

Agricultural Employer Checklist for Creating a COVID-19 Assessment and Control Plan

To prevent and slow the spread of COVID-19, agricultural employers can use this checklist to create a COVID-19 assessment and control plan for applying specific preparation, prevention, and management measures. This checklist has been developed based on the [Agriculture Workers and Employers Interim Guidance from CDC and the U.S. Department of Labor](#).

This checklist has five sections:

- **Section 1:** Assessment
- **Section 2:** Control Plan based on the Hierarchy of Controls
 - » Screening and Monitoring Workers
 - » Managing Sick Workers
 - » Addressing Return to Work after Worker Exposure to COVID-19
 - » Engineering Controls
 - » Cleaning, Disinfection, and Sanitation
 - » Administrative Controls
 - » Personal Protective Equipment (PPE)
- **Section 3:** Special Considerations for Shared Housing
- **Section 4:** Special Considerations for Shared Transportation
- **Section 5:** Special Considerations for Children

This checklist can be used to reassess, update, and modify your assessment and control plan on a regular basis or as conditions change.



**U.S. Department of
Health and Human Services**
Centers for Disease
Control and Prevention

Agricultural Employer Checklist Section 1: Assessment

Item	Completed	Ongoing	Not Started	Not Applicable
Consider the characteristics of your region, worksite, space, and job tasks that may impact your assessment and control of COVID-19.				
Monitor federal, state, and local public health communications about COVID-19.				
Ensure workers have access to current information.				
Check local public health information and the CDC COVID-19 website daily, or as needed depending on local conditions.				
Designate a workplace coordinator responsible for COVID-19 assessment and control planning.				
Ensure all workers know how to contact the coordinator.				
Ensure coordinator communicates in workers' preferred languages.				
Ensure coordinator provides materials in preferred languages and at the appropriate literacy level.				
Provide workers with information about where to get COVID-19 testing.				
Regularly conduct work site assessments to identify COVID-19 risks and prevention strategies.				

Agricultural Employer Checklist Section 2: Control Plan based on the Hierarchy of Controls

Screening and Monitoring Workers

Item	Completed	Ongoing	Not Started	Not Applicable
Develop uniform policies and procedures for screening workers for COVID-19 signs and symptoms.				
Screen workers before they enter the worksite or, if possible, before they board shared transportation.				
Conduct verbal screenings to check for symptoms using workers' preferred languages.				
Check workers' temperatures at the beginning of each shift, identifying anyone with a fever of 100.4°F or greater.				
Do not let workers who indicated having symptoms or who have a fever of 100.4°F or greater enter the workplace.				
Encourage workers to report symptoms immediately, when on site.				
Encourage workers who have symptoms to self-isolate and contact a healthcare provider.				
Provide workers who have symptoms with access to direct medical care or telemedicine, when appropriate.				
Coordinate any recommended diagnostic testing with the occupational medicine provider or state and local health officials.				
Provide workers with information on when it is safe to return to work and the operation's return-to-work policies and procedures.				
Inform human resources, health unit (if in place), and supervisor so workers can be moved off schedule and replacements assigned.				
Ensure personnel performing screening activities are protected.				
Train temperature screeners to use temperature monitors according to manufacturer instructions.				
Provide temperature monitors that are accurate under conditions of use (e.g., extreme hot or cold weather).				
Use social distancing, barrier or partition controls, and personal protective equipment (PPE) to protect screeners.				
Provide appropriate PPE to screeners who must be within 6 feet of workers, including gloves, gown, face shield, and face mask (at minimum).				
Train workers how to properly put on, take off, and dispose of all PPE.				

Managing Sick Workers

Item	Completed	Ongoing	Not Started	Not Applicable
Monitor and manage sick workers.				
Immediately separate workers who appear to have symptoms from others in the workplace.				
Have a procedure for safely transporting sick workers to housing or a healthcare facility.				
House sick workers who can't be isolated in their existing housing arrangement in alternative housing arrangements under quarantine away from other workers.				
Ensure sick workers avoid contact with animals, including livestock and pets.				
Provide sick workers with information on when and how to access medical attention (e.g., the Health Resources and Services Administration (HRSA) website).				
Provide sick workers with information on the operation's return to work policies and procedures .				
Protect personnel who are managing sick workers.				
Provide appropriate PPE to personnel managing sick workers and those needing to be within 6 feet of them (gloves, gown, face shield, and face mask, at minimum).				
Train them to properly put on, take off, and dispose of PPE.				
Develop an action plan for workers with suspected or confirmed COVID-19.				
Inform anyone who has been in close contact (within 6 feet) with the sick worker of their possible exposure to COVID-19, but protect the sick worker's confidentiality.				
Clean and disinfect the work area, equipment, common areas, and tools the sick worker used.				
If there is a sick worker in employer-furnished housing:	N/A	N/A	N/A	N/A
Provide a dedicated space for the worker to recover, away from others.				
Clean and disinfect living quarters, cooking and eating areas, bathrooms, and laundry facilities.				
Do not allow other workers to use shared areas until after they are cleaned and disinfected.				

Item	Completed	Ongoing	Not Started	Not Applicable
Provide a sick worker going to a home in the community with guidance to reduce the risk of spread in the home.				
Work with state, tribal, local, and territorial (STLT) health officials to identify other exposed individuals.				
Consult with STLT officials for guidance on testing and workplace contact tracing .				
Ensure on-site healthcare personnel follow appropriate CDC and OSHA protective guidance for healthcare and emergency response personnel.				

Addressing Return to Work after Worker Exposure to COVID-19

Item	Completed	Ongoing	Not Started	Not Applicable
Plan for workers returning to work after having or being exposed to COVID-19.				
Follow CDC's Critical Infrastructure Guidance for workers who have had a COVID-19 exposure but do not have symptoms.				
Implement strategies from CDC's COVID-19 Critical Infrastructure Sector Response Planning to manage continuation of work while protecting the health of workers and the public.				
Follow the CDC interim guidance Discontinuation of Isolation for Persons with COVID-19 Not in Healthcare Settings for COVID-19-positive workers returning to work.				
As workers return, reassess COVID-19 transmission levels in the area and follow local, state, and federal recommendations as well as state and local directives for businesses.				

Engineering Controls

Item	Completed	Ongoing	Not Started	Not Applicable
Establish social distancing policies and practices.				
Assess and identify opportunities to limit close contact (less than 6 feet) between all individuals at the workplace.				
Adjust workflow to allow for at least a 6-foot distance between workers.				
Install shields or barriers between workers when a 6-foot distance is not possible.				
Add additional (touch-free, if possible) time clock stations or allow more time to clock in/out to reduce crowding.				
Remove or rearrange chairs or add visual cues in break areas to support social distancing.				
Train workers to follow protective measures while on breaks.				

Cleaning, Disinfection, and Sanitation

Item	Completed	Ongoing	Not Started	Not Applicable
Promote hand hygiene.				
Encourage workers to wash their hands often with soap and water for at least 20 seconds.				
Provide access to permanent and/or temporary hand washing facilities equipped with soap, clean water, and clean, single-use towels.				
Increase the number of hand washing stations.				
When soap and water are not immediately available, provide access to temporary stations equipped with hand sanitizer containing at least 60% alcohol.				
Place sanitizing stations in multiple locations including entry/exit and time clock station(s).				
If possible, provide workers with individual containers of hand sanitizer to use in field settings.				
Conduct disinfection and sanitation.				
Develop sanitation protocols for daily cleaning and sanitation of work sites, where feasible.				
Develop cleaning and disinfecting procedures for high-touch areas such as tools, equipment, and vehicles , following CDC guidance on cleaning methods .				
Follow cleaning product manufacturers' contact time recommendations.				
Keep cleaning chemicals and hand sanitizer out of reach of children.				
Choose disinfectants or alternative cleaning methods (e.g., soap and water) for surfaces with which food comes into contact.				
Obtain additional information from EPA on cleaning and disinfecting workplaces .				
Conduct targeted and more frequent cleaning and disinfecting of high-touch areas (e.g., time clocks, bathroom fixtures, vending machines, railings, door handles).				
Clean and disinfect break areas daily and between each group.				
Clean and disinfect locker rooms after each shift.				

Item	Completed	Ongoing	Not Started	Not Applicable
Provide disposable disinfectant wipes to frequently clean commonly touched surfaces.				
Refer to the Transportation Section (below) for guidance on sanitizing farm vehicles.				
Prevent or limit sharing of tools, when possible.				
Clean and disinfect shared tools between each worker use.				
If cleaning tools after each use is not possible, conduct daily targeted and more frequent cleaning of tools.				
Dispose of all cleaning material and PPE in compliance with OSHA standards .				

Administrative Controls

Item	Completed	Ongoing	Not Started	Not Applicable
Conduct COVID-19 training that is easy to understand, in preferred languages, and at appropriate literacy levels.				
Provide accurate and timely information to workers about:	N/A	N/A	N/A	N/A
Signs and symptoms of COVID-19, how it spreads, risks for workplace exposures, and how workers can protect themselves				
Proper handwashing and use of hand sanitizer				
Farm-specific social distancing practices				
Cough and sneeze etiquette				
Putting on and taking off masks and gloves				
General social distancing measures				
What to do if you are sick				
Employer policies regarding COVID-19 (e.g., disinfection protocols, housing and worker isolation, sick leave policies)				
How workers should alert their supervisors if they have signs or symptoms of COVID-19 or recent close contact with someone with confirmed or suspected COVID-19.				
Place posters , in all preferred languages, at entrances and in break areas to reinforce training.				

Item	Completed	Ongoing	Not Started	Not Applicable
Review leave and sick leave policies.				
Modify policies to ensure ill workers can stay home and are not punished for taking sick leave.				
Ensure workers are aware of and understand sick leave policies.				
Modify incentive policies so workers are not penalized for taking sick leave if they have COVID-19.				
Consider leave flexibilities including advances on future sick leave or allowing workers to donate sick leave to each other.				
Promote social distancing.				
Reduce crew sizes.				
Stagger work shifts, mealtimes, and break times.				
Have farmworkers work in alternate rows in fields to keep at least a 6-foot distance from other workers.				
Place materials and produce at a central transfer point instead of transferring directly from one worker to the next.				
Consider grouping healthy workers together into cohorts that include the same workers each day.				
Ensure workers who are in the same shared housing unit follow the Households Living in Close Quarters Guidance .				
Conduct training outside and in smaller groups, with participants spaced 6 feet apart.				

Item	Completed	Ongoing	Not Started	Not Applicable
CDC recommends wearing cloth face coverings as a protective measure in addition to social distancing. ¹	N/A	N/A	N/A	N/A
Employers who determine that cloth face coverings should be worn in the workplace, including to comply with state or local requirements for their use, should ensure the cloth face coverings:				
Fit over the nose and mouth and fit snugly but comfortably against the side of the face				
Are secured with ties or ear loops				
Include multiple layers of fabric				
Allow for breathing without restriction (and are not worn by anyone with trouble breathing)				
Can be put on and removed by the wearer without help				
Do not lead to heat-related illness (OSHA's Heat page offers tips on water and rest breaks)				
Can be laundered using the warmest appropriate water setting and machine dried daily after the shift, without damage or change to shape (a clean cloth face covering should be used each day)				
Are not used if they become wet or contaminated				
Are replaced with clean replacements, provided by employer, as needed				
Are not shared among workers unless adequately laundered between uses				
Are handled as little as possible to prevent transferring infectious materials to the cloth				
Are not worn with or instead of respiratory protection when respirators are needed				

¹**CDC [recommends](#) wearing cloth face coverings as a protective measure in addition to social distancing (i.e., staying at least 6 feet away from others). Cloth face coverings may be especially important when social distancing is not possible or feasible based on working conditions. A cloth face covering may reduce the amount of large respiratory droplets that a person spreads when talking, sneezing, or coughing.** Cloth face coverings may prevent people who do not know they have the virus that causes COVID-19 from spreading it to others. Cloth face coverings are intended to protect other people—not the wearer.

