all of the following areas in the asset:*

- entryways
- restrooms
- break areas
- a minimum of one station on each floor within the project

Note: Official protocols must include protocol duration dates and be on company letterhead

# Fitwel Hand Hygiene Protocol

This document provides project teams with a list of the required elements that must be included in a hand hygiene protocol. Project teams can either use this document as a guide to establish and implement a qualifying protocol or highlight the required sections in existing policies or protocols.

A qualifying protocol for hand hygiene must include the following:

## 1. Implementation

- ☐ when implementing the protocol in multi-tenant commercial and residential buildings, the protocol must apply to all areas under the control of the building management, including common elevator banks on tenant floors.
- ☐ when implementing the protocol in single tenant buildings and commercial interior spaces, the protocol must apply to all areas within tenant spaces.

## 2. Hand Hygiene Stations Provisions

Requires that hand hygiene stations include **one** of the following:

- ☐ hand sanitizer
- ☐ hand-washing provisions that include **all** of the following:
  - soap
  - water
  - hand drying method

## 3. Supply Guidelines

Requires the following materials to be included at hand hygiene stations:

- ☐ a minimum of one of the following hand drying methods at all sinks within the required areas:
  - paper towels
  - hand dryers with HEPA filtration that are maintained per the manufacturer's instructions
- ☐ when providing hand sanitizers, hand sanitizers must meet the following requirements:
  - at least 60% alcohol (typically found in the form of one of the following active ingredients: ethanol, ethyl alcohol, isopropanol, or 2-propanol)
  - no presence of methanol, triclosan, or triclocarban
  - are not on the FDA list\* of recalled products
- ☐ when providing soap, soap must meet the following requirements:
  - plain, non antibacterial
  - dispensed in liquid, foam or powder form.

\*The FDA list of recalled products can be found at <https://www.fda.gov/drugs/drug-safety-and-availability/fda-updates-hand-sanitizers-methanol>

#### 4. Procurement and Maintenance Guidelines

Requires the following inventory management and maintenance procedures:

- ☐ managing inventory of hand hygiene supplies (soap, sanitizer, and paper towels) weekly
- ☐ restocking supplies at all hand hygiene stations to meet demand, at a minimum of **once** daily.
- ☐ **twice** daily cleaning of sinks, faucets, soap dispensers, towel dispensers, counters, door handles, and countertops.

#### 5. Placement Plan

Requires hand hygiene stations be located in **all** of the following areas, as applicable. Hand hygiene stations with qualifying hand washing provisions, do not need to include hand sanitizer:

- ☐ main building entryways
- ☐ restrooms
- ☐ break areas
- ☐ a minimum of **one** on each floor within the project.

## 2.4 Health Promotion Signage

# Establish a Health Promotion Signage Protocol

*Minimum Requirement Strategy*  
*Points Allocated 6.36%*

## Rationale

Educational health promotion signage provides effective prompts that increase awareness of new building policies and expectations supporting improved compliance and reducing person-to-person spread of contagious diseases.

and is essential for the successful implementation and adoption of new policies and the establishment of new norms within a community. Without educational signage, implementation of new policies can decrease significantly.

Strategy 2.4 is a Minimum Requirement because health promotion signage is a proven communication method

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## Requirements

Establish and implement a health promotion signage protocol that is at least as rigorous as the Fitwel Health Promotion Signage Protocol (can be found on page 64 or downloaded at [www.fitwel.org/fitwel-standards](http://www.fitwel.org/fitwel-standards))

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## Compliance Documentation

Submit the official health promotion signage protocol

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*For pursuit Asset Approval, project teams must provide a narrative upon submission detailing the following:*

1. that the hand hygiene signage is located within all of the following areas in the asset:
  - bathrooms
  - kitchens and/or kitchenettes
  - hand-hygiene stations



2. that at least one sign specific to a contagious disease outbreak is, or will be, located within the following areas during a contagious disease outbreak\*:
  - common spaces (such as fitness and exercise rooms, lactation rooms, multipurpose rooms, break areas, game rooms, or other spaces designated for shared activity)
  - shared kitchens (including kitchenettes, snack bars, or other areas that are used for shared eating or food preparation)
  - lobbies
  - hallways
  - elevators
  - stairs
3. that the qualifying signage has been selected and posted in the asset, as follows
  - a minimum of one hand hygiene sign
  - a minimum of three signs to be used during a contagious disease outbreak, as defined by the national, regional, and/or local public health authority

# Fitwel Health Promotion Signage Protocol

This document provides project teams with a list of the required elements that must be included in a health promotion signage protocol. Project teams can either use this document as a guide to establish and implement a qualifying protocol or highlight the required sections in existing policies or protocols.

A qualifying protocol for health promotion signage must include the following:

## 1. Implementation

- ☐ when implementing the protocol in multi-tenant commercial and residential buildings, the protocol must apply to all areas under the control of the building management, including common elevator banks on tenant floors.
- ☐ when implementing the protocol in single tenant buildings and commercial interior spaces, the protocol must apply to all areas within tenant spaces.

## 2. Hand Hygiene Signage

Requires the placement of hand hygiene signage that meets the following:

- ☐ Purpose: Requires that signage specific to hand hygiene target improved hand washing or hand sanitizing practices (see signage messaging section 4 below).
- ☐ Placement: Requires the permanent placement of hand hygiene signage in **all** the following areas when provided on site, as applicable to the building or space:
  - bathrooms
  - kitchens and/or kitchenettes
  - hand-hygiene stations.

