

Bureau of the Agency Chief Contracting Officer

Emergency Procurements

An emergency condition is an UNFORSEEN danger to life, safety, property, or a necessary service. The existence of such a condition creates an immediate and serious need for goods, services, or construction that cannot be met through normal procurement methods. An emergency procurement shall be limited to the procurement of those items necessary to avoid or mitigate serious danger to life, safety, property, or a necessary service.

- Immediately following indentification of the need for an emergency procurement, the programmatic or administrative AC should be notified.
- The AC should notify the ACCO of the need in writing and the AC or their designee shall email the following information to the ACCO:
 - The date the emergency first became known.
 - A list of goods, services, and/or construction to be procured;
 - The name of the vendor(s)
 - o Prior performance information if the vendor is a current or prior contractor
 - The basis of vendor selection
 - Estimated maximum cost
- The Program shall not proceed with the purchase until approval is received from the ACCO.
- The ACCO will send a approval request to the Law Department and the Comptroller, and shall cc: the Mayor's Office of Contract Services.
- Approval can typically be obtained in a few hours. Once approval is received, ACCO will notify the AC that the services can begin and/or the goods can be purchased.
- After the emergency subsides the requester shall submit a CAR for the emergency procurement and ACCO will formally process the procurement.

From:	Megan Montalvo
To:	Caroline Lewis
Cc:	NYC Health Department Press Office
Subject:	RE: Question from WNYC
Date:	Tuesday, October 07, 2014 2:31:00 PM
Attachments:	image001.png

Hi Caroline,

On background, we have not contacted any contractors.

Megan Montalvo | Deputy Press Secretary NYC Department of Health and Mental Hygiene mmontalvo@health.nyc.gov | 347.396.4037



From: Caroline Lewis [mailto:carolineflewis@gmail.com] Sent: Tuesday, October 07, 2014 1:41 PM To: Megan Montalvo Subject: Re: Question from WNYC

Thanks!

On Tue, Oct 7, 2014 at 1:39 PM, Megan Montalvo <<u>mmontalvo@health.nyc.gov</u>> wrote: Hi Caroline,

We will look into this for you.

Megan Montalvo | Deputy Press Secretary NYC Department of Health and Mental Hygiene mmontalvo@health.nyc.gov | 347.396.4037



From: Caroline Lewis [mailto:<u>carolineflewis@gmail.com</u>] Sent: Tuesday, October 07, 2014 1:27 PM To: NYC Health Department Press Office Subject: Question from WNYC

Hi I am a WNYC reporter interested in finding out which company or companies the city is contracting in case an Ebola patient is being treated in NYC. I have one company called Bio-Recovery Corporation that says they have been contracted for Ebola cleanup and am wondering if the City is the party they have an agreement with and if there are any other companies contracted as well.

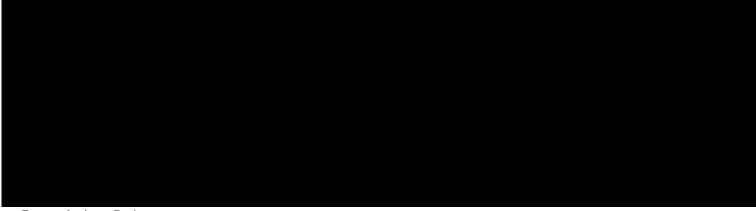
It would be great to get a call by the end of the day if possible. You can reach me at

Thanks Caroline

Sent from the New York City Department of Health & Mental Hygiene. This email and any files transmitted with it may contain confidential information and are intended solely for the use of the individual or entity to whom they are addressed. This footnote also confirms that this email message has been swept for the presence of computer viruses.

From:Andrew FacianoTo:Nancy ClarkSubject:ok to share email addressDate:Tuesday, October 14, 2014 3:23:15 PM

Just spoke to staff at Biorecovery – they asked if I could send them my contact info via email.



From: Andrew Faciano Sent: Friday, October 17, 2014 5:51 PM To: <u>info@biorecovery.com</u> Subject: RE: Contact information

Hi Sal,

Here's the scenario that we discussed, in writing:

Scenario:

- 3 room apartment (bedroom, kitchen and bathroom)
- Total square footage = 800
- Moderate Contamination (no seepage)
- 150lbs of waste
- Disposal = Category A

Can you provide total costs for the following three areas:

- 1. Assessment Cost:
- 2. Cleanup/Decontamination/Setup Costs including Equipment/Supplies Cost using Level C PPE_____/using Level A PPE
- 3. Disposal Cost: _____

In addition, we are requesting the following rates: Hourly Cost per title: Cost per pound per disposal

Here's the guidance on transport that we discussed: NYSDEC Ebola Waste Disposal Fact Sheet: <u>http://www.dec.ny.gov/chemical/99119.html</u> - these will be our requirements for disposal and transport. Please review and adjust your disposal/transport cost estimate accordingly.