Cloth face coverings are not PPE. They are not appropriate substitutes for PPE such as respirators (like N95 respirators) or medical facemasks (like surgical masks) in workplaces where respirators or facemasks are recommended or required to protect the wearer.

While wearing cloth face coverings is a public health measure intended to reduce the spread of COVID-19 in communities, it may not be practical for workers to wear a single cloth face covering for the full duration of a work shift (e.g., eight or more hours) in agricultural operations if they become wet, soiled, or otherwise visibly contaminated during the work shift. If cloth face coverings are worn in these operations, employers should provide readily available clean cloth face coverings (or disposable facemask options) for workers to use when the coverings become wet, soiled, or otherwise visibly contaminated.

Cloth face coverings may be difficult to wear for extended periods of time, especially in hot, humid environments. They also may require touching of the face, repositioning of the coverings, and frequent removal and replacement for water or nourishment breaks. In such instances, social distancing will be very important. Employers may also consider providing workers with alternatives to cloth face coverings, such as face shields.

Personal Protective Equipment (PPE)

Item	Completed	Ongoing	Not Started	Not Applicable
Conduct a hazard assessment to determine if PPE is necessary to protect workers.				
Ensure workers performing cleaning and disinfecting are provided with appropriate PPE based on information from Safety Data Sheets.				
When PPE is needed, consider additional hazards that may be created by poorly fitting PPE in the work environment and how to prevent such hazards.				
Provide training on how to properly use PPE that is easy for workers to understand, in their preferred languages, and at appropriate literacy levels.				
Use videos or in-person visual demonstrations.				
Keep workers at least 6 feet apart during demonstrations.				
Training should include the following:	N/A	N/A	N/A	N/A
When to use PPE and what PPE is necessary				
How to properly put on and take off PPE				
How to properly dispose of disposable PPE				
How to properly clean and disinfect reusable PPE				
Reminder to change PPE if it is torn, dirty, or otherwise damaged				
Reminder to wash hands with soap and water for 20 seconds or use alcohol-based hand sanitizer containing at least 60% alcohol after removing PPE				
Allow workers to continue wearing gloves they would normally wear while doing fieldwork.				

Agricultural Employer Checklist Section 3: Special Considerations for Shared Housing

Item	Completed	Ongoing	Not Started	Not Applicable
Provide basic guidance about COVID-19 and steps being taken to prevent transmission in housing areas.				
Keep family members together in housing facilities.				
Prepare dedicated and segregated spaces for sleeping quarters, kitchens, and restrooms for quarantining workers with confirmed or suspected COVID-19.				
Promote enhanced sanitation practices.				
Provide disposable gloves, soap for handwashing, and household cleaners to help residents and staff implement personal preventive measures .				
Develop and implement enhanced sanitation and cleaning plans:				
Specify frequency of sanitation and cleaning.				
Identify a person responsible for carrying out the plan.				
Do not allow sharing of dishes, drinking glasses, cups, or eating utensils.				
Handle non-disposable food service items with gloves and wash with hot water and dish soap or in a dishwasher.				
Disinfect living quarters, cooking and eating areas, bathrooms, and laundry facilities.				
Ensure there is good airflow in shared rooms:				
Use an air conditioner or open windows.				
Clean air conditioner units and change filters according to manufacturer recommendations.				
Provide air filtration systems in units without air conditioner units.				
Routinely clean common areas following CDC cleaning and disinfection guidelines .				

Item	Completed	Ongoing	Not Started	Not Applicable
Ensure residents regularly clean and sanitize living quarters following CDC cleaning and disinfection guidelines .				
Provide supplies for cleaning shared kitchen utensils and appliances.				
Continue providing access to laundry facilities, but establish guidelines to ensure social distancing.				
Provide options for residents to store reusable PPE to prevent cross-contamination.				
Maintain social distancing in shared housing.				
Encourage social distancing during all housing activities, including cooking, sleeping, and recreation.				
Add physical barriers (if possible) between bathroom sinks and in other areas where maintaining 6 feet is not possible.				
Remove or space furniture in common areas.				
Modify bed configurations to maximize social distancing in sleeping quarters, where feasible:				
Arrange beds so that residents sleep head-to-toe with at least 6 feet between beds.				
Add physical barriers between beds when they cannot be 6 feet apart.				
Minimize or avoid the use of bunkbeds.				
Conduct meetings and conversations outdoors, whenever possible, to minimize congregation in close quarters.				
Encourage residents to wear cloth face coverings in shared spaces.				
Advise residents that cloth face coverings should not be placed on children under age 2, anyone who has trouble breathing or is unconscious, incapacitated or otherwise unable to remove the mask without assistance.				

Item	Completed	Ongoing	Not Started	Not Applicable
Conduct daily health checks at shared housing.				
Screen residents for symptoms and check temperatures daily.				
Offer multiple screening locations or staggered screening times to prevent congregations of large groups.				
Protect the confidentiality of those with suspected or confirmed COVID-19.				
Establish a plan for responding to residents with suspected or confirmed COVID-19.				
Provide accommodations separate from residents who are not ill.				
Consider designating one person who is not at higher risk of severe illness to assist an ill, isolated resident.				
Ensure personnel managing sick residents are protected from exposure by providing PPE for use when they are within 6 feet of individuals who are sick.				
Use separate buildings or rooms instead of physical barriers to separate ill residents from well residents.				
Consider providing separate food and bathroom access where possible.				
Restrict non-essential persons from entering the isolation area.				
Provide medical access and telemedicine for emergent illnesses.				
Provide safe transportation, if necessary.				
For H-2A temporary housing considerations, review DOL explanation of alternative housing arrangements in response to COVID-19.				

Agricultural Employer Checklist Section 4: Special Considerations for Shared Transportation

Item	Completed	Ongoing	Not Started	Not Applicable
Provide as much space between riders as possible.				
Group (or cohort) workers in the same crews and/or those sharing living quarters together when transporting.				
Increase the number of vehicles and/or the frequency of trips.				
Provide hand washing/sanitizing stations for use before riders enter a vehicle and when arriving at their destination.				
Train riders to follow coughing and sneezing etiquette .				
Encourage all vehicle occupants to wear cloth face coverings .				
Clean and disinfect vehicles in accordance with CDC guidelines for non-emergency transport vehicles before and after each trip, or daily at a minimum.				

Agricultural Employer Checklist Section 5: Special Considerations for Children

Item	Completed	Ongoing	Not Started	Not Applicable
Discourage the presence of youth at the worksite, and help protect youth farmworkers from COVID-19.				
Encourage workers to send children to childcare while working.				
Establish and enforce policies that restrict children from worksites.				
If you hire youth farmworkers, ensure you are following labor laws and assigning age-appropriate tasks , including those covered by child labor regulations .				
Provide extra supervision and guidance to youth workers, emphasizing ways they can reduce their exposure to COVID-19.				

Florida County Health Departments (in county order)

Alachua

Florida Department of Health in Alachua
- Alachua Clinic
15530 NW US Hwy 441
Suite 10010
Alachua, FL 32615
386-462-2542
WebInfoAlachua@flhealth.gov

Florida Department of Health in Alachua
- Fearnside
3600 NE 15th Street
Gainesville, FL 32609
352-258-5093
WebInfoAlachua@flhealth.gov

Florida Department of Health in Alachua
- Main Site - Gainesville
224 SE 24th Street
Gainesville, FL 32641
352-334-7900
WebInfoAlachua@flhealth.gov

Florida Department of Health in Alachua
- Southwest Clinic
816 SW 64th Terrace
Gainesville, FL 32607
352-225-4320
WebInfoAlachua@flhealth.gov

Baker

Main Health Department
480 West Lowder Street
Macclenny, FL 32063
904-259-6291
Baker.Web@flhealth.gov

WIC Office
480 West Lowder Street
Macclenny, FL 32063
904-320-6034
Baker.Web@flhealth.gov
840 W 11th St.
Suite: 2150
Panama City, FL 32401
850-481-4812
DLCHD03Environmental@flhealth.gov

Main Location - Ullman Building
597 West 11th Street
Panama City, FL 32401
850-872-4455
DLCHD03PatientAdvocateContacts@flhealth.gov

WIC Beach Clinic
10620 Hutchison Blvd
Gulf Beach Baptist Church
Panama City Beach, FL 32407
850-872-4666
DLCHD03WICContacts@flhealth.gov

WIC Youngstown
11771 Highway 231
Bay County Fire Rescue Station #11
Youngstown, FL 32466
850-872-4666
DLCHD03WICContacts@flhealth.gov

Bradford

Florida Department of Health in
Bradford County
1801 N. Temple Avenue
Starke, FL 32091
904-964-7732
HealthyBradford@flhealth.gov

New River Health
1801 N. Temple Avenue
Starke, FL 32091
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Brevard

Environmental Health Services
2725 Judge Fran Jamieson Way, Suite
A116
Viera, FL 32940
321-633-2100
Brevard.EHS@flhealth.gov

Melbourne Clinic
601 East University Boulevard
Melbourne, FL 32901
321-726-2920
CHD05.WebMaster@flhealth.gov

Rockledge Annex
1748 Cedar Street
Rockledge, FL 32955
321-634-6337
CHD05.WebMaster@flhealth.gov

Titusville Clinic
611 North Singleton Avenue
Titusville, FL 32796
321-383-2795
CHD05.WebMaster@flhealth.gov

Viera Administrative Headquarters
2565 Judge Fran Jamieson Way
Viera, FL 32940
321-454-7111
CHD05.WebMaster@flhealth.gov

Main Office - Viera Clinic
2555 Judge Fran Jamieson Way
Viera, FL 32940
321-639-5800
CHD05.WebMaster@flhealth.gov

Broward

Florida Department of Health in
Broward County(Main Office)
780 S.W. 24th Street
Fort Lauderdale, FL 33315
954-467-4700
Post.CHD06@flhealth.gov

Coral Springs WIC Center
10077 NW 29th Street
Coral Springs, FL 33065
954-767-5111
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Edgar Mills Health Center
900 NW 31st Avenue
Fort Lauderdale, FL 33311
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Fort Lauderdale Health Center
2421 S.W. 6th Avenue
Fort Lauderdale, FL 33315
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4481 N. State Road 7
Lauderdale Lakes, FL 33319
954-767-5111
Post.CHD06@flhealth.gov
North Regional Health Center
601 West Atlantic Boulevard
Pompano Beach, FL 33060
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Operations Building
2421A S.W. 6th Avenue
Fort Lauderdale, FL 33315
954-467-4700
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Paul Hughes Health Center
205 NW 6th Avenue
Pompano Beach, FL 33060
954-467-4700
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Pembroke Pines WIC Center
8374 Pines Boulevard
Pembroke Pines, FL 33024
954-767-5111
Post.CHD06@flhealth.gov

South Regional Health Center
4105 Pembroke Road
Hollywood, FL 33021
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Calhoun

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19611 SR 20 W
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Charlotte