## 3. Contagious Disease Outbreak Signage:

Requires the placement of contagious disease signage during a contagious disease outbreak, that meets the following:

- ☐ Purpose: Requires that signage specific to a contagious disease outbreak\*, as defined by the national, regional and/or local public health authority, target a minimum of three of the following (see signage messaging section 4 below):
  - physical distancing guidance
  - face covering guidance

- cleaning protocol for wiping down high-touch surfaces after use (High-touch surfaces include, but are not limited to, door handles/knobs, elevator call buttons, handrails, light switches, faucets, drinking water stations, kitchen equipment, countertops, shared office equipment, and other surfaces that are frequently touched by occupants).
  - reminders to stay home when sick
  - coughing and sneezing etiquette
- ☐ Placement: Requires placement of a minimum of **one** sign specific to a contagious disease outbreak\* in all of the following spaces when provided on site, as applicable to the building or space:
- common activity spaces (such as fitness and exercise rooms, lactation rooms, multipurpose rooms, break areas, game rooms, or other spaces designated for shared activity)
  - shared kitchens (including kitchenettes, snack bars, or other areas that are used for shared eating or food preparation)
  - shared bathrooms
  - lobbies
  - hallways
  - elevators
  - stairs.

#### 4. Signage Messaging

Requires inclusion of educational language on all qualifying signage (see 2 and 3 above) that clarifies the health benefits associated with the signage message. Sample educational language below. For hand hygiene signage, educational language must also include language that clarifies how to effectively wash or sanitize hands.

- ☐ Sample educational language for hand hygiene signage:
- Sanitizing hands kills germs.
  - Wash your hands for 20 seconds to effectively kill germs
- ☐ Sample educational language for contagious disease outbreak signage:
- Maintain physical distancing to slow the spread.
  - Do your part. Wear a mask to protect our community.
  - Feeling sick? Head home to keep others safe.
  - Clean up after yourself to reduce the spread of germs.
  - Cover your cough to help prevent infection spread.

\*Contagious disease outbreak signage is only required to be posted during times of an outbreak or pandemic, as specified by the national, regional, or local public health authority

## 2.5 Specialized Health Programming and Services

# Establish a Specialized Health Programming and Services Protocol

*Points Allocated 6.06% / Alternative Compliance 5.15%*

## Rationale

A specialized health programming and services protocol provides consistent access to preventative healthcare services and stress support as well as programs

targeting increased physical activity and nutrition, preventing disease morbidity.

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## Requirements

Establish and implement a protocol for offering regular health programming and services that:

1. is at least as rigorous as the Fitwel Health Programming and Services Protocol (can be found on page 68 or downloaded at [www.fitwel.org/fitwel-standards](http://www.fitwel.org/fitwel-standards))
2. is included in either relevant leases or a tenant manual

## Alternative Compliance:

Establish and implement a plan for offering regular health programming and services protocol that:

1. is at least as rigorous as all of the following sections of the Fitwel Health Programming and Services Protocol (can be found on page 68 or downloaded at [www.fitwel.org/fitwel-standards](http://www.fitwel.org/fitwel-standards)):
  - Asset Type Applicability
  - Accessibility
  - Publicity
  - Healthcare Services and Programming
  - Continuity Plan
2. is included in either relevant leases or a tenant manual (for multi-tenant commercial and residential buildings, only).

## Compliance Documentation:

Submit all of the following:

1. the official qualifying health programming and services protocol
2. an official statement detailing how the programming and services protocol is shared with tenants

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*For pursuit of Asset Approval, project teams must provide a narrative upon submission, detailing the following:*

1. how the programming and services are publicized to eligible employees
2. the types of programming and services that are offered. Only qualifying programming and services outlined in the attached protocol qualify
3. the schedule of the qualifying programming and services

Note:

- Official statements must be dated and on company letterhead
- Official protocols must include protocol duration dates and on company letterhead

# Fitwel Health Programming and Services Protocol

This document provides project teams with a list of the required elements that must be included in a health programming and services protocol. Project teams can either use this document as a guide to establish and implement a qualifying protocol or highlight the required sections in existing policies or protocols.

A qualifying protocol for health promotion programming and services must include the following:

## 1. Implementation

- ☐ when implementing the protocol in multi-tenant commercial buildings, the protocol must apply to all full-time employees of the areas under the control of the building management.
- ☐ when implementing the protocol in residential buildings, the protocol must apply to all full-time employees of the areas under control of the building management, and all residents.
- ☐ when implementing the protocol in single tenant buildings and commercial interior spaces, the protocol must apply to all full-time employees of tenant spaces.

## 2. Accessibility

Requires that services and programs are accessible and free of charge to the applicable occupants.

## 3. Publicity

Requires that services and programs are publicized to all eligible employees through **one** of the following:

- ☐ a digital platform, such as a website, digital application, or display screen in common areas.
- ☐ communication material, such as notification emails or newsletters.

## 4. Healthcare Services and Programming

Require establishing a minimum of **one** healthcare service or program that:

- ☐ is offered a minimum of twice per year (biannually)
- ☐ targets increasing access to health care service(s) through educational sessions, vaccination clinics, contagious disease testing, preventive screening, health insurance enrollment events, or another similar program.

## 5. Stress Support Services and Programming

Requires establishing a minimum of **one** stress support service or program that:

- ☐ is offered a minimum of once per month
- ☐ targets increasing access to stress support through meditation classes, mental telehealth services, mental health counseling, yoga sessions, lectures, or another similar program.

## 6. Fitness or Nutrition Services and Programming

Requires establishing a minimum of **one** fitness or nutrition service or program that:

- ☐ is offered a minimum of once per month.
- ☐ targets **one** of the following categories:
  - fitness program(s), such as exercise classes, walking groups, running clubs, dance classes, cycling groups, aerobics courses, active commuting programs.
  - nutrition program(s), such as healthy cooking classes/events or gardening workshops.

## 7. Continuity Plan

Requires a continuity plan that details how the identified programs and services will continue in the event of a long-term closure (2 weeks or more) or significant reduction in occupancy (more than 25%).\*

\*Services or programs can be in-person or virtual. Programming or services provided by a third-party through employers (such as through insurance or an employee assistance program) may qualify, if all of the subsequent requirements are met. When services or programs are virtual, a continuity plan is not required.