Thanks again for your responsiveness.

Best,

Andrew

From: Andrew Faciano Sent: Thursday, October 16, 2014 5:19 PM To: 'info@biorecovery.com'

Subject: RE: Contact information Importance: High

Mr. Pain,

We are in the process of finalizing our scope of services. We are rapidly moving forward, and would appreciate if you could also provide the following as soon as possible:

- 1. Estimated costs for:
 - a. Time Cost per hour for typical staff (cleaning technicians, site supervisor, other applicable staff)
 - b. Material estimated cost of materials for a typical residential job (bedroom, kitchen, and bathroom decon). Please also include markup rate included in materials.
 - c. Weight cost per pound for waste disposal and transport

Feel free to contact me at the number below if you have any questions. Many thanks for your interest and for a quick response to these questions!

Best,

Andrew Faciano | Deputy Director Housing Interventions & Special Projects Unit Healthy Homes Program Bureau of Environmental Disease and Injury Prevention New York City Dept. of Health and Mental Hygiene 125 Worth St | Room 620, CN 58 | New York, NY 10013 Phone (646)632-6086 | Fax (646) 632-6409 | afaciano@health.nyc.gov

From: Andrew Faciano Sent: Wednesday, October 15, 2014 4:20 PM To: 'info@biorecovery.com' Subject: RE: Contact information

Good Afternoon Mr. Pain,

At your earliest convenience, can you forward a couple of references for residential jobs where your Firm performed biohazard cleanup? Also, you mentioned that you provide services to OCME – can you provide a contact person at OCME or a P.O. /Contract number?

Thanks,

Andrew Faciano | Deputy Director Housing Interventions & Special Projects Unit Healthy Homes Program Bureau of Environmental Disease and Injury Prevention New York City Dept. of Health and Mental Hygiene 125 Worth St | Room 620, CN 58 | New York, NY 10013 Phone (646)632-6086 | Fax (646) 632-6409 | <u>afaciano@health.nyc.gov</u>

From: Andrew Faciano Sent: Tuesday, October 14, 2014 4:13 PM To: 'info@biorecovery.com' Subject: Contact information

Good Afternoon Mr. Pain,

Thanks again for taking the time to speak to me today concerning your Firm's capacity and interest. As previously mentioned, we are in the beginning stages of information gathering, and will be in touch in the coming days.

Best,

Andrew Faciano | Deputy Director Housing Interventions & Special Projects Unit Healthy Homes Program Bureau of Environmental Disease and Injury Prevention New York City Dept. of Health and Mental Hygiene 125 Worth St | Room 620, CN 58 | New York, NY 10013 Phone (646)632-6086 | Fax (646) 632-6409 | <u>afaciano@health.nyc.gov</u>

om:	Nancy Clark
:	Barbara Markowitz
:	Andrew Faciano
ıbject:	Biorecovery Corp
ite:	Wednesday, October 15, 2014 1:50:53 PM
: Ibject:	Andrew Faciano Biorecovery Corp

Andrew, cc'd here, spoke to Sal Pain of Biorecovery Corp. He said that he did corpse removal and cleanup post trauma event; and had contracts with OCME.

Thanks, Nancy

*****PLEASE NOTE NEW PHONE NUMBER*****

Nancy Clark, MA, CIH, CSP Assistant Commissioner Department of Health and Mental Hygiene Bureau of Environmental Disease and Injury Prevention 125 Worth Street CN-58A New York, NY 10013

646-632-6073 office 646-632-6065 fax

From: Jeanine Prudhomme [mailto:jprudhom@health.nyc.gov]
Sent: Wednesday, October 15, 2014 1:58 PM
To: Chong, Margaret; Daloia, James; Kaelin, Lawrence
Cc: Andrew Faciano
Subject: Cleanup Contractors?

Hello Margaret and Jim: Hope all is well. The City working on putting a contract/s into place with biohazard or other cleanup contractors for Ebola (non-healthcare setting such as residences) and is reaching out to potential contractors – here is our short list Can EPA recommend any others or do you have some generic lists we can use? Who does EPA have on contract for biohazard cleanup?