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Health in Charlotte County
1100 Loveland Blvd
Port Charlotte, FL 33980
941-624-7200
CharlotteWebmaster@flhealth.gov

WIC - Englewood
6868 San Casa Drive
Englewood, FL 34224
941-624-7200
CharlotteWebmaster@flhealth.gov

WIC - Port Charlotte
1100 Loveland Blvd
Port Charlotte, FL 33980
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CharlotteWebmaster@flhealth.gov

Citrus
Environmental Health
3600 W. Sovereign Path
Lecanto, FL 34461
352-527-5283
EH.Feedback@flhealth.gov

WIC Services ONLY-Inverness
130 N Montgomery Ave
Inverness, FL 34450
352-527-0068
webmaster09@flhealth.gov

Lecanto Main Office
3700 West Sovereign Path
Lecanto, FL 34461
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webmaster09@flhealth.gov

Clay
Administration Building
1305 Idlewild Av
Green Cove Springs, FL 32043
904-529-2800
ClayCHDWeb@flhealth.gov

Bear Run Clinic
3229 Bear Run Blvd
Orange Park, FL 32065
904-272-3177
ClayCHDWeb@flhealth.gov

Environmental Health
477 Houston St.
Green Cove Springs, FL 32043
904-278-3784
ClayCHDWeb@flhealth.gov
WIC (Women, Infants, Children)
301 South West Street
Green Cove Springs, FL 32043
904-272-3177
ClayCHDWeb@flhealth.gov

Collier
Immokalee Office
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Immokalee, FL 34142
239-252-7300
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Naples Main Office
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Suite 145 Bldg H
Naples, FL 34112
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Columbia
Florida Department of Health in
Columbia County - Environmental
Health Section
Columbia County Courthouse Annex
135 NE Hernando Street
Lake City, FL 32055
386-758-1058
WebInfoColumbia@flhealth.gov

Florida Department of Health in
Columbia County - Fort White
535 SW Dortch Street
Fort White, FL 32038
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Florida Department of Health in
Columbia County
217 NE Franklin Street
Lake City, FL 32055
386-758-1068
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Dade
Carol City WIC Center
4737 NW 183 Street
Miami, FL 33055
305-324-2400
contact.miamidade@flhealth.gov

WIC Administration
7785 NW 48 Street
Suite 325
undefined
Miami, FL 33166
786-336-1300
contact.miamidade@flhealth.gov

Florida City
1600 NW 6th CT, Bldg. B
Florida City, FL 33034
305-525-3800
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Frederica Wilson and Juanita Mann
Health Center
2520 NW 75 Street
Miami, FL 33147
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Environmental Health and Engineering
1725 NW 167 St.
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Goulds WIC Center
10300 S.W. 216 Street
Goulds, FL 33190
786-336-1300
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Health District Center
1350 NW 14th Street
Miami, FL 33125
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Hialeah West WIC Center
551 West 51 Place
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Hialeah, FL 33012
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Homestead / Florida City WIC Center
753 West Palm Drive

Miami, FL 33034
786-336-1300
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Jackson Memorial Hospital WIC Center
1611 NW 12 Avenue
Park Plaza West Garage, G-101
Miami, FL 33136
786-336-1300
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Little Haiti Health Center
300 NE 80th Terrace
Miami, FL 33138
305-795-2100
contact.miamidade@flhealth.gov

West Perrine Health Center
18255 Homestead Avenue
Miami, FL 33157
305-234-5400
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Naranja Community Health WIC Center
13805 SW 264 Street
Naranja, FL 33032
786-336-1300
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North Miami Beach WIC Center
16855 NE 2 Avenue
Suite 205
North Miami Beach, FL 33162
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Miami, FL 33128
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Refugee Health Program
1350 NW 14 Street
Miami, FL 33125
305-643-7300
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South Miami WIC Center
6601 SW 62 Avenue
Miami, FL 33143
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contact.miamidade@flhealth.gov

Unity Central WIC Center
1490 NW 25 Avenue
2nd Floor
Miami, FL 33125
786-336-1300
contact.miamidade@flhealth.gov

University WIC Center
1607 SW 107 Avenue
2nd Floor
Miami, FL 33165
786-336-1300
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West Dade Family Planning Clinic
11865 SW 26th St., Suite J2
Miami, FL 33175
786-336-1437
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West Dade WIC Center
11865 SW 26 Street
Unit J-6
Miami, FL 33175
786-336-1300
contact.miamidade@flhealth.gov

DeSoto
Baldwin Office - Main Location
34 South Baldwin Avenue
Arcadia , FL 34266
863-993-4601

Oak Street Primary Clinic
1031 E. Oak Street
Arcadia, FL 34266
863-491-7580

Dixie
Florida Department of Health in Dixie
County
149 NE 241st Street
Cross City, FL 32628
352-498-1360
WebInfoDixie@flhealth.gov

Duval
Administrative Offices at the 900
Building
900 University Boulevard North
Jacksonville, FL 32211
904-253-1000
CHD16_DCHD_Contact@flhealth.gov

DOH-Duval Central Health Plaza
515 West 6th Street
Jacksonville, FL 32206
904-253-1000
CHD16_DCHD_Contact@flhealth.gov

Pearl Plaza Health Services
5322 North Pearl Street
Jacksonville, FL 32208
904-253-1000
CHD16_DCHD_Contact@flhealth.gov

South Jacksonville Health Services
3225 University Boulevard South
Jacksonville, FL 32216
904-253-1000
CHD16_DCHD_Contact@flhealth.gov

Vital Statistics (Birth and Death
Certificates)
900 University Boulevard North
Jacksonville, FL 32211
904-253-1620
CHD16_DCHD_Contact@flhealth.gov

Wesconneth WIC and Nutrition Services
5917 105th Street
Jacksonville, FL 32244
904-253-1500
CHD16_DCHD_Contact@flhealth.gov

Westside Health Services
120 King Street
Jacksonville, FL 32204
904-253-1680
CHD16_DCHD_Contact@flhealth.gov

Escambia
Downtown Service Center
1300 West Gregory Street
Pensacola, FL 32501
850-595-6700
EscambiaCHD_Feedback@flhealth.gov

Fairfield Service Center
1295 West Fairfield Drive
Pensacola , FL 32501
850-595-6500
EscambiaCHD.Feedback@flhealth.gov

Northside Service Center
8390 North Palafox
Pensacola, FL 32534
850-484-5121
EscambiaCHD.Feedback@flhealth.gov

WIC Clinic: Century
511 Church Street
Century, FL 32535
850-595-6670
EscambiaCHD.Feedback@flhealth.gov

WIC Clinic: Naval Hospital
6000 Highway 98
Pensacola, FL 32512
850-595-6670
EscambiaCHD.Feedback@flhealth.gov

Flagler
Main Office-Florida Department of
Health in
Flagler County Administration and
Clinic Services
301 Dr. Carter Blvd.
Bunnell, FL 32110
386-437-7350
chd18webmaster@flhealth.gov

Florida Department of Health in
Flagler County Environmental Health
208 Dr. Carter Blvd.
Bunnell, FL 32110
386-437-7358
chd18webmaster@flhealth.gov

Florida Department of Health in
Flagler County Vital Statistics
200 Dr. Carter Blvd.
Bunnell, FL 32110
386-586-2164, ext. 7133
chd18webmaster@flhealth.gov

Franklin
Apalachicola Clinic
139 12th Street
Apalachicola, FL 32320
850-653-2111
FranklinCHDFeedback@flhealth.gov

Carrabelle Clinic
106 NE 5TH STREET
CARRABELLE, FL 32322
850-697-4121
franklin_CHD@flhealth.gov

Environmental Health
139-12th Street
Apalachicola, FL 32320
850-653-2111, Extension: 118
FranklinCHD.zzzzFeedback@flhealth.gov

Gadsden
Florida Department of Health in
Gadsden County
278 LaSalle LeFall Drive
Quincy, FL 32351-5324
850-875-7200
GCHDMailbox@flhealth.gov

Gilchrist
Florida Department of Health in
Gilchrist County
119 NE 1st Street
Trenton, FL 32693
352-463-3120
WebInfoGilchrist@flhealth.gov

Glades
Moore Haven
1021 Health Park Drive
Moore Haven, FL 33471
863-946-0707
health@flhealth.gov

Gulf
Port Saint Joe Clinic
2475 Garrison Avenue
Port Saint Joe, FL 32456
850-227-1276
gulfchd@flhealth.gov

Wewahitchka Location
807 Hwy 22
Wewahitchka, FL 32465
850-639-2644
gulfchd@flhealth.gov

Hamilton
Florida Department of Health in
Hamilton County
209 SE Central Avenue
Jasper, FL 32052
386-792-1414
WebInfoHamilton@flhealth.gov

Hardee

Florida Department of Health in Hardee
115 K.D. Revell Road
Wauchula, FL 33873
863-773-4161
HardeeCHD@flhealth.gov

Hendry

Clewiston
1100 South Olympia Avenue
Clewiston, FL 33440
863-983-1408
health@doh.state.fl.us

LaBelle

1140 Pratt Boulevard
LaBelle, FL 33935
863-674-4041
health@flhealth.gov

Hernando

Hernando County Vital Statistics Office
7551 Forest Oaks Boulevard
Spring Hill, FL 34606
352-540-6800
Web.HernandoCHD@flhealth.gov

Spring Hill

7551 Forest Oaks Boulevard
Spring Hill, FL 34606
352-540-6800
Web.HernandoCHD@flhealth.gov

Brooksville

300 South Main Street
Brooksville, FL 34601
352-540-6800
Web.HernandoCHD@flhealth.gov

Highlands

Avon Park Site
400 South Lake Avenue
Avon Park, FL 33825
863-382-7351

Lake Placid Site

106 North Main Avenue
Lake Placid, FL 33852
863-386-6040

Environmental Health Office

501 S. Commerce Avenue
Sebring, FL 33870
863-402-6550

Sebring Site - Main Office

7205 South George Boulevard
Sebring, FL 33875
863-386-6040

Hillsborough

Brandon (WIC Only)
220 S. Moon Avenue
Brandon, FL 33511
813-307-8074
Info.HillsWeb@FLHealth.gov

College Hill Area (WIC Only)

2313 E 28th Ave
Tampa, FL 33505
813-307-8074
Info.HillsWeb@FLHealth.gov

**Floyd Kelton Community Health
(No Clinic Services)**

4704-B Montgomery Ave
Tampa, FL 33616
813-307-8071
Info.HillsWeb@FLHealth.gov

Joyce Ely Health Center (WIC Only)

205 14th Avenue, S.E.
Ruskin, FL 33570
813-307-8074
Info.HillsWeb@FLHealth.gov

Main Health Department

1105 E. Kennedy Blvd
Tampa, FL 33602
813-307-8000
Info.HillsWeb@FLHealth.gov

**North Hillsborough Health Center
(WIC)**

9827 N. Sheldon Road
Tampa, FL 33625
813-307-8074
Info.HillsWeb@FLHealth.gov

Plant City Health Center (WIC Only)

307 N. Michigan Avenue
Plant City, FL 33563
813-307-8074
Info.HillsWeb@FLHealth.gov

**St. Joseph's Women's Hospital (Vital
Statistics Only)**

3030 W Doctor M.L.K. Jr Blvd.
Tampa, FL 33607
813-307-8002
Info.HillsWeb@FLHealth.gov

Sulphur Springs Health Center (WIC)

Sulphur Springs Health Center (WIC)
8605 Mitchell Ave
Tampa, FL 33604
813-307-8074
Info.HillsWeb@FLHealth.gov