## 2.5.1 Social Support Groups

# Establish a Social Support Group Protocol

*Dependent Strategy*

*Points Allocated 1.52%*

## Rationale

Social support groups provide a safe space to discuss challenges or celebrate achievements, contributing to

increased social interaction and participation in available health programming.

---

## Requirements

Establish and implement a protocol for offering access to social support groups that:

1. is at least as rigorous as the Fitwel Social Support Group Protocol (can be found on page 71 or downloaded at [www.fitwel.org/fitwel-standards](http://www.fitwel.org/fitwel-standards))
2. is included in either relevant leases or a tenant manual

\*Compliance with Strategy 2.5 is required in order to pursue Strategy 2.5.1.

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## Compliance Documentation

Submit all of the following:

1. the official social support group protocol
2. an official statement detailing how the social support group protocol is shared with eligible employees.

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*For pursuit of seeking Asset Approval, project teams must provide a narrative upon submission, detailing the following:*

1. the types of social support groups that are offered
2. the schedule of the social support group meetings
3. the health and wellness continuity plan where applicable



# Fitwel Social Support Group Protocol

This document provides project teams with a list of the required elements that must be included in a social support group protocol. Project teams can either use this document as a guide to establish and implement a qualifying protocol or highlight the required sections in existing policies or protocols.

A qualifying protocol for social support groups must include the following:

## 1. Implementation

- ☐ when implementing the protocol in multi-tenant commercial buildings, the protocol must apply to all full-time employees of the areas under the control of the building management
- ☐ when implementing the protocol in residential buildings, the protocol must apply to all full-time employees of the areas under control of the building management, and all residents.
- ☐ when implementing the protocol in single tenant buildings and commercial interior spaces, the protocol must apply to all full-time employees of tenant spaces.

## 2. Publicity

Requires groups be publicized to all eligible employees through **one** of the following:

- ☐ a digital platform, such as a website, digital application, or display screen in common areas.
- ☐ communication material, such as notification emails or newsletters.

## 3. Inclusion

Requires inclusion of groups that fall into a minimum of:

- ☐ **one** of the following identity groups:
  - gender
  - People Of Color
  - illness
  - (Dis)ability
  - LGBTQ+
- ☐ **one** of the following life stage and interest groups:
  - bereavement or loss
  - parents
  - solo dwellers
  - caregivers
  - managers

- essential workers
- expectant mothers
- special interest groups such as advocacy, athletics, or arts

#### 4. Scheduling

Requires a schedule that permits the groups to meet at least **once** a month.

#### 5. Continuity Plan

Requires a continuity plan that details how the identified groups will continue to meet virtually in the event of a long-term closure (2 weeks or more) or significant reduction in occupancy (more than 25%). When social support groups are virtual, a continuity plan is not required.

#### 6. Growth

Requires a protocol for recommending of new social support groups

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## SECTION 3

# Build Occupant Trust

Section 3 of the Fitwel Viral Response module features strategies specifically focused on increasing occupants' sense of safety and promoting mental health.

Perception of risk and levels of trust are interrelated, and both can have a significant impact on stress, anxiety, and other mental health outcomes.<sup>[1]</sup> When individuals perceive something as risky, they may be slower to place trust in others, which can ultimately take a toll on mental health.

According to the World Health Organization (WHO), depression and anxiety are the first and sixth leading contributors to global disability, respectively.<sup>[2]</sup> During an average year in the United States, approximately 43.6 adults (18+) suffer from mental illness, and 9.8 million have a seriously debilitating mental illness.<sup>[3]</sup> Similarly, the Mental Health Foundation in the United Kingdom found that psychological conditions result in 70 million lost work days, costing employers approximately £2.4 billion annually in the UK.<sup>[4]</sup> Feelings of uncertainty can exacerbate these already high rates of stress, anxiety, and depression, highlighting the importance of building trust within the spaces where we live, work, socialize, and study.

In the workplace, substantial and clear communication that invites employee participation has been shown to help build trust with employees.<sup>[5]</sup> Likewise, within a multifamily residential environment, building owners

and property managers have a vested interest in maintaining and enhancing the trust of residents. Quality communication is vital to building that trust, as it can help address and even ease resident concerns. One study based on focus groups at two multifamily affordable housing properties in Atlanta found that resident satisfaction was based in part on how effectively the property management communicated with residents.<sup>[6]</sup>

Communicating during an emergency is both critical and challenging, and the groundwork should be laid well before the emergency occurs. A contagious disease outbreak preparedness plan can detail, among other things, how to communicate effectively and clearly with occupants and employees during a rapidly-evolving emergency. Making sure occupants and employees know about and understand that preparedness plan can help them respond appropriately when the time comes, and increase their own sense of security. In addition, a comprehensive contagious disease outbreak preparedness plan should include details relating to emergency preparation protocols, case investigation, and tactics for preventing community spread. This kind of planning is considered a best practice in infection control.<sup>[7]</sup>

[1] Siegrist, M. (2019). Trust and Risk Perception: A Critical Review of the Literature. Risk Analysis.

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[7] Wong, A. T. Y., et al. (2017). From SARS to Avian Influenza Preparedness in Hong Kong. *Clinical Infectious Diseases*, 64(suppl\_2), S98-S104.

A stakeholder collaboration plan can further strengthen emergency planning and preparedness.<sup>[8]</sup> Coordinating directly with those who offer diverse perspectives—such as facility managers, building owners, and tenants, among others—can shed light on a variety of concerns that may otherwise have gone unnoticed or not been anticipated. Creating systems for stakeholder feedback through surveys or other mechanisms not only brings attention to potentially unnoticed or underrecognized concerns, but can also create more buy-in from community members.<sup>[9]</sup>

When it comes to preventing the spread of contagious disease, another key trust-building component is ensuring that ill workers don't feel pressured to come into work.

