

Workplace Cleaning Protocol

CEMEX Protocol	CEMEX COVID-19 Workplace Cleaning Guidelines
Purpose of the Protocol	This protocol provides a recommended preventive measures for workplace cleaning during a Pandemic scenario of COVID-19, and disinfecting all places where any risk may exist.
Who does this protocol apply to	This protocol applies to all CEMEX's employees and contractors. The Plant RRT/managers/employees should take responsibility for implementing it.
Disclaimer	This protocol was prepared by CEMEX based on the recommendations of the World Health Organization (" WHO "), external consultants and the experience of the company itself. CEMEX is not responsible for the result of the implementation of the protocol and in no way guarantees the effectiveness of this material to prevent or reduce CORONAVIRUS (COVID-19) infections among its employees or officials. Authorization to use this material is exclusively and limited to consultation. No person or entity will be able to use this material, in whole or in part, for publicity, advertising and/or promotion in any material or media, for any company, products or services. Copyright ©2020 Cemex Innovation Holding AG.

I. Cleaning strategy	
1.	Workplace cleaning and disinfection should follow the same general principles used in healthcare settings: removal of dirt, frequent disinfection and use of a certain set of disinfecting products.
2.	Surfaces that are frequently touched with hands should be cleaned often. This would include (but would not be limited to): Doors in entrance/exiting areas, counters and shelves, desk surfaces, chairs (e.g. arm rests), tables, phones, computer keyboards (especially if shared), counters, light switches, lavatory surfaces, kitchen surfaces and appliances, doorknobs, elevators buttons, handrails, floors and other horizontal surfaces, shared tools and equipment, machinery and truck cabin (clean and disinfect the steering wheel, door handles, frequently used levers and buttons, seats and in general anything you usually touch with your hands).
3.	It is likely that an enhanced cleaning regime will overwhelm a cleaning staff that may be fewer in number than usual. In this case, employee should be responsible for cleaning their own areas and possibly common areas nearby.
4.	It is important to avoid sharing cups, dishes, and cutlery and to ensure that they are thoroughly washed with soap and hot water. If possible, use disposables cutlery, cups and dishes.
5.	Garbage collection, and if necessary, storage points, should be increased and emptied regularly throughout each day.
6.	If a person is suspected of having pandemic-related disease, it is important to thoroughly clean and disinfect their work area along with any other places may they have been.

I. Cleaning strategy	
7.	It is important the early identification of suppliers, prices, stock available, delivery lead time of disposable gloves, detergent, disinfectant and other cleaning products.

II. Cleaning frequency	
1.	The frequency of workplace cleaning will vary based on the severity of the pandemic outbreak, as well as the level of activity at the area. A more severe outbreak (e.g. serious or catastrophic) will require more frequent cleaning to reduce the risk of infection from surface contact. The frequency of cleaning should be balanced with the reduced level of activity in the area that would be expected during a period of high infection.

Area	Phase I	Phase II	Phase III	Comments
Public area (e.g. reception, etc.)	3 times daily before and after workday, plus mid-day	4 times daily	5 times daily	During severe or worse pandemic outbreak, activity in public areas may be substantially decreased
Meeting rooms	After all meetings and at the end of the day	After all meetings and at the end of the day	After all meetings and at the end of the day	Leave time between meetings for cleaning. Meeting frequency substantially reduced during severe or worse pandemic
Lavatory	Current frequency with identified cleaners	Every 2 hours	Every 2 hours	Prefer drying hands with paper towels and dispose in garbage cans
Kitchen/Pantry	Current frequency with identified cleaners	Every 2 hours	Every 2 hours	Do not share kitchen sponges
High touch areas (e.g. light switches, doorknobs, etc.)	Current frequency with identified cleaners	Every 2 hours	Every 2 hours	
Private offices	Before or after workday	Before or after workday	Before or after workday	In addition, clean after individual with pandemic-related disease like symptoms has been in the office. Personnel should be provided

III. Cleaning Products	
1.	A pandemic-related disease could be inactivated by a range of disinfectants including sodium hypochlorite (household bleach– 5 to 10% solution), quaternary ammonia compounds (granular chlorine), alcohol, phenolic disinfectants, peroxygen compounds, other germicides with a tuberculocidal claim on the label. Of these, the disinfectants that are most widely available, most affordable and most often used in health settings are:

appropriate cleaners to clean their own office more frequently, if desired.

Shared office space/cubicles	3 times daily before and after workday, plus mid-day	3 times daily before and after workday, plus mid-day	3 times daily before and after workday, plus mid-day	In addition, clean after individual with pandemic-related disease like symptoms has been in the office. Personnel should be provided appropriate cleaners to clean their own office more frequently, if desired.
------------------------------	--	--	--	--

Disinfectants recommended	Use	Precautions
Sodium hypochlorite: 1000 parts per million of available chlorine, usually achieved by a 1 in 10 dilution of bleach	Disinfection of contaminated hard surfaces	Should be used in well-ventilated areas; Protective clothing required while handling and using undiluted bleach (gloves); Do not mix with strong acids to avoid release of chlorine gas; Corrosive to metals: should not be used on most metal surfaces
Granular chlorine: May be used in place of liquid bleach, if it is unavailable. E.g. Det-Sol 5000 or Diversol can be diluted per manufacturer`s instructions	Disinfection of contaminated hard surfaces	Should be used in well-ventilated areas; Protective clothing required while handling and using undiluted bleach (gloves); Do not mix with strong acids to avoid release of chlorine gas; Corrosive to metals: should not be used on most metal surfaces



Alcohol: Ethyl alcohol 60% or greater (preferred). Isopropyl alcohol 70% or greater

Smooth metal surfaces and other surfaces on which bleach cannot be used; Ethyl alcohol disinfectants are more effective than isopropyl alcohol in disinfecting against viruses. Ethyl alcohol is preferred, if available.