**Sulphur Springs Health Center
(Immunizations - Refugee Health)**

8605 Mitchell Ave
Tampa, FL 33604
813-307-8077
Info.HillsWeb@FLHealth.gov

University Area (WIC)

13601 N. 22nd St.
Tampa, FL 33613-4427
813-307-8074
Info.HillsWeb@FLHealth.gov

Holmes

FDOH - Annex
1177 East US Hwy 90
Bonifay, Florida, FL 32425
850-614-6019
HolmesCHD@flhealth.gov

FDOH - Holmes CHD

603 Scenic Hill Circle
Bonifay, FL, FL 32425
850-547-8500
HolmesCHD@flhealth.gov

Indian River

Main Office: DOH-Indian River
1900 27th Street
Vero Beach, FL 32960
772-794-7400
sgwebinfoindianriver@flhealth.gov

Jackson

Florida Department of Health in Jackson
County - Main Site
4979 Healthy Way
Marianna, FL 32446
850-526-2412
JCHD@flhealth.gov

**FDOH Jackson County - WIC Location
Blountstown**

Department of Health Calhoun County
19611 SR 20 West
Blountstown, FL 32424
850-674-3806
JCHD@flhealth.gov

**FDOH Jackson County - WIC Location
Bristol**

Department of Health Liberty County
12832 NW Central Avenue
Bristol, FL 32321
850-643-2002
JCHD@flhealth.gov

**FDOH Jackson County - WIC Location
Chipley**

Department of Health Washington
County
1338 South Boulevard
Chipley, FL 32428
850-415-5101
JCHD@flhealth.gov

**FDOH Jackson County - WIC Location
Graceville**

5470 College Drive
Suite 1
Graceville, FL 32440
850-263-2364
JCHD@flhealth.gov

**FDOH Jackson County - WIC Location
Hosford**

17111 NE SR 65
Hosford, FL 32334
850-379-8677
JCHD@flhealth.gov

FDOH Jackson County - WIC Location
Ponce de Leon
Ponce de Leon Town Hall
1580 W Hwy 90
Ponce de Leon, FL 32455
850-836-4361
JCHD@flhealth.gov

FDOH Jackson County - WIC Location
Sneads
8021 Old Spanish Trail
Sneads, FL 32460
850-593-5550
JCHD@flhealth.gov

FDOH Jackson County - WIC Location
Vernon
Vernon Library
3731 Roche Avenue
Vernon, FL 32462
850-535-9407
JCHD@flhealth.gov

FDOH Jackson County - WIC Location
Bonifay
Department of Health Holmes County
402 N. Oklahoma Street
Bonifay, FL 32425
850-547-8684
JCHD@flhealth.gov

Jefferson
Florida Department of Health in
Jefferson
1255 West Washington Street
Monticello, FL 32344
850-342-0170
JeffersonCHD@flhealth.gov

Lafayette
Environmental Health
140 SW Virginia Circle
Mayo, FL 32066
386-294-1321, Ext. 225
Info.LafCHD34@flhealth.gov

Medical Clinic
140 SW Virginia Circle
Mayo, FL 32066
386-294-1321
Info.LafCHD34@flhealth.gov

Vital Statistics
140 SW Virginia Circle
Mayo, FL 32066
386-294-1321, Ext. 230
Info.LafCHD34@flhealth.gov

Lake
Clermont Health Center/ Vitals
875 Oakley Seaver Drive
Clermont, FL 34711
352-989-9001
chd35webmaster@flhealth.gov

Environmental Health
315 W. Main Street, Suite 523
Tavares, FL 32778

352-253-6130, After Hours 352-728-7662
chd35webmaster@flhealth.gov

Administration / Vitals
16140 US Hwy 441
Eustis, FL 32726
352-589-6424
chd35webmaster@flhealth.gov

Leesburg Health Center
2113 W. Griffin Road
Leesburg, FL 34748
352-360-6548
chd35webmaster@flhealth.gov

Umatilla Health Center
249 E. Collins Street
Umatilla, FL 32784
352-771-5500
chd35webmaster@flhealth.gov

WIC - Clermont Office
560 W. DeSoto Street
Clermont, FL 34711
352-771-5559
chd35webmaster@flhealth.gov

WIC - Leesburg Office
1904 Griffin Road
Leesburg, FL 34748
352-771-5559
chd35webmaster@flhealth.gov

Lee
Environmental Engineering
60 Danley Dr S
Fort Myers, FL 33907
239-274-2200
LeeCHDEEFeedback@flhealth.gov

Environmental Health
2295 Victoria Ave
2nd Floor East
Fort Myers, FL 33901
239-690-2100
LeeEH@flhealth.gov

Main Office - Michigan Clinic
3920 Michigan Ave
Fort Myers, FL 33916
239-332-9501
LeeCHDFeedback@flhealth.gov

Pondella Clinic
83 Pondella Rd.
North Fort Myers, FL 33903
239-461-6100 appointments
LeeCHDFeedback@flhealth.gov

WIC - Bonita Springs
28420 Bonita Crossings Boulevard
Suite 1
Bonita Springs, FL 34135
239-344-2000 for appointment
LeeCHDFeedback@flhealth.gov

WIC - Lehigh Acres
5624 8th Street W
Suite 106

Lehigh Acres, FL 33971
239-344-2000 for appointment
LeeCHDFeedback@flhealth.gov

Leon
Environmental Health
435 North Macomb St
Tallahassee, FL 32301
850-895-8360
LeonCHD.Feed-back@flhealth.gov

Municipal Way
2965 Municipal Way
Tallahassee, FL 32304
850-404-6300
LeonCHD.Feed-back@flhealth.gov

Richardson-Lewis Health Center
872 West Orange Avenue
Tallahassee, FL 32310
850-404-6240
LeonCHD.Feed-back@flhealth.gov

Main Office - Roberts & Stevens Clinic
1515 Old Bainbridge Road
Tallahassee, FL 32303
850-404-6400
LeonCHD.Feed-back@flhealth.gov

Levy
Levy Healthy Families
330 Mongo Street
Bronson, FL 32621
352-486-5590
webinfolevy@flhealth.gov

Florida Department of Health in Levy
County
66 West Main Street
Bronson, FL 32621
352-486-5300
WebInfoLevy@flhealth.gov

Liberty
Clinical Building
10971 NW Spring St
Bristol, FL 32321
850-643-2415
Calhounlibertyinaction@flhealth.gov

Madison
Florida Department of Health in
Madison
218 SW Third Ave
Madison, FL 32340
850-973-5000
MadisonCHD@flhealth.gov

Manatee
6th Avenue East
410 6th Avenue East
Bradenton, FL 34208
941-748-0747
webmanager41@flhealth.gov

Palmetto WIC
1802 8th Avenue West
Palmetto, FL 34221
941-741-3400
webmanager41@flhealth.gov

Pine Village
1107 56th Avenue Terrace East
Bradenton, FL 34203
941-741-3400
webmanager41@flhealth.gov

WIC Main Office
212 6th Ave E
Bradenton, FL 34208
941-741-3400
webmanager41@flhealth.gov

Marion

Belleview Clinic
7055 SE 110th St. Road
Belleview, FL 34420
352-347-1302
Info.Marion@FLHealth.gov

Marion County Growth Services
2710 E. Silver Springs Blvd.
Ocala, FL 34470
352-438-2417
Info.Marion@FLHealth.gov

Ocala Facility
1801 SE 32nd Ave.
Ocala, FL 34471
352-629-0137
Info.Marion@FLHealth.gov

Reddick Clinic
4500 NW 152nd Ave.
Reddick, FL 32686
352-878-3001
Info.Marion@FLHealth.gov

Indiantown
16401 Southwest Farm Road
Indiantown, FL 34956
772-221-4000
DLCHD43WebFeedback@flhealth.gov

Martin

Stuart
3441 Southeast Willoughby Blvd.
Stuart, FL 34994
772-221-4000
DLCHD43Webfeedback@flhealth.gov

Monroe

Administration
1100 Simonton Street
Gato Building
Key West, FL 33040
305-293-7500
DOHMonroe@flhealth.gov

Environmental Health (Key West)
5503 College Road
DJJ Building, Room 208R
Key West, FL 33040
305-797-9252
DOHMonroe@flhealth.gov

HealthCareCenter
1100 Simonton Street
Gato Building
Key West, FL 33040
305-676-3850
DOHMonroe@flhealth.gov

Public Health and Medical Preparedness
50 High Point R.
Roth Building
Tavernier, FL 33070
305-293-7500
DOHMonroe@flhealth.gov

Ruth Ivins Center
3333 Overseas Highway
Marathon, FL 33050
305-293-7500
DOHMonroe@flhealth.gov

Roth Building
50 High Point Road
Tavernier, FL 33070
305-293-7500
DOHMonroe@flhealth.gov

Nassau

Florida Department of Health in Nassau
County
30 South 4th St.
Fernandina Beach, FL 32034
904-875-6100
chd45webmaster@flhealth.gov

Florida Department of Health in Nassau
County Callahan Clinic
45377 Mickler St.
Callahan, FL 32011
904-320-6010
chd45webmaster@flhealth.gov

Main Office-Florida Department of
Health in Nassau County
Fernandina Beach Administration
Building
1620 Nectarine St.
Fernandina Beach, FL 32034
904-875-6100, Option 6
chd45webmaster@flhealth.gov

Florida Department of Health in Nassau
County Hilliard Clinic
37203 Pecan St.
Hilliard, FL 32046
904-320-6020
chd45webmaster@flhealth.gov

Florida Department of Health in Nassau
County Yulee Clinic
86014 Pages Dairy Rd.
Yulee, FL 32097
904-875-6110
chd45webmaster@flhealth.gov

Florida Department of Health in Nassau
County
Environmental Health
96135 Nassau Place
Suite B
Yulee, FL 32097
904-557-9150
chd45webmaster@flhealth.gov

Okaloosa

Crestview location
810 E. James Lee Blvd.
Crestview, FL 32539
850-833-9246
healthyokaloosapio@flhealth.gov

Fort Walton Beach
221 Hospital Drive, N.E.
Fort Walton Beach, FL 32548
850-833-9240
healthyokaloosapio@flhealth.gov

Okeechobee

Our Location
1728 NW 9th Avenue
Okeechobee, FL 34972
863-462-5800
chd47webmaster@flhealth.gov

Orange

Apopka Service Center
1111 N Rock Springs Rd
Apopka, FL 32712
407-858-1481
DLCHD48WebFeedback@flhealth.gov

Main Office - Central Health Center
832 W Central Blvd
Orlando, FL 32805
407-858-1430
DLCHD48WebFeedback@flhealth.gov

Vital Statistics - Central Health Center,
Building 2
807 West Church Street
Orlando, FL 32805
407-858-1460
DLCHD48WebFeedback@flhealth.gov

WIC - Central Health Center Building 3
901 West Church Street
Orlando, FL 32805
407-858-1494
DLCHD48WebFeedback@flhealth.gov

Eastside Health Center
12050 East Colonial Drive
Building A
Orlando, FL 32826
407-858-1402
DLCHD48WebFeedback@flhealth.gov

Environmental Health
1001 Executive Center Drive
Suite 200
Orlando, FL 32803
407-858-1497
DLCHD48WebFeedback@flhealth.gov

Hoffner Service Center
5449 S Semoran Blvd
Orlando, FL 32822
407-858-1479
DLCHD48WebFeedback@flhealth.gov