***One study found that universal paid sick days reduced workplace infections by 5.9%. In addition, providing 1 or 2 paid sick days specifically for the flu reduced workplace infections by 25.3% and 39.2%, respectively.***<sup>[10]</sup>

Studies also indicate that having access to paid sick leave is associated with higher use of preventative health services such as getting a flu shot or seeing a doctor for a medical visit.<sup>[11]</sup> Providing employees with paid sick leave can contribute to creating a culture of health that fosters feelings of trust in both management as well as fellow occupants.

Demonstrating investment in employees and flexibility in the midst of crises such as a pandemic can help build community trust and good will. One way to do this is through a family support policy that allows for flexible scheduling, or time off to care for a spouse, partner, child, parent, or other family member with a serious health condition.<sup>[12]</sup> In addition to improving employee

attitudes, these protocols also help ensure that those who may have been exposed to a contagious disease feel comfortable staying home as needed, which can help prevent further spread.

***One study explains, "In the context of various risks, if knowledge is missing, trust is used to assess the benefits and the risks associated with a hazard."***<sup>[13]</sup>

In the case of novel contagious diseases, the threat is invisible and existential and information can be highly-technical and evolving. Under such conditions, it is common to hesitate to place trust in others, reinforcing the importance of ongoing trust-building tactics.

The strategies outlined in Section 3 directly address the need to create new, and strengthen existing protocols and practices, to ensure individuals feel supported, safe, and heard in the spaces they occupy daily.

→ **Establish a Contagious Disease Outbreak Preparedness Protocol**

→ **Establish a Business Continuity Protocol**

→ **Establish a Mental Health First Aid Responder Training Protocol**

→ **Establish Viral Response Design Protocol**

→ **Establish an Enhanced Stakeholder Collaboration Protocol**

→ **Establish a Communication Protocol**

→ **Establish a Paid Sick Leave Policy**

→ **Establish a Family Support Policy**

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[8] Khan, Y., et al. (2015). The evidence base of primary research in public health emergency preparedness: A scoping review and stakeholder consultation. *BMC Public Health*, 15(1), 432.

[9] National Research Council 2001. *Learning from Our Buildings: A State-of-the-Practice Summary of Post-Occupancy Evaluation*. Washington, DC: The National Academies Press.

[10] Kumar, S., Grefenstette, J. J., Galloway, D., Albert, S. M., & Burke, D. S. (2013). Policies to reduce influenza in the workplace: impact assessments using an agent-based model. *American Journal of Public Health*, 103(8), 1406-1411.

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## 3.1 Contagious Disease Outbreak Preparedness Protocol

# Establish a Contagious Disease Outbreak Preparedness Protocol

*Minimum requirement Strategy*  
*Points Allocated 6.24%*

## Rationale

A contagious disease outbreak preparedness protocol strengthens pandemic response and ensures awareness of protocols minimizing uncertainty and supporting sustained occupant trust.

Strategy 3.1 is a Minimum Requirement because preparation in a time of crisis has been shown to be

essential to the execution of an effective response to a crisis, such as a pandemic. Without a contagious disease outbreak preparedness protocol, the likelihood of experiencing degradation of occupant trust and a failed response increases considerably.

---

## Requirements

Establish a contagious disease outbreak preparedness protocol that:

1. is at least as rigorous as the Fitwel Contagious Disease Outbreak Preparedness Protocol (can be found on page 81 or downloaded at [www.fitwel.org/fitwel-standards](http://www.fitwel.org/fitwel-standards))
2. is included in either relevant leases or a tenant manual

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## Compliance Documentation

Submit all of the following:

1. the official contagious disease outbreak preparedness protocol
2. an official statement detailing how the plan is shared with tenants, for multi-tenant commercial and residential buildings.

*For pursuit of Asset Approval, no additional documentation is required. Project teams must confirm the protocol is implemented within the asset upon submission.*

Note:

- Official statements must be dated and on company letterhead
- Official protocols must include protocol duration dates and be on company letterhead

# Fitwel Contagious Disease Outbreak Preparedness Protocol

This document provides project teams with a list of the required elements that must be included in a contagious disease outbreak preparedness protocol. Project teams can either use this document as a guide to establish and implement a qualifying protocol or highlight the required sections in existing policies or protocols.

A qualifying contagious disease outbreak preparedness protocol must include the following:

## 1. Implementation

- ☐ when implementing the protocol in multi-tenant commercial and residential buildings, the protocol must apply to all areas under the control of the building management, including common elevator banks on tenant floors.
- ☐ when implementing the protocol in single tenant buildings and commercial interior spaces, the protocol must apply to all areas within tenant spaces.

## 2. Emergency Preparation

Requires the identification and detailing of the following preparations put in place to protect against a contagious disease outbreak within the building.

- ☐ Resources
  - A procurement plan for the following emergency resources:
    - Face coverings and/or other PPE such as (surgical masks, reusable gloves, and eye protection)
    - Hand sanitizer
    - Disinfectants and cleaning supplies
    - Signage.
- ☐ Task force
  - A contagious disease response task force(s) to convene in the event of a contagious disease outbreak, which can include representation from the following stakeholder groups:
    - relevant training experts (for example, experts on, PPE, cleaning and disinfecting procedures, mental health first aid) to conduct trainings
    - supply managers to acquire, manage, and distribute resources
    - building operations and maintenance managers to prepare and inspect the building systems
    - human resources or personnel managers to facilitate communication and ensure organizations are implementing precautions and protocol.

☐ Training

- Adequate training to prepare the task force(s) and/or occupants in contagious disease outbreak preparedness, readiness and response.

### 3. Case Investigation

Requires the following procedural and operational strategies to ensure buildings are prepared in case of a confirmed or suspected case related to the contagious disease outbreak:

- ☐ a protocol for individuals to self-report when they think they have been exposed or infected by COVID-19 or another virus against which a majority of the population has not been inoculated
- ☐ a protocol for sharing when there has been a confirmed or suspected case of a virus against which as majority of the population has not been inoculated
- ☐ disinfection protocol implemented when a suspected or confirmed case is identified.
- ☐ a method to share all above protocols with all occupants.