Flammable and toxic; Use in well-ventilated areas; avoid inhalation; keep away from heat sources, electrical equipment, flames, and hot surfaces; allow to dry completely, particularly when using diathermy, as this can cause diathermy burns; do not use for large environmental surfaces such as floors

2.	Instruct and follow directions while using cleaning and sanitizing products. Make sure all personnel is preceded by induction / training on the hazards of such products/chemicals used in the workplace or site.
----	---

IV. Cleaning and disinfecting instructions	
1.	Disinfecting with bleach and water (5- 10% solution), is the most cost-effective way to disinfect surfaces. This is the approach typically utilized in hospitals and health settings. <ul style="list-style-type: none"> a. Bleach must be mixed fresh each day used. Put piece of tape on the bottle and label with the date when made. It should be discarded the next day. b. Let sit for a short amount of time, the rinse disinfectant-treated surfaces, especially those treated with phenolics, with water. In order to avoid respiratory irritation. c. Be careful about using bleach on surfaces that may manage (e.g. some wood surfaces). Use other cleaners, if bleach may damage the surface.
2.	Use disinfectants in accordance with the manufacturer`s instructions, including recommendations for dilution, contact time, shelf-life of batch, and care in handling.
3.	Clean equipment surfaces with a detergent/disinfectant. This may be followed with an application of an hospital disinfectant with or without a tuberculocidal claim (depending on the nature of the surface and the degree of contamination), in accordance with disinfectant label instructions. <ul style="list-style-type: none"> a. Do not use alcohol to disinfect large environmental surfaces.
4.	Keep housekeeping surfaces (e.g. floors, walls, and tabletops) visibly clean on a regular basis.
4.1	Detergent and water are adequate for cleaning surfaces in areas where contamination is not as common. Detergent and water can also inactive most viruses over time.
5.	Follow proper procedures for effective use of mops, cloths, and solutions including cleaning after use and allowing to dry before re-use.

IV. Cleaning and disinfecting instructions	
6.	For any horizontal surfaces that are not being cleaned and disinfected, wet-dust daily by moistening a cloth with a small amount of an hospital detergent/disinfectant.
7.	Do not spray (i.e. fog) occupied or unoccupied rooms with disinfectant. This is a potentially dangerous practice that has no proven disease control benefit.
8.	When cleaning, wear glove in accordance with facility policies for environmental cleaning and wear a surgical or procedure mask in accordance with droplet precautions when cleaning a room that has potentially been contaminated. Gowns are not necessary for routine cleaning.
9.	Follow standard precautions for handling dishes and eating utensils:
9.1	When possible, wash reusable items in a dishwasher with detergent at the recommended water temperature
9.2	If a dishwasher is not available, detergent and water should be used to wash items.
9.3	Rubber gloves should be worn if washing items by hand.
9.4	Disposable dishes and utensils should be discarded with other general waste.
9.5	Wear gloves when handling trays, dishes, and utensils.

IV. Cleaning of Heating, Ventilation and Air Conditioning systems (HVAC)	
1.	Office spaces should be well ventilated.
2.	If feasible, during periods of high infection the building should draw in fresh air from the outside, rather than re-circulate building air.
3.	The HVAC should be maintained regularly, including changing filters, according to appropriate standards and building codes.
4.	Meet with building manager and/or engineer to inquire about HVAC procedures and discuss about air quality and risk of infection during a pandemic.
5.	Ensure that adequate maintenance is being performed on the HVAC by requesting results of air quality test, inquiring as to whether the system is cleaned, and filters changed on a regular basis.
6.	Request that the HVAC draw in as much fresh air as possible and recycle as little as possible.

IV. Wastes Disposal	
1.	Contain and dispose solid waste in accordance with facility procedures and regulations.
2.	If available, utilize plastic bag in waste container. When discarding either use tie wrap around top to close bag, or tie top into knot.



IV. Wastes Disposal	
3.	When handling waste or waste containers, wear rubber gloves and perform hand hygiene after completing waste disposal. If applicable use COVID-PPE. COVID-PPE could include gloves, medical masks, goggles or a face shield, and gowns.
4.	Avoid touching eyes, nose, mouth, or exposed skin with contaminated hands (gloved or ungloved); avoid touching surfaces with contaminated gloves and other (e.g., doorknobs, keys, light switches).
4.1	If surface is touched during waste disposal, clean surface with appropriate disinfectant afterwards.
5.	Users should carefully follow the disinfection directions on the label to handle and safely use the pesticide product and avoid harm to human health and the environment.