Lake Underhill Health Center
5730 Lake Underhill Road
Orlando, FL 32807
407-858-1494
DLCHD48WebFeedback@flhealth.gov

Lila Mitchell Health Center
5151 Raleigh Street
Suite B
Orlando, FL 32811
407-858-1487
DLCHD48WebFeedback@flhealth.gov

Ocoee Health Center
475 W Story Rd
Ocoee, FL 34761
407-858-1472
DLCHD48WebFeedback@flhealth.gov

South Side Health Center
6101 Lake Ellenor Drive
Orlando, FL 32809
407-858-1400
DLCHD48WebFeedback@flhealth.gov

Westside WIC
6218 W. Colonial Drive Suite 232
Orlando, FL 32808
407-858-1494
DLCHD48WebFeedback@flhealth.gov

Winter Garden Health Center
13275 West Colonial Drive
Winter Garden, FL 34787
407-858-1494
DLCHD48WebFeedback@flhealth.gov

Osceola

Environmental Health (EH)
1 Courthouse Square #1200
Kissimmee, FL 34741
407-742-8606

OsceolaEnvironmentalHealth@flhealth.gov
Florida Department of Health in Osceola County
1875 Fortune Road
Kissimmee, FL 34744
407-343-2000
Osceola.Health@flhealth.gov

WIC at Poinciana
105 N. Doverplum Avenue
Poinciana, FL 34758
407-343-2085

WIC at St. Cloud
1050 Grape Avenue
St. Cloud, FL 34769
407-343-2085

Palm Beach

Main Office-Appointment Line –
Please call 1-855-GET-APPT (438-2778)
800 Clematis St.
West Palm Beach, FL 33401
561-840-4500
chd50feedback@flhealth.gov

Florida Department of Health in Palm Beach County
C. L. Brumback Health Center (Belle Glade)
38754 State Road 80
Belle Glade, FL 33430
561-983-9220
chd50feedback@flhealth.gov

Florida Department of Health in Palm Beach County
Delray Beach Health Center
225 S. Congress Ave.
Delray Beach, FL 33445
561-274-3100
chd50feedback@flhealth.gov

Florida Department of Health in Palm Beach County
Jupiter Auxiliary Health Center
6405 Indiantown Road
Jupiter, FL 33458
561-746-6751
chd50feedback@flhealth.gov

Florida Department of Health in Palm Beach County
Lantana Lake Worth Health Center
1250 Southwinds Dr.
Lantana, FL 33462
561-547-6800
chd50feedback@flhealth.gov

Florida Department of Health in Palm Beach County
Northeast Health Center (Riviera Beach)
851 Avenue P
Riviera Beach, FL 33404
561-803-7300
chd50feedback@flhealth.gov

Florida Department of Health in Palm Beach County
West Palm Beach Health Center
1150 45th St.
West Palm Beach, FL 33407
561-514-5300
chd50feedback@flhealth.gov

Florida Department of Health in Palm Beach County
Greenacres WIC Center
5985 10th Ave.
Greenacres, FL 33463
561-357-6000
chd50feedback@flhealth.gov

Pasco

Cox Elementary Children's Dental Clinic
37615 Martin Luther King Boulevard
Dade City, FL 33523
352-834-6181
Pasco.Web@FLHealth.gov

Dade City
13941 15th Street
Dade City, FL 33525
352-521-1450
Pasco.Web@FLHealth.gov

Denton Ave
11611 Denton Avenue
Hudson, FL 34667
727-861-5661
Pasco.Web@FLHealth.gov

Little Road
10841 Little Road
New Port Richey, FL 34654
727-619-0300
Pasco.Web@FLHealth.gov

Main Street
5640 Main Street
Suite 100
New Port Richey, FL 34652
727-841-4425
Pasco.Web@FLHealth.gov

Wesley Chapel
33845 FL-54
Wesley Chapel, FL 33543
813-780-0740
Pasco.Web@FLHealth.gov

Pinellas

Clearwater Health Department
310 N. Myrtle Ave.
Clearwater, FL 33755
727-469-5800
Info.PinCHD52@flhealth.gov

Largo Health Department
No clinic services provided at this location
12420 130th Ave. N.
Largo, FL 33774
727-588-4040
Info.PinCHD52@flhealth.gov

Mid-County Health Department
8751 Ulmerton Rd.
Largo, FL 33771
727-524-4410
Info.PinCHD52@flhealth.gov

Pinellas Park Health Department
(Temporary closed due to renovations)
6350 76th Ave. N.
Pinellas Park, FL 33781
727-547-7780
Info.PinCHD52@flhealth.gov

St. Petersburg Health Department
205 Dr. Martin Luther King Jr. St. N.
St. Petersburg, FL 33701
727-824-6900
Info.PinCHD52@flhealth.gov

Tarpon Springs Health Department
301 S. Disston Ave.
Tarpon Springs, FL 34689
727-942-5457
Info.PinCHD52@flhealth.gov

Polk

Auburndale Clinic
1805 Hobbs Road
Auburndale, FL 33823
863-519-7910
polkcommunications@flhealth.gov

Administration Building
1290 Golfview Ave
Bartow, FL 33830
863-519-7900
polkcommunications@flhealth.gov

Bartow WIC Office
1275 Brice Blvd
Bartow, FL 33830
863-519-7542
polkcommunications@flhealth.gov

Environmental Health
2090 E. Clower St.
Bartow, FL 33830
863-519-8330
polkcommunications@flhealth.gov

Haines City Clinic
1700 Baker Ave E
Haines City, FL 33844
863-519-7910
polkcommunications@flhealth.gov

Healthy Start Hub
2020 E. Georgia St
Bartow, FL FL
863-519-7900
polkcommunications@flhealth.gov

Lake Wales WIC
835 West Central Avenue
Bldg B
Lake Wales, FL 33853
863-519-7542
polkcommunications@flhealth.gov

Lakeland Clinic
3241 Lakeland Hills Blvd
Lakeland, FL 33805
863-519-7910
polkcommunications@flhealth.gov

Lakeland WIC
1291 Ariana St.
Lakeland, FL 33803
863-519-7542
polkcommunications@flhealth.gov

Specialty Care Clinic
1255 Brice Blvd
Bartow, FL 33830
863-519-8233
polkcommunications@flhealth.gov

Wauchula WIC
115 K.D. Revell Rd
Wauchula, FL 33873
863-773-3276
polkcommunications@flhealth.gov
Winter Haven WIC Office

1475 Dundee Rd.
Winter Haven, FL 33884
863-519-7542
polkcommunications@flhealth.gov

Putnam

Florida Department of Health in Putnam
County
Environmental Health
2509 Crill Avenue, Suite 300
Palatka, FL 32177
386-326-7189
chd54webmaster@flhealth.gov

Main Office
Florida Department of Health in Putnam
County
2801 Kennedy Street
Palatka, FL 32177
386-326-3200/800-440-0420
chd54webmaster@flhealth.gov

Florida Department of Health in Putnam
County
South Satellite Site
101 South Prospect Street
Crescent City, FL 32112
386-698-4191/386-326-3216
chd54webmaster@flhealth.gov

Florida Department of Health in Putnam
County
West Satellite Site
Located at Interlachen Elementary
251 South County Road 315
Interlachen, FL 32148
386-684-3535/386-326-3216
chd54webmaster@flhealth.gov

St. Johns

Environmental Public Health
4040 Lewis Speedway
St. Augustine, FL 32084
904-209-3250
StJohnsFeedback@flhealth.gov

Main Office
Florida Department of Health in St.
Johns County
200 San Sebastian View
St. Augustine, FL 32084
904-209-3250
StJohnsFeedback@flhealth.gov

St. Lucie

Fort Pierce Location
714 Avenue C
Fort Pierce, FL 34950
772-462-3800
chd56WebMaster@flhealth.gov

St. Lucie West WIC at Lake Whitney
531 NW Lake Whitney Place
Port St. Lucie, FL 34986
772-785-6124
chd56WebMaster@flhealth.gov

Gwenda Thompson Trades Career
Center
3855 US Highway 1
Suite A
Fort Pierce, FL 34982
772-873-4931
chd56WebMaster@flhealth.gov

Port St. Lucie Clinic
5150 NW Milner Drive
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
Coronavirus Disease 2019 (COVID-19)

Agriculture Workers and Employers

Interim Guidance from CDC and the U.S. Department of Labor

This joint guidance for COVID-19 may be adapted by state and local health departments to respond to rapidly changing local circumstances.



Key Points

- Management in the agriculture industry should conduct [work site assessments](#)  to identify coronavirus disease 2019 (COVID-19) risks and infection prevention strategies to protect workers.
- Work site guidance for COVID-19 prevention and control should be taken into consideration in employer-furnished shared worker housing, transportation vehicles and work settings.
- Prevention practices should follow the [hierarchy of controls](#), which includes using source control and a combination of engineering controls, administrative controls (especially proper sanitation, cleaning, and disinfection), and personal protective equipment.
- Grouping workers together into cohorts may reduce the spread of COVID-19 transmission in the workplace by minimizing the number of different individuals who come into close contact with each other over the course of a week, and may also reduce the number of workers quarantined because of exposure to the virus.
- Owners/operators should maximize opportunities to place farmworkers residing together in the same vehicles for transportation and in the same cohorts to limit exposure.
- Basic information and training about infection prevention should be provided to all farmworkers in [languages](#) they can understand.
- Agriculture work sites developing plans for continuing operations where COVID-19 is spreading among workers or in the surrounding community should work directly with appropriate [state and local public health](#) officials and occupational safety and health professionals.

Who this guidance is for: All agriculture workers and their employers.

Farm operations vary across regions of the country. This guidance provides a template of action to protect agriculture workers from coronavirus disease 2019 (COVID-19). Agricultural employers can adapt these recommendations to protect workers at their particular work sites or in specific work operations.

Purpose: Agriculture work sites, shared worker housing, and shared worker transportation vehicles present unique challenges for preventing and controlling the spread of COVID-19. Consistent application of specific preparation, prevention, and management measures can help reduce the risk of spreading COVID-19.

Workers on farms, ranches, and other production agriculture work sites are considered [critical infrastructure workers within the Food and Agriculture Sector](#)  . All agriculture work sites should follow, as feasible, relevant aspects of CDC guidance, including but not limited to this document, CDC's [Critical Infrastructure Guidance](#), and guidance from regulatory bodies such as the Food and Drug Administration, as needed. Additionally, they should work directly with appropriate state and local public health officials and occupational safety and health professionals.

This interim guidance is based on what is currently known about COVID-19. CDC and the U.S. Department of Labor will update this guidance as needed and as additional information becomes available. Please check the [CDC COVID-19 website](#) periodically for updated guidance.

Background

COVID-19 is a respiratory illness caused by a new virus called SARS-CoV-2. [Symptoms](#) often include a fever, cough, shortness of breath or difficulty breathing, chills, muscle pain, sore throat, or new loss of taste and smell.

Workers [at higher risk for severe illness](#) include older adults and people of any age with certain underlying [chronic medical conditions](#) like chronic lung disease, severe obesity, diabetes, or serious heart conditions. Policies and procedures addressing issues related to workers at higher risk of severe illness from COVID-19 should be made in consultation with licensed healthcare and human resource professionals.

The virus is thought to spread mainly from person-to-person:

- Between people who are in close contact with one another ([within about 6 feet](#)).
- Through respiratory droplets produced when an infected person coughs, sneezes, or talks.