### 4. Preventing Community Spread of the Disease

Requires the following procedural and operational strategies to prevent and mitigate risk of spread.

- ☐ Procedural changes, as applicable:
  - food and beverage services
  - guest and visitor policy
  - travel policies
- ☐ Building or space closures and access:
  - on-site amenities, as applicable
    - ensure locker rooms, showers, restrooms, conference rooms are disinfected twice daily
    - determine maximum number of people to be allowed in common areas
    - close or limit occupancy for the following amenities, as applicable:
      - fitness center
      - exercise rooms
      - conference rooms
      - shared kitchens
      - mail and delivery rooms
      - wellness rooms
- ☐ Infection monitoring
  - establish a wellness questionnaire that:
    - can be used during a contagious disease outbreak, as defined by the national, regional, and/or local public health authority
    - assesses risk of exposure
    - assesses symptoms

- is completed by employees before returning to a building or space (guidance: frequency can vary, but best practice is to require completion weekly during a contagious disease outbreak, as defined by the national, regional, and/or local public health authority).
- be administered through **one** of the following methods:
  - a website
  - digital application
  - text message or email response
  - a paper form.

## 5. Communication

Requires a process to ensure that occupants are notified about **all** of the following in the event of a contagious disease outbreak, long-term closure (2 weeks or more) or a significant reduction in occupancy:

- ☐ procedural and operational changes
- ☐ building or space closures or changes in access
- ☐ reliable public health resources and healthcare access information.

### 3.1.1 Business Continuity Protocol

## Establish a Business Continuity Protocol

*Dependent Strategy*

*Points Allocated 1.52%*

### Rationale

A business continuity protocol establishes expectations in the event of a contagious disease outbreak and

reduces uncertainty increasing preparation and occupant confidence.

---

### Requirements

Establish and implement a business continuity protocol that is at least as rigorous as the Fitwel Business Continuity Protocol (can be found on page 85 or downloaded at [www.fitwel.org/fitwel-standards](http://www.fitwel.org/fitwel-standards))

\*Compliance with Strategy 3.1 is required in order to pursue Strategy 3.1.1.

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### Compliance Documentation

Submit all of the following:

1. the official qualifying business continuity protocol.
2. an official statement detailing how the plan is shared with tenants, for multi-tenant commercial and residential buildings

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*For pursuit of Asset Approval, no additional documentation is required. Project teams must confirm the protocol is implemented within the asset upon submission.*

Note:

- Official statements must be dated and on company letterhead
- Official protocols must include protocol duration dates and be on company letterhead

# Fitwel Business Continuity Protocol

This document provides project teams with a list of the required elements that must be included in a business continuity protocol. Project teams can either use this document as a guide to establish and implement a qualifying protocol or highlight the required sections in existing policies or protocols.

A qualifying protocol for business continuity must include the following:

## 1. Implementation

- ☐ when implementing the protocol in multi-tenant commercial and residential buildings, the protocol must apply to all full-time employees of the areas under the control of the building management.
- ☐ when implementing the protocol in single tenant buildings and commercial interior spaces, the protocol must apply to all full-time employees of tenant spaces.

## 2. Implementation Requirements

Requires implementation in the event of a long-term closure (2 weeks or more) or significant reduction in occupancy (more than 25%).

## 3. Procedural Requirements

Requires protocols that address the following:

- ☐ operational procedures, for example:
  - establishing a plan to control access to the building
  - creating a physical distancing plan
  - establishing a plan to monitor and control density
  - establishing a contingency plan for supply chain disruptions
  - identifying potential backup vendors and/or contractors.
- ☐ personnel procedures, for example:
  - identifying the essential on-site workforce
  - assigning roles and establishing procedures for critical operational departments (Human Resources, IT, Management and Administration, Operations and Maintenance, etc.)
- ☐ virtual work supports, for example:
  - virtual trainings
  - virtual conferencing and remote work technology
  - provision of work from home support (stipends, purchase program for work from home equipment, ergonomic guidance, etc.).

### 3.1.2 Mental Health First Aid

## Establish a Mental Health First Responder Training Protocol

*Dependent Strategy*

*Points Allocated 1.52%*

### Rationale

Mental health first aid responder training expands capacity to address proven increases in anxiety, stress, depression, substance use disorders, suicidality or self

harm, and abuse or neglect associated with contagious disease outbreaks and other crisis situations.

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### Requirements

Establish and implement a qualifying mental health first aid responder training protocol that:

1. is at least as rigorous as the Fitwel Mental Health First Aid Responder Training Protocol (can be found on page 88 or downloaded at [www.fitwel.org/fitwel-standards](http://www.fitwel.org/fitwel-standards))
2. is included in either relevant leases or a tenant manual

\*Compliance with Strategy 3.1 is required in order to pursue Strategy 3.1.2.

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### Compliance Documentation:

Submit all of the following:

1. the official mental health first responder training protocol
2. an official statement detailing how the qualifying protocol is shared with tenants



*For pursuit of seeking Asset Approval, project teams must provide a narrative upon submission, detailing the following:*

1. the number of occupants within the building or space.
2. the number of occupants receiving training.
3. the number of members in the viral response task force.

Note:

- Official statements must be dated and on company letterhead
- Official protocols must include protocol duration dates and be on company letterhead

# Fitwel Mental Health First Aid Responder Training Protocol

This document provides project teams with a list of the required elements that must be included in a mental health first aid responder training protocol. Project teams can either use this document as a guide to establish and implement a qualifying protocol or highlight the required sections in existing policies or protocols.

A qualifying protocol for mental health first aid must include the following:

## 1. Implementation

- ☐ when implementing the protocol in multi-tenant commercial buildings, the protocol must apply to all full-time employees of the areas under the control of the building management.
- ☐ when implementing the protocol in residential buildings, the protocol must apply to all full-time employees of the areas under control of the building management, and all residents.
- ☐ when implementing the protocol in single tenant buildings and commercial interior spaces, the protocol must apply to all full-time employees of tenant spaces.

## 2. Execution

Requires execution in the event of a contagious disease outbreak, as defined by the national, regional, and/or local public health authority.

## 3. Training Requirements

Requires a description of mental health first aid training that meets the following guidelines:

- ☐ delivered by a certified mental health professional.
- ☐ educates trainees on how to identify, understand and respond to signs of mental health issues, for example:
  - anxiety
  - acute stress disorders
  - depression
  - substance use disorders
  - suicidality or self-harm
  - abuse or neglect.
- ☐ educates trainees on de-escalation techniques.

## 4. Training Accessibility

Requires that training is:

- ☐ available to applicable occupants upon request.
- ☐ delivered to:
  - the contagious disease response task force
  - at least one individual for every 100 applicable occupants, including task force members.

\*Qualifying MHFA Training Resources can be found at the National Council for Behavioral Health's website <https://www.mentalhealthfirstaid.org/>

### 3.1.3 Viral Response Design Protocol

## Establish Viral Response Design Protocol

*Dependent Strategy*

*Points Allocated 1.52%*

### Rationale

A viral response design protocol ensures tactics aimed at supporting physical distancing and proper hygiene are in place and ready to implement in the event of a

contagious disease outbreak, mitigating risk of person-to-person transmission.

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### Requirements

Establish and implement a qualifying viral response design protocol that:

1. is at least as rigorous as the Fitwel Viral Response Design Protocol (can be found on page 92 or downloaded at [www.fitwel.org/fitwel-standards](http://www.fitwel.org/fitwel-standards))
2. is included in either relevant leases or a tenant manual

\*Compliance with Strategy 3.1 is required in order to pursue Strategy 3.1.3

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### Compliance Documentation

Submit all of the following:

1. the official viral response design protocol
2. an official statement detailing how the qualifying protocol is being shared with tenants

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*For pursuit of Asset Approval, project teams must provide a narrative upon submission detailing the following:*

1. the qualifying design solutions to limit person-to-person transmission.
2. the qualifying design solutions to limit surface-to-person transmission.
3. the locations of the qualifying design solutions for person-to-person and surface-to-person transmission.

Note:

- Official statements must be dated and on company letterhead
- Official protocols must include protocol duration dates and be on company letterhead

# Fitwel Viral Response Design Protocol

This document provides project teams with a list of the required elements that must be included in a viral response design protocol. Project teams can either use this document as a guide to establish and implement a qualifying protocol or highlight the required sections in existing policies or protocols.

A qualifying protocol for viral response design must include the following:

## 1. Implementation

- ☐ when implementing the protocol in multi-tenant commercial and residential buildings, the protocol must apply to all areas under the control of the building management, including common elevator banks on tenant floors.
- ☐ when implementing the protocol in single tenant buildings and commercial interior spaces, the protocol must apply to all areas within tenant spaces.

## 2. Execution

Requires execution during a contagious disease outbreak, as defined by the national, regional and/or local public health authority.

## 3. Spaces of Concern

Requires qualifying design solutions to minimize person-to-person transmission in areas where employees and residents are in close proximity, for example:

- ☐ work stations
- ☐ common activity spaces (such as fitness and exercise rooms, lactation rooms, multipurpose rooms, break areas, game rooms, or other spaces designated for shared activity)
- ☐ shared kitchens
- ☐ shared bathrooms
- ☐ lobbies and reception areas
- ☐ hallways
- ☐ elevators
- ☐ food outlets.

## 4. Person-to-Person Transmission

Requires qualifying design solutions to minimize person to person transmission, for example:

- visual markers for maintaining six feet distance between people, such as signage, floor stickers, sensors, etc.

- sneeze guards
- protocols to limit capacity
- rearranging layouts to maintain distance between occupants or limit capacity
- implementing clear circulation protocols in hallways
- encouraging use of stairs to limit elevator capacity.

## 5. Surface-to-Person Transmission

Requires qualifying design solutions to minimize surface-to-person transmission at high-touch surfaces\*, for example:

- ☐ touchless technology
- ☐ removing or rearranging equipment to minimize use
- ☐ visual markers to indicate high-touch surfaces
- ☐ keeping doors open where possible to limit touch points

\* high-touch surfaces include, but are not limited to, door handles/knobs, elevator call buttons, handrails, light switches, faucets, drinking water stations, kitchen equipment, countertops, shared office equipment, and other surfaces that are frequently touched by occupants.

## 3.2 Enhanced Stakeholder Collaboration Protocol

# Establish an Enhanced Stakeholder Collaboration Protocol

*Points Allocated 5.03%*

## Rationale

A stakeholder collaboration protocol establishes a framework to engage and prioritize stakeholder concerns and insights, strengthening preparedness and response efficacy in the event of a contagious disease outbreak.

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## Strategy Requirements

Establish and implement an enhanced stakeholder collaboration protocol that is at least as rigorous as the Fitwel Enhanced Stakeholder Collaboration Protocol (can be found on page 95 or downloaded at [www.fitwel.org/fitwel-standards](http://www.fitwel.org/fitwel-standards)).

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## Compliance Documentation

Submit the official stakeholder collaboration protocol.

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*For pursuit of Asset Approval, no additional documentation is required. Project teams must confirm the protocol is implemented within asset upon submission.*

Note:

- Official protocols must include protocol duration dates and be on company letterhead.



# Fitwel Enhanced Stakeholder Collaboration Protocol

This document provides project teams with a list of the required elements that must be included in a stakeholder collaboration protocol. Project teams can either use this document as a guide to establish and implement a qualifying protocol or highlight the required sections in existing policies or protocols.