Recent studies indicate that people who are not showing symptoms can spread the virus. It may also be possible that a person can get COVID-19 by touching a surface or object that has the virus on it and then touching their own mouth, nose, or possibly their eyes. This is not thought to be the main way the virus spreads, but we are still learning more about this virus. Based on the limited information available to date, the [risk of animals spreading COVID-19 to people is considered to be low](#).

Exposure risk among agriculture workers and employers

There is no evidence that livestock, crops, or products that may be handled by workers involved in production agriculture are sources of COVID-19 infection. However, close contact with coworkers may contribute to spreading the virus among workers.


Distinctive factors that affect farmworkers' risk for COVID-19 in production agriculture workplaces include:

- **Distance between workers** – farmworkers often have close contact to one another both in the fields and indoors. Workers may also be near one another at other times, such as when clocking in or out, during breaks, when sharing transportation, or in shared housing.
- **Duration of contact** – farmworkers often have prolonged close contact with coworkers, both on the work site and during transportation and in some housing. Continued contact with potentially infectious individuals increases the risk of COVID-19 transmission.
- **Type of contact** – farmworkers may be exposed to COVID-19 through respiratory droplets in the air—for example, when workers who have the virus cough, sneeze, or talk. Exposure could also occur when workers have contact with contaminated surfaces or objects, such as tools, equipment, tractors, workstations, toilet facilities, or break room tables and then touch their own mouth, nose, or possibly their eyes. This is not thought to be the main way the virus spreads, but we are still learning more about how this virus spreads.
- **Other factors that may increase risk among some workers include:**
 - Sharing transportation such as ride-share vans or shuttle vehicles, car-pools, and public transportation.
 - Living in employer-furnished housing and sharing living quarters, cooking and eating areas, bathrooms, and laundry facilities with fellow workers.
 - Living in crowded and multigenerational housing.
 - Contact within their households/families and with fellow workers in community settings in areas with ongoing community transmission.
 - Mobility of the workforce (i.e., migrant workers) who, in moving from farm to farm, can potentially spread the virus between communities.
 - Poor access to clean water for hygiene purposes throughout the day.

Create a COVID-19 assessment and control plan

Farm owners and operators can prevent and [slow the spread of COVID-19](#). Owners/operators should develop a COVID-19 assessment and control plan to protect themselves and farmworkers, in accordance with the [CDC Interim Business Guidance for Businesses and Employees](#) and

Agricultural Employer Checklist

[General Business Frequently Asked Questions](#). [State and local health departments](#)  may also provide resources to aid in the development of these plans. Owners/operators can respond in flexible ways to varying levels of disease transmission in the community and be prepared to refine their control plans as needed. A control plan should reflect the specific region, work site space, job tasks, and other features of each farm, ranch, orchard, or other agricultural operations and locations. Those involved in the work can best set priorities and assess how realistic these recommendations are for specific situations at their facilities.

Owners/operators should designate a qualified workplace coordinator who will be responsible for COVID-19 assessment and control planning. All workers should know how to contact the identified coordinator with any COVID-19 concerns, and the coordinator should handle such concerns confidentially, as appropriate. The workplace coordinator should have a means to communicate in the preferred languages spoken or read by the workers, if possible, and provide [materials](#) at the appropriate literacy level. Farmworkers should also be provided with contact information about where to get COVID-19 testing.

The workplace coordinators and management need to follow all applicable federal, state, and local regulations and should be aware of the evolving nature of recommendations regarding worker safety and health during the COVID-19 pandemic. Work site assessments to identify COVID-19 risks and prevention strategies should be done periodically as part of sound occupational health and public health practice.

Control plan

Recommendations for worker infection prevention are based on an approach known as the [hierarchy of controls](#). This approach groups actions by their likely effectiveness in reducing or removing hazards. In most cases, the preferred approach is to eliminate a hazard or hazardous processes (e.g. exclude sick workers and visitors), install feasible [engineering controls](#), and implement appropriate protocols for [cleaning, disinfection and sanitation](#) to further reduce exposure or shield farmworkers. Until such controls are in place, or if they are not effective, other [administrative control](#) measures and [personal protective equipment \(PPE\)](#) will be needed.

Screening and monitoring workers

Consider screening farmworkers for COVID-19 signs and symptoms (e.g., temperature checks).^[1] Uniform policies and procedures for screening workers should be developed in consultation with state and local health officials and occupational medicine professionals. Possible options to screen workers for COVID-19 symptoms could include:

- Screening prior to entry into the work site, or if possible, before boarding shared transportation.
- Asking workers in appropriate languages if they have had a fever (or feelings of feverishness), respiratory symptoms, or [other symptoms](#) in the past 24 hours.
- Checking temperatures of workers at the start of each shift to identify anyone with a fever of 100.4°F or greater (or reported feelings of feverishness).
- Do not let employees enter the workplace if they have a fever of 100.4°F or greater (or reported feeling of feverishness), or if screening results indicate that the worker is suspected of having COVID-19-like symptoms (see managing sick workers below).
- Encouraging workers to report symptoms immediately, when onsite.
- Encouraging workers who have symptoms to self-isolate and contact a healthcare provider, or when appropriate, providing them with access to direct medical care or telemedicine. Also:
 - Coordinating any recommended diagnostic testing with the occupational medicine provider, or state and local public health officials.
 - Providing them with [information on when it is safe to return to work](#) along with the operation's return-to-work policies and procedures.

Agricultural Employer Checklist for Creating a COVID-19 Assessment and Control Plan

To prevent and slow the spread of COVID-19, agricultural employers can use this checklist to create a COVID-19 assessment and control plan for applying specific preparation, prevention, and management measures. This checklist has been developed based on the [Agriculture Workers and Employers Interim Guidance from CDC and the U.S. Department of Labor](#).

This checklist has five sections:

- **Section 1:** Assessment
- **Section 2:** Control Plan based on the Hierarchy of Controls
 - Screening and Monitoring Workers
 - Managing Sick Workers
 - Addressing Return to Work after Worker Exposure to COVID-19
 - Engineering Controls
 - Cleaning, Disinfection, and Sanitation
 - Administrative Controls
 - Personal Protective Equipment (PPE)
- **Section 3:** Special Considerations for Shared Housing
- **Section 4:** Special Considerations for Shared Transportation
- **Section 5:** Special Considerations for Children

This checklist can be used to reassess, update, and modify your assessment and control plan on a regular basis or as conditions change.



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- Informing human resources, health unit (if in place), and supervisor (so worker can be moved off schedule during illness and a replacement can be assigned, if available).

Ensure that personnel performing screening activities, including temperature checks, are appropriately protected from exposure to potentially infectious workers entering the facility by:

- Training temperature screeners to use temperature monitors according to manufacturer instructions.
- Using temperature monitors that are accurate under conditions of use (such as extreme hot/cold weather temperatures).
- Protecting the screener through the use of social distancing, barrier or partition controls, and personal protective equipment (PPE). However, reliance on PPE alone is a less effective control and is more difficult to implement, given PPE shortages and training requirements.
 - See the “Should we be screening employees for COVID-19 symptoms?” section of [General Business Frequently Asked Questions](#) as a guide.
- If temperature screeners need to be within 6 feet of workers, providing them with appropriate PPE:
 - Such PPE should include gloves, a gown, a face shield, and, at a minimum, a facemask. See OSHA’s PPE standards at [29 CFR 1910 Subpart I](#) .
 - Train employees on how to properly put on, take off, and dispose of all PPE.
 - Filtering facepiece respirators, such as N95s, may be appropriate for workers performing screening duties. If respirators are needed, they must be used in the context of a comprehensive respiratory protection program that includes medical evaluation, fit testing, and training in accordance with OSHA’s Respiratory Protection standard ([29 CFR 1910.134](#)). [2]

Managing sick workers

Workers who appear to have [symptoms](#) including a fever, cough, shortness of breath, or a two-or-more of the following symptoms including chills, repeated shaking with chills, muscle pain, headache, sore throat, or new loss of taste or smell, upon arrival at work, or who develop these symptoms during the day should immediately be separated from others at the workplace, sent to their permanent or temporary housing arrangements, or—when they can’t be isolated in their existing housing arrangement—placed in alternative housing arrangements under quarantine away from other workers. (Note: employers should consult [DOL](#) and [DHS](#) regulations and/or guidance for any additional requirements or obligations concerning temporary foreign workers under the H-2A program).

Since we don’t know for sure which animals can be infected with the virus that causes COVID-19, sick workers should stay away from animals, including livestock and pets, during their illness. Sick workers should be provided with informational resources to access medical attention should they need it. One such resource may be the [Health Resources and Services Administration \(HRSA\) website](#) which identifies HRSA-funded health centers. These health centers can assess whether a patient needs further evaluation, which may be done over the phone or using telehealth. Individuals may also receive primary health care services at their local health center at a reduced cost or free of charge depending on their economic status. Most people with COVID-19 will have mild illness and can recover at home.

Ensure that personnel managing sick employees are provided with appropriate PPE and training. For personnel who need to be within 6 feet of a sick colleague, follow the same PPE considerations listed for screeners above and consult OSHA’s PPE standards at [29 CFR 1910 Subpart I](#) .

If a worker is confirmed to have COVID-19, owners/operators should consider ways to inform anyone at the work site, to the extent it is reasonably knowable, who has been in sustained, close contact (within 6 feet) with that worker of their possible exposure to COVID-19 based on the [CDC Public Health Recommendations for Community-Related Exposure](#). However, the owners/operators should protect the infected worker’s confidentiality and not identify them, as required by the [Americans with Disabilities Act \(ADA\)](#).

If a worker becomes or reports being sick, [clean and disinfect](#) the work area, equipment, common areas used (break areas, bathrooms, vehicles, etc.), and any tools handled by the symptomatic worker. If a worker is in employer-furnished housing, consider providing a dedicated space for the worker to recover away from others, and then clean and disinfect living quarters, cooking and eating areas, bathrooms, and laundry facilities. Do not allow other workers to use these areas until they have been cleaned and disinfected. A worker going to a home in the community [can be provided with guidance](#) to mitigate risk of transmission in the home.

Owners/operators should work with state, tribal, local, and territorial (STLT) health officials to facilitate the identification of other exposed and potentially exposed individuals, such as coworkers. Facilities should work with STLT officials to consider the appropriate role for [testing](#) and [workplace contact tracing](#) (i.e., identifying person-to-person spread) after a worker tests positive for COVID-19.

On-site healthcare personnel, such as facility nurses or emergency medical technicians, should follow appropriate CDC and OSHA protective guidance for [healthcare](#) and [emergency response](#) personnel.

Addressing return to work after worker exposure to COVID-19

- Employers should follow [CDC's Critical Infrastructure Guidance](#) for workers who have had a COVID-19 exposure but remain free of symptoms.
- Critical infrastructure employers have an obligation to manage the continuation of work in a way that best protects the health of their workers and the general public. Employers can use strategies from [CDC's COVID-19 Critical Infrastructure Sector Response Planning](#).
- When workers return who have had COVID-19, including those workers who have tested positive for COVID-19 but remained free of symptoms, to onsite operations, employers should follow the [CDC interim guidance for Discontinuation of Isolation for Persons with COVID-19 Not in Healthcare Settings](#). Consultation with an occupational health provider and state and local health officials will help owners/operators develop the most appropriate plan.

The COVID-19 pandemic is constantly changing, so employers of critical infrastructure workers will need to continue to reassess COVID-19 transmission levels in their area and follow recommendations from local, state, and federal officials. This guidance does not replace state and local directives for businesses.