A qualifying protocol for stakeholder collaboration must include the following:

## 1. Implementation

- ☐ when implementing the protocol in multi-tenant commercial and residential buildings, the protocol must apply to all full-time employees of the areas under the control of the building management.
- ☐ when implementing the protocol in single tenant buildings and commercial interior spaces, the protocol must apply to all full-time employees of tenant spaces.

## 2. Purpose

The protocol must embody a mission to improve occupant health.

## 3. Stakeholders

Requires the inclusion of internal and external stakeholders\* during the collaborative process from the following list, as applicable to the asset:

- ☐ building owner
- ☐ building management
- ☐ tenants
- ☐ employees
- ☐ residents
- ☐ third party contractors
- ☐ suppliers.

\*Internal stakeholders are ones that are part of the company's organizational structure such as employees or management, while external stakeholders are ones that are external to the company's organizational structure, such as tenants (for multi-tenant buildings), building management (for commercial interior spaces), residents (for residential buildings), third party contractors or suppliers.

#### 4. Stakeholder Feedback Topics

Requires the distribution of an occupant survey or another feedback mechanism that allows for occupants to respond to and evaluate practices and services, which may include:

- ☐ communication practices
- ☐ health programming
- ☐ cleaning practices
- ☐ healthcare services
- ☐ support group services
- ☐ employee benefits.

#### 5. Communicating with Stakeholders

Requires a platform, such as a website, email protocol, or online application, for:

- ☐ sharing best practices among external and internal stakeholders.
- ☐ communicating new protocols and guidelines internally with occupants.
- ☐ providing real-time updates for external and internal stakeholders and occupants.

## 3.3 Communication Protocol

# Establish a Communication Protocol

*Minimum Requirement Strategy*  
*Points Allocated 6.24%*

## Rationale

A communication protocol increases awareness of new policies and enhances transparency, contributing to enhanced trust and a strengthened relationship between operators and occupants.

Strategy 3.3 is a Minimum Requirement because strong communication practices have been shown to

significantly improve compliance with new policies and ensure access to all relevant information but also increase acceptance of the implemented standards. Without effective communication policies cannot be broadly adopted and uncertainty will increase significantly.

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## Requirements

Establish and implement a communication protocol that is at least as rigorous as the Fitwel Communication Protocol (can be found on page 98 or downloaded at [www.fitwel.org/fitwel-standards](http://www.fitwel.org/fitwel-standards)).

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## Compliance Documentation

Submit the official communication protocol.

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*For pursuit of Asset Approval, no additional documentation is required. Project teams must confirm the protocol is implemented within the asset upon submission.*

Note: Official protocols must include protocol duration dates and be on company letterhead

# Fitwel Communication Protocol

This document provides project teams with a list of the required elements that must be included in a communication protocol. Project teams can either use this document as a guide to establish and implement a qualifying protocol or highlight the required sections in existing policies or protocols.

A qualifying protocol for communications must include the following:

## 1. Implementation

- ☐ when implementing the protocol in multi-tenant commercial and residential buildings, the protocol must apply to all full-time employees of the areas under the control of the building management.
- ☐ when implementing the protocol in single tenant buildings and commercial interior spaces, the protocol must apply to all full-time employees of tenant spaces.

## 2. Communication

Requires protocols for distributing viral response information to occupants. Viral response information may include, but is not limited to the following:

- ☐ disease outbreak preparedness plan
- ☐ summary of enhanced cleaning and maintenance protocol
- ☐ summary of enhanced indoor air quality policy
- ☐ health programming information
- ☐ reintegration plans
- ☐ changes to hours of operation
- ☐ face covering requirements.
- ☐ any updates to operational policies or regulations

## 3. Occupant Notification Mandates

Requires notification of occupants in the following situations:

- ☐ confirmed or suspected viral cases occur on-site (infected individuals' identity should not be disclosed)
- ☐ building, room, or amenity closures, as applicable.

## 4. Occupant Communication

Requires information be distributed through a minimum of **one** of the following mediums:

- ☐ newsletter or email

- ☐ website update
- ☐ webinar
- ☐ workshop or training

## **5. Communication Requirements**

Requires regular updates be shared with occupants during a contagious disease outbreak, as defined by the national, regional and/or local public health authority.

## **6. Chain of Communication**

Requires chain of communication, which may include, but is not limited to the following:

- ☐ Who notifies each employee of updates
- ☐ Order of notifications
- ☐ How each employee is notified of updates
- ☐ Which employees need to be notified of certain updates

## 3.4 Paid Sick Leave Policy

# Establish a Paid Sick Leave Policy

*Points Allocated 6.24% / Alternative Compliance 5.33%*

## Rationale

A paid sick leave policy ensures all employees are able to stay home when sick without fear of negative retribution or retaliation, increasing the likelihood that sick individuals do not go into work when contagious.

Strategy 3.4 is a Minimum Requirement because paid sick leave has been shown to have a significant impact

on workplace transmission of a variety of contagious diseases. Without paid sick leave it becomes much more likely that sick employees will return to work while still contagious.

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## Requirements

Establish a paid sick leave policy that:

1. is at least as rigorous as the Fitwel Paid Sick Leave Policy (can be found on page 102 or downloaded at [www.fitwel.org/fitwel-standards](http://www.fitwel.org/fitwel-standards))
2. is shared with all eligible employees through one of the following:
  - a digital platform, such as a website digital application, or display screen in common areas.
  - communication materials, such as employee handbook, notification emails or newsletters

## Alternative Compliance:

Establish a paid time off policy that:

1. is at least as rigorous as the Fitwel Paid Time Off Policy (can be found on page 103 or downloaded at [www.fitwel.org/fitwel-standards](http://www.fitwel.org/fitwel-standards))
2. is shared with all eligible employees through one of the following:
  - a digital platform, such as a website digital application, or display screen in common areas.
  - communication materials, such as employee

# Compliance Documentation

Submit one of the following:

1. Submit one of the following:
  - an official paid sick leave policy
  - an official paid time off policy (for Alternative Compliance only)
2. Submit an official statement detailing how the qualifying policy is shared with all eligible employees

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*For pursuit of Asset Approval, no additional documentation is required. Project teams must confirm the policy is implemented within the asset upon submission.*

Note:

- Official statements must be dated and on company letterhead
- Official policies must include policy duration dates and be on company letterhead

# Fitwel Paid Sick Leave Policy

This document provides project teams with a policy that can be used as a template and adopted in full to comply with requirements of the Fitwel Paid Sick Leave Policy. Project teams can either use the exact content of this document to establish new policies, or update existing policies by adding any missing components from the below.