Control plan—Engineering controls

Assess and identify opportunities to limit close contact with others (maintain a distance of at least 6 feet between people whenever possible) if feasible. This includes owners, operators, farmworkers, supervisors, crew leaders, delivery personnel, and anyone else entering the agricultural workplace. Engage farmworkers in this assessment process.

Adding touch-free methods (i.e., touch-free time clocks, automatic doors) or rearranging work tasks can help farmworkers stay at least 6 feet away from others. Possible options may include:

- Adjusting workflow to allow for a 6-foot distance between farmworkers, if feasible.
- Installing shields or barriers, such as plastic, between farmworkers, when a 6-foot distance between farmworkers is not possible.
- Adding additional clock in/out stations (touch-free if available) or additional time for clocking in/out to reduce crowding, if feasible.
- Removing or rearranging chairs and tables or adding visual cue marks in employee break areas to support social distancing between farmworkers.

Employers should also train workers to follow protective measures while on breaks.

Control plan—Cleaning, disinfection, and sanitation

Hand hygiene

- Encourage farmworkers to [wash their hands](#) often with soap and water for at least 20 seconds.
- Farmworkers must have reasonable access to permanent and/or temporary hand washing facilities equipped with soap, potable water, and clean, single-use towels ([29 CFR 1928.110](#) [↗](#) ; [40 CFR 170.411](#) [↗](#) , [170.509](#) [↗](#) and [170.605\(h\)-\(j\)](#) [↗](#)). Easy access is especially important in areas where multiple farmworkers are working; increase the number of hand washing stations to minimize the distance to a station and the likelihood of crowding at stations.
- In addition, to increasing the frequency of hand washing, if hands aren't visibly soiled or dirty, farmworkers can use hand sanitizer containing at least 60% alcohol, rubbing hands until they are dry.

These sanitizing stations should be in multiple locations on the farm, if feasible, such as the point of entry or exit to a farm field, the location where farmworkers clock in/out, and, if possible, in individual containers made available to workers in field settings.

Disinfection and sanitation

Farm owners/operators should develop [sanitation protocols](#) for daily cleaning and sanitation of work sites, where it is feasible to disinfect the work site, as well as cleaning and disinfecting procedures for high-touch areas such as tools, equipment, and [vehicles](#) used by farmworkers, following [CDC guidance on cleaning methods](#). In addition, they should:

- Follow the manufacturer's contact time recommendations to make sure solutions remain on surfaces for the recommended time.
- Since children may be present on the farm, plan how to keep cleaning chemicals, including hand sanitizers out of reach of children.
- Choose disinfectants or alternative cleaning methods (e.g., soap and water) for surfaces with which food comes into contact.

Also see additional [information from EPA on cleaning and disinfecting workplaces](#) [↗](#).

Conduct targeted and more frequent [cleaning and disinfecting of high-touch areas](#) of shared spaces (e.g., time clocks, bathroom fixtures, vending machines, railings, door handles). For example, possible options may include:

- Clean and disinfect break areas between each group using the areas, as well as daily.
- Clean and disinfect locker rooms at the end of each shift.
- Provide disposable disinfectant wipes or other appropriate disinfectant supplies, and required PPE to use these safely, so that commonly touched surfaces can be wiped down, as needed.
- Refer to the [Transportation Section](#) below for guidance on sanitizing farm vehicles and implements.

Sanitizing tools and equipment

Tools vary by agricultural production, but examples include handheld hoes, rakes, crates, milking equipment (including electronic components), gates, saddles, and animal harnesses.

- Where possible, do not share tools.
- If tools are used by multiple employees, they should be cleaned and disinfected between each employee use, if possible.
- When cleaning and disinfecting after each use is not possible, daily targeted and more frequent cleaning of shared equipment and tools is needed. In such cases, workers may also need to use gloves when handling shared tools and equipment.
- Dispose of all cleaning material and non-reusable PPE in compliance with [OSHA standards](#) [↗](#) to prevent further spread of COVID-19.


Control plan—Administrative controls

Training

All communication and training for workers should be easy to understand and should be provided in [languages](#) appropriate to the preferred languages spoken or read by those receiving the training, be at the appropriate literacy level, and include accurate and timely information about:

- Signs and symptoms of COVID-19, how it spreads, risks for workplace exposures, and how workers can protect themselves.
- Proper [handwashing](#) practices and use of hand sanitizer stations.
- Farm-specific social distancing practices (e.g., how to move through fields in a way that allows workers to stay at least 6 feet apart).
- [Cough and sneeze etiquette](#).

- Other routine infection control precautions:
 - Putting on and taking off masks and gloves.
 - Social distancing measures.
- Steps to take if they get sick.
- Employer policies regarding COVID-19 (disinfection protocols, housing and worker isolation, sick leave policies) and how employees should alert their supervisors if they are experiencing signs or symptoms of COVID-19 or if they have had recent close contact with a suspected or confirmed COVID-19 case.

Employers should consider placing simple posters at the entrance to the workplace and in break areas, employer furnished housing, and other workplace areas where they are likely to be seen. Posters should be in all of the languages that are common in the worker population. CDC has free, simple [posters available to download](#) and print, some of which are translated into different languages. OSHA provides [additional information](#)  about training on its COVID-19 webpage.

Review leave and sick leave policies

- Consider modifying policies to make sure that ill workers are not in the workplace and are not penalized for taking sick leave. Make sure that workers are aware of and understand these policies.
- Analyze any incentive programs and consider modifying them, if warranted, so that workers are not penalized for taking sick leave if they have COVID-19.
- Consider additional flexibilities that might include giving advances on future sick leave and allowing workers to donate sick leave to each other.

Promote social distancing

- Consider reducing crew sizes, staggering work shifts, mealtimes, and break times, and having farmworkers alternate rows in fields to facilitate a 6-foot distance between each other.
- Consider placing materials (such as harvesting buckets) and produce at a central transfer point instead of transferring directly from one worker to the next.
- Consider grouping healthy workers together into cohorts that include the same workers each day. This can increase the effectiveness of altering normal shift schedules by making sure that groups of workers are always assigned to the same shifts with the same coworkers. Effectiveness is optimized if it is aligned with shared living quarters and shared transportation. Grouping workers into cohorts may reduce the spread of COVID-19 transmission in the workplace by minimizing the number of different individuals who come into close contact with each other over the course of a week, and may also reduce the number of workers quarantined because of exposure to the virus.
- Grouped workers, as described above, are considered a single household or family. Farmworkers that are in the same shared housing unit should follow the [Households Living in Close Quarters Guidance](#). Owners/operators should maximize opportunities to place farmworkers residing together in the same vehicles for transportation and in the same groups to limit exposure.
- When providing training, consider providing it outside, in smaller than usual groups with participants 6 feet apart.

Cloth face coverings in agricultural operations



CDC [recommends](#) wearing cloth face coverings as a protective measure in addition to social distancing (i.e., staying at least 6 feet away from others). Cloth face coverings may be especially important when social distancing is not possible or feasible based on working conditions. A cloth face covering may reduce the amount of large respiratory droplets that a person spreads when talking, sneezing, or coughing. Cloth face coverings may prevent people who do not know they have the virus that causes COVID-19 from spreading it to others. Cloth face coverings are intended to protect other people—not the wearer.

Cloth face coverings are not PPE. They are not appropriate substitutes for PPE such as respirators (like N95 respirators) or medical facemasks (like surgical masks) in workplaces where respirators or facemasks are recommended or required to protect the wearer.

While wearing cloth face coverings is a public health measure intended to reduce the spread of COVID-19 in communities, it may not be practical for workers to wear a single cloth face covering for the full duration of a work

shirt (e.g., eight or more hours) in agricultural operations if they become wet, soiled, or otherwise visibly contaminated during the work shift. If cloth face coverings are worn in these operations, employers should provide readily available clean cloth face coverings (or disposable facemask options) for workers to use when the coverings become wet, soiled, or otherwise visibly contaminated.




Employers who determine that cloth face coverings should be worn in the workplace, including to comply with state or local requirements for their use, should ensure the cloth face coverings:

- Fit over the nose and mouth and fit snugly but comfortably against the side of the face;
- Are secured with ties or ear loops;
- Include multiple layers of fabric;
- Allow for breathing without restriction (and are not worn by anyone with trouble breathing);
- Can be put on and removed by the wearer without help;
- Do not lead to heat-related illness (OSHA's [Heat page](#)  offers tips on water and rest breaks);
- Can be laundered using the warmest appropriate water setting and machine dried daily after the shift, without damage or change to shape (a clean cloth face covering should be used each day);
- Are not used if they become wet or contaminated;
- Are replaced with clean replacements, provided by employer, as needed;
- Are not shared among workers unless adequately laundered between uses;
- Are handled as little as possible to prevent transferring infectious materials to the cloth; and
- Are not worn with or instead of [respiratory protection](#)  when respirators are needed.

Since cloth face coverings may be difficult to wear for extended periods of time, especially in hot humid environments, require touching of the face and repositioning of the coverings, and may require frequent removal and replacement for water or nourishment breaks, social distancing will be very important when use of cloth face coverings are not feasible. In such instances, employers may also consider providing workers with alternatives to cloth face coverings, such as face shields.

Control plan—Personal protective equipment (PPE)


As part of their hazard assessments, owners and operators should consider whether PPE is necessary to protect workers. This is especially important when engineering and administrative controls are difficult to maintain and there may be exposure to other workplace hazards.

Farm workers who have frequent and/or close contact (i.e., within 6 feet of) with coworkers who may be infected with SARS-CoV-2 are in the medium risk exposure category based on the [Guidance on Preparing Workplaces for COVID-19](#) . Medium risk workers rarely are required to use respirators for infection control. See the PPE section beginning on page 14 of the [booklet](#)  for details. As is always the case when respirators are not required to protect workers, owners and operators may consider allowing voluntary use of filtering facepiece respirators (such as N95s) if workers wish to provide and use such equipment on their own. Owners and operators who allow voluntary use of respirators should ensure they comply with the voluntary use provisions of the OSHA Respiratory Protection standard ([29 CFR 1910.134](#) ). Be aware that the use of filtering facepiece respirators may increase the risk of heat-related illness. Owners and operators should adjust water availability and frequency of breaks as appropriate whenever workers are at risk of heat-related illness.

Farmworkers may need PPE such as gloves, face and eye protection, and other types of PPE when cleaning and disinfecting work sites, including frequently touched surfaces, tools, and equipment. Anyone involved in cleaning and/or disinfecting workspaces or equipment should wear gloves selected based on information provided in the manufacturer's Safety Data Sheet (SDS) for the specific sanitizing or disinfectant agent.

When PPE is needed, owners and operators should consider additional hazards that may be created by poorly fitting PPE in the work environment.

Training in the use of PPE

- Provide [appropriate PPE](#) training via the use of [videos](#) or in-person visual demonstrations, and ensure PPE is used properly by all farmworkers. Maintain physical/social distancing during these demonstrations. The following points should be included in training:
 - When to use PPE and what PPE is necessary.
 - How to properly [don \(put on\) and doff \(remove\) PPE](#)  .
 - How to properly dispose of PPE, or if reusable, how to properly clean, and as appropriate, decontaminate PPE.
 - Reminder to change PPE if it becomes torn, dirty, or otherwise damaged.
 - After removing any PPE, always [wash hands](#) with soap and water for 20 seconds. If soap and water are not immediately available, and hands are not visibly dirty, an alcohol-based hand sanitizer that contains at least 60% alcohol, rubbing hands until they are dry, may be used.

Glove use

Farmworkers can continue to wear whatever gloves they normally wear while doing fieldwork. Such gloves may include disposable gloves made of lightweight nitrile or vinyl, or heavy-duty rubber work gloves that can be disinfected.

Special considerations for shared housing

Farmworkers may have limited control over their environment in some employer furnished housing. Owners/operators should provide [basic guidance](#) about COVID-19 and steps being taken to prevent transmission in housing areas in language(s) the farmworkers understand. CDC also provides guidance for [shared or congregate housing facilities](#).

Family members should be kept together in housing facilities. In addition, grouped or cohorted workers, as described above, can be considered a single household or family. Farmworkers that are in the same shared housing unit should follow the [Households Living in Close Quarters Guidance](#). Most importantly, in employer-furnished housing, the owner/operator should provide a dedicated and segregated space for sleeping quarters, kitchens and restrooms for farmworkers with confirmed or suspected COVID-19 to recuperate without infecting others.

In addition to using cohorting for shared housing, additional measures such as enhanced sanitation and social distancing should be taken to reduce the likelihood of transmission within a shared housing group. These measures are detailed below.

Housing and enhanced sanitation

- Provide disposable gloves, soap for hand washing, and household cleaners to help residents and staff implement [personal preventive measures](#).
- Develop and implement enhanced sanitation and cleaning plans that address frequency of sanitation and cleaning, and identify a responsible person.
- Do not share dishes, drinking glasses, cups, or eating utensils. Non-disposable food service items used should be handled with gloves and washed with dish soap and hot water or in a dishwasher.

Disinfecting living quarters, cooking and eating areas, bathrooms, and laundry facilities


- Ensure shared rooms have good air flow:
 - Use an air conditioner or open windows, if possible.
 - Clean air conditioner units and change filters according to the manufacturer's directions.
 - Provide air filtration systems in units without air conditioners, if possible.
- Clean common areas routinely following [CDC cleaning and disinfection guidelines](#). Residents should regularly clean and sanitize living quarters following [CDC cleaning and disinfection guidelines](#).
- Provide supplies for cleaning shared cooking utensils (such as knives, ladles, spatulas) and shared appliances (such as stoves, microwaves, and refrigerators, etc.).
- Maintain access to laundry facilities and post guidelines for doing laundry, if possible (e.g., restrict the number of people allowed in laundry rooms at one time to ensure social distancing, avoid shaking dirty laundry).
- Provide appropriate storage options for reusable PPE, such as work gloves, coveralls, safety glasses, boots, etc., to prevent cross contamination.

Housing and social distancing

- Support social distancing during the entire time farmworkers are housed, including while recreating, cooking, and sleeping.
- Consider if possible, adding physical barriers, such as plastic flexible screens, between bathroom sinks when there are multiple sinks. Modify common areas to encourage social distancing, if feasible, including furniture removal or spacing.
- Consider modifications to bed configurations to maximize social distancing in sleeping quarters, to the extent feasible. This may be accomplished through:
 - Head-to-toe sleeping arrangements with at least 6 feet of distance between beds.
 - Adding physical barriers, such as plastic flexible screens when beds cannot be 6 feet apart.
 - Minimizing or avoiding the use of bunk beds, which make distancing more difficult.
- If possible and environmental conditions allow, conduct meetings and conversations outdoors to minimize congregating in close quarters.
- Encourage residents to wear [cloth face coverings](#) in shared spaces.
- Advise residents that cloth face coverings should not be placed on young children under age 2, anyone who has trouble breathing, or is unconscious, incapacitated or otherwise unable to remove the mask without assistance.

Other important considerations in shared housing

- Consider instituting daily health checks (e.g., symptom and/or temperature screening) and daily reporting to supervisors prior to and during the housing period to identify illnesses early.
- Complete the health checks in a way that keeps workers from congregating in large crowds, such as providing multiple screening points or staggered reporting times.
- Maintain confidentiality of workers with confirmed COVID-19 infection.
- Establish isolation plans for responding to farmworkers with COVID-19:
 - Provide accommodations separate from others, if feasible. Consider designating one person who is not at higher risk of severe illness to assist an ill, isolated person and that personnel managing sick employees are appropriately protected from exposure. When personnel need to be within 6 feet of a sick colleague, follow the same PPE considerations for screeners who need to be within 6 feet of workers.
 - Consider using separate buildings or rooms instead of physical barriers where possible.
 - Consider providing separate food and bathroom access where possible.
 - Consider restricting access to non-essential persons.
 - Provide medical access and telemedicine for emergent illnesses.
 - Provide transportation, if necessary, in a manner that does not expose others.
 - Consult with a clinician or public health authority so they may monitor the situation and provide guidance on treatment and continued housing of all farmworkers.

For H-2A temporary housing considerations, [review DOL explanation of alternative housing arrangements in response to COVID-19](#).  

Special considerations for shared transportation

Transportation used by farmworkers may be provided by the employer, owner/operator, or a contractor, or might be a carpool arranged by the farmworkers. The following considerations should apply to all types of transportation to and from the agricultural work site:

- Provide as much space between riders as possible.
- Group (or cohort) workers in the same crews and/or those sharing living quarters together when transporting.
- Increase the number of vehicles and the frequency of trips to limit the number of people in a vehicle.
- Make hand hygiene (hand washing/hand sanitizer) available and encourage riders to use hand hygiene before entering the vehicle and when arriving at destination.
- Instruct riders to follow [coughing and sneezing etiquette](#) when in the vehicle.
- Highly encourage all passengers and drivers to wear [cloth face coverings](#) when in the vehicle.

Highly encourage all passengers and drivers to wear [cloth face coverings](#) when in the vehicle.

Transportation vehicles should be cleaned and disinfected in accordance with [CDC guidelines for non-emergency transport vehicles](#) before and after each trip, or daily at minimum.

Special considerations for children

Taking children to a work site not only exposes them to the hazards in the environment, but also distracts workers from their tasks, increasing the risk of injury for children and adults.

- Advise farmworkers to continue sending their children to childcare while they are working at the farm, if possible. Please see: [Guidance for Child Care Programs that Remain Open](#).
- Establish and enforce policies for farmworkers that restrict children from work sites. If childcare programs and K-12 schools are not open, the work site is not an acceptable alternative.
- Even when homes and work sites overlap, continue to restrict children from the work site.
- If youth farmworkers are hired, ensure you are following [labor laws](#) and assigning [age-appropriate tasks](#) , including as required by child labor regulations at 29 CFR Part 570.
- For hired youth, provide extra supervision and guidance, especially highlighting protection methods to minimize their exposure to COVID-19.

Other information

Regulations

Worker health and safety in the agriculture industry is regulated under [29 CFR Part 1928](#) and the [General Duty Clause](#) of the Occupational Safety and Health Act (OSH Act). Part 1928 covers “agricultural operations,” which would generally include any activities involved in the growing and harvesting of crops, egg production, and the raising of livestock. OSHA enforces most of the applicable standards, as well as the General Duty Clause, when no specific standard applies. However, the Wage & Hour Division (WHD) has shared authority with OSHA over two standards: the Field Sanitation standard ([29 CFR 1928.110](#)) and the Temporary Labor Camp standard ([29 CFR 1910.142](#)). The Environmental Protection Agency implements the [Worker Protection Standard](#) (40 CFR Part 170) to protect farmworkers and pesticide handlers from pesticides.

Workers’ rights

[Section 11\(c\)](#) of the [Occupational Safety and Health Act of 1970](#), 29 USC 660(c), prohibits employers from retaliating against workers for raising concerns about safety and health conditions. Additionally, OSHA’s [Whistleblower Protection Program](#) enforces the provisions of more than 20 industry-specific federal laws protecting employees from retaliation for raising or reporting concerns about hazards or violations of various airline, commercial motor carrier, consumer product, environmental, financial reform, food safety, health insurance reform, motor vehicle safety, nuclear, pipeline, public transportation agency, railroad, maritime, securities, and tax laws. OSHA encourages workers who suffer such retaliation to [submit a complaint to OSHA](#) as soon as possible in order to file their complaint within the legal time limits, some of which may be as short as 30 days from the date they learned of or experienced retaliation. An employee can file a complaint with OSHA by [visiting or calling](#) his or her local OSHA office; sending a written complaint via fax, mail, or email to the closest OSHA office; or [filing a complaint online](#). No particular form is required, and complaints may be submitted in any language.

OSHA provides recommendations intended to assist employers in creating workplaces that are free of retaliation and guidance to employers on how to properly respond to workers who may complain about workplace hazards or potential violations of federal laws. OSHA urges employers to review its publication [Recommended Practices for Anti-Retaliation Programs](#).

Footnotes

[1] Employers should evaluate the burdens and benefits of recording workers’ temperatures or asking them to complete written questionnaires. These types of written products may become records that must be retained for the duration of the workers’ employment plus 30 years. See OSHA’s Access to Employee Exposure and Medical Records standard ([29 CFR 1910.1020](#)). If employers do not record workers’ temperatures, they would not be records that must be retained. Thus, employers and workers may wish to avoid making a record of temperatures when workers’ temperatures are checked.

[2] While OSHA’s Respiratory Protection standard ([29 CFR 1910.134](#)) does not apply to agricultural operations, performing screening, including checking workers’ temperatures, is not integrally related to the growing and harvesting of crops. Personnel performing screening are covered by OSHA’s general industry standards at [29 CFR Part 1910](#), including the Respiratory Protection standard. Screening activities also would not qualify for certification as “agricultural labor or services” under the H-2A visa program.

Additional Resources

- [CDC COVID-19 website](#)
- [CDC Interim Guidance for Businesses and Employers to Plan and Respond to Coronavirus Disease 2019](#)
- [CDC Prepare your Small Business and Employees for the Effects of COVID-19](#)
- [CDC Tools for Cross-Cultural Communication and Language Access](#)
- [NIOSH COVID-19 website](#)
- [CDC and OSHA Guidance for Meat and Poultry Processing Workers and Employers](#)
- [CDC COVID-19 and Animals website](#)
- [CDC-INFO: 1-800-CDC-INFO \(1-800-232-4636\) | TTY: 1-888-232-6348](#)
- [Worker Protection Standard](#)
- [OSHA COVID-19 website](#)
- [U.S. Department of Labor and U.S. Department of Health and Human Services’ Guidance on Preparing Workplaces for COVID-19](#)
- [Department of Labor, Employment and Training Administration, Office of Foreign Labor Certification, COVID-19, Frequently Asked Questions, ROUND 3](#)
- [OSHA COVID-19 Standards](#)
- [WHD COVID-19 and the American Workplace](#)
- [OFLC’s COVID-19 related FAQs:](#)
 - [Round 1](#)
 - [Round 2](#)
 - [Round 3](#)
- [USDA COVID-19 Federal Rural Resource Guide](#)

Disclaimer

This guidance is not a standard or regulation, and it creates no new legal obligations. It contains recommendations as well as descriptions of mandatory safety and health standards. The recommendations are advisory in nature, informational in content, and are intended to assist employers in providing a safe and healthful workplace. The Occupational Safety and Health Act requires employers to comply with safety and health standards and regulations promulgated by OSHA or by a state with an OSHA-approved state plan. In addition, the Act’s General Duty Clause, Section 5(a) (1), requires employers to provide their employees with a workplace free from recognized hazards likely to cause death or serious physical harm.