A qualifying protocol for paid sick leave must include the following:

## 1. Implementation

- ☐ when implementing the policy in multi-tenant commercial and residential buildings, the policy must apply to all full-time employees of the areas under the control of the building management.
- ☐ when implementing the policy in single tenant and commercial interior spaces, the policy must apply to all full-time employees of tenant spaces.

## 2. Short-Term Sick Leave

All full-time employees are entitled to paid short-term sick leave that:

- ☐ employees accrue a minimum of one hour of paid sick leave for every 40 hours of work
- ☐ employees are entitled to use paid sick leave hours prior to accrual.
- ☐ employees are discouraged from coming into the building or space when sick.
- ☐ advanced notice is not required to take paid sick leave.
- ☐ a note from a medical professional is not needed when fewer than three consecutive sick days are taken.

## 3. Long-Term Sick Leave

All full-time employees are entitled to long-term sick leave that:

- ☐ entitles employees to a minimum of 12 weeks of paid or unpaid sick leave during a 12-month period if experiencing a health condition that hinders ability to perform job duties.
- ☐ entitles employees to a minimum of **one** of the following:
  - flextime (e.g. compressed work week, shifted work week, flexible daily work hours) based on family needs or other considerations
  - telework (working remotely full- or part-time)
  - reduced schedule

## 4. Retaliation

Employers and/or managers are prevented from retaliating against an employee for requesting or using paid or unpaid sick leave in accordance with the policy.



# Fitwel Paid Time Off Policy

This document provides project teams with a policy that can be used as a template and adopted in full to comply with requirements of the Fitwel Paid Time Off Policy. Project teams can either use the exact content of this document to establish new policies, or update existing policies by adding any missing components from the below. Official policies must include policy duration dates and be on company letterhead.

A qualifying paid time off policy must include the following:

## 1. Implementation

- ☐ when implementing the policy in multi-tenant commercial and residential buildings, the policy must apply to all full-time employees of the areas under the control of the building management.
- ☐ when implementing the policy in single tenant and commercial interior spaces, the policy must apply to all full-time employees of tenant spaces.

## 2. Paid Leave

All full-time employees are entitled to paid leave that:

- ☐ meets a minimum of **one** of the following:
  - allows full-time employees, both exempt and non-exempt, regardless of years of services, to accrue PTO at a minimum rate of 4.62 hours per 40 hours of work (15 days annually based on 2,080 hours worked each calendar year)
  - entitles full-times employees, both exempt and non-exempt, to unlimited paid time off annually upon request.
- ☐ discourages employees from coming into the building or space when sick.
- ☐ does not require advanced notice when taking paid sick leave

## 3. Retaliation

Employers and/or managers are prevented from retaliating against an employee for requesting or using paid time off in accordance with the policy.

## 3.5 Family Support Policy

# Establish a Family Support Policy

*Points Allocated 5.03%*

## Rationale

A family support policy ensures all employees are able to work with their employers to adjust their schedule as needed if they need to care for a family member

due to the impacts of a contagious disease outbreak, promoting occupant trust and employee retention.

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## Requirements

Establish and implement a Family Support Policy that:

1. is at least as rigorous as the Fitwel Family Support Policy (can be found on page 105 or downloaded at [www.fitwel.org/fitwel-standards](http://www.fitwel.org/fitwel-standards))
2. is shared with all eligible employees through one of the following:
  - a digital platform, such as a website, digital application, or display screen in common areas
  - communication material, such as employee handbook, notification emails or newsletters

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## Compliance Documentation

Submit all of the following:

1. the official family support policy
2. an official statement detailing how the qualifying policy is shared with all eligible employees

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*For pursuit of Asset Approval, no additional documentation required. Project teams must confirm the policy is implemented within the asset upon submission.*

Note:

- Official statements must be dated and on company letterhead
- Official policies must include policy duration dates and be on company letterhead.

# Fitwel Family Support Policy

This document provides project teams with a template that can be adopted in full to comply with requirements of the Template for Family Support Policy. Project teams can either use the exact content of this document to establish new policies, or update existing policies by adding any missing components from the below.

A qualifying family support policy must include the following:

## 1. Implementation

- ☐ when implementing the policy in multi-tenant commercial and residential buildings, the policy must apply to all full-time employees, exempt and non-exempt, of the areas under the control of the building management.
- ☐ when implementing the policy in single tenant and commercial interior spaces, the policy must apply to all full-time employees, exempt and non-exempt, of tenant spaces.

## 2. Work Support Practices

Full-time employees, exempt and non-exempt, are entitled to at least **two** of the following work support practices in case of a qualifying emergency situation\*:

- ☐ flextime (e.g. compressed work week, shifted work week, flexible daily work hours) based on family needs or other considerations
- ☐ telework (working remotely full- or part-time)
- ☐ reduced schedule
- ☐ paid family leave offering full compensation during the entire period of leave.

## 3. Family Leave

Full-time employees are entitled to a minimum of 12 weeks of paid or unpaid family leave during a 12-month period in the case of a qualifying emergency situation\*\*

\*A Family Support Policy that is available to full-time employees through employer-sponsored health insurance may qualify, if all the other qualifications in this policy are met.

\*\*Any of the following situations qualify as an emergency situation:

- caring for a spouse, partner, child, parent, or other family member with a serious health condition
- loss of childcare or gaps in schooling due to a contagious disease outbreak

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