Another question: you recall the issues we had with decon of personal propery with the anthrax drum case – does EPA have any suggested wording or policy document that would either explain the potential loss of personal property or mitigate against liability for personal property?

Thanks for your help Jeanine

Clean Harbors

Triumvirate

Degmor

The Biorecovery Corporation

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Please call me at 1 800 556 0621 with any questions you may have with regards to this price list Sal

On Oct 16, 2014 5:18 PM, "Andrew Faciano" afaciano@health.nyc.gov> wrote:

Mr. Pain,

We are in the process of finalizing our scope of services. We are rapidly moving forward, and would appreciate if you could also provide the following as soon as possible:

1. Estimated costs for:

a. Time - Cost per hour for typical staff (cleaning technicians, site supervisor, other applicable staff)

b. Material – estimated cost of materials for a typical residential job (bedroom, kitchen, and bathroom decon). Please also include markup rate included in materials.

c. Weight – cost per pound for waste disposal and transport

Feel free to contact me at the number below if you have any questions. Many thanks for your interest and for a quick response to these questions!

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Phone (646)632-6086 | Fax (646) 632-6409 | afaciano@health.nyc.gov

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Andrew Faciano | Deputy Director

Housing Interventions & Special Projects Unit

Healthy Homes Program

Bureau of Environmental Disease and Injury Prevention

New York City Dept. of Health and Mental Hygiene

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Bio Recovery Corporation

1863 Pond Rd. Suite 4 Ronkonkoma, NY 11779 Phone: (800) 556-0621 Fax: (888) 811-3912 info@biorecovery.com http://www.biorecovery.com

Insured: Housing Interventions & Special Projects Unit Property: 125 Worth St New York, NY 10013

Claim Number:	Policy Number:		Type of Loss:
Date of Loss: Date Inspected:		Date Received: Date Entered:	10/16/2014 5:26 PM
Price List:	NYMN8X_OCT14 Restoration/Service/Remodel		
Estimate:	2014-10-16-1726		

Price list



Bio Recovery Corporation

1863 Pond Rd. Suite 4 Ronkonkoma, NY 11779 Phone: (800) 556-0621 Fax: (888) 811-3912 info@biorecovery.com http://www.biorecovery.com

2014-10-16-1726

2014-10-16-1726

DESCRIPTION	QTY	UNIT PRICE	TOTAL
1. Emergency service call - after business hours	1.00 EA @	207.60 =	207.60
3. Emergency service call - during business hours	1.00 EA @	138.40 =	138.40
4. Trauma/Crime Scene Cleaning - Supervisory/Adminafter hrs	1.00 HR @	225.23 =	225.23
OSHA certified foreman/safety officer. (after hours)			
6. Trauma/Crime Scene Cleaning - Supervisory/Admin per hour	1.00 HR @	150.00 =	150.00
OSHA certified foreman/safety officer. (normal hours)			
7. Trauma/Crime Scene Cleaning Technician - after hours	1.00 HR @	202.71 =	202.71
8. Trauma/Crime Scene Cleaning Technician - per hour	1.00 HR @	135.00 =	135.00
9. Add for personal protective equipment (hazardous cleanup)	1.00 EA @	10.21 =	10.21
Level C			
10. Eye protection - plastic goggles - Disposable	1.00 EA @	5.57 =	5.57
Level C			
11. Respirator - Half face - multi-purpose resp. (per day)	1.00 DA @	1.67 =	1.67
Level C			
12. Respirator cartridge - organic vapor & acid gas (per pair)	1.00 EA @	13.13 =	13.13
Level C			
13. Personal protective gloves - Disposable (per pair) 15 mil	1.00 EA @	1.83 =	1.83
Level C			
15. Add for personal protective equipment (hazardous cleanup) - level A	1.00 UN @	800.00 =	800.00
Level A			
27. Supply Air Respirator (SAR) - per day	1.00 DA @	175.00 =	175.00
Level A			
16. Plastic container - trauma/crime scene/biohazard cleanup - 60 gl	1.00 EA @	125.12 =	125.12
17. Trauma/crime scene waste hauling & disposal - (Bid item)	1.00 EA @	195.00 =	195.00
Per container			
18. HEPA Vacuuming - Detailed - (PER SF)	1.00 SF @	1.56 =	1.56
19. Apply biological cleaning agent (spore-based)	1.00 SF @	0.23 =	0.23
20. Neg. air fan/Air scrubLarge (per 24 hr period)-No monit.	1.00 DA @	120.00 =	120.00
21. Add for HEPA filter (for neg. air machine/vacuum - Large)	1.00 EA @	257.69 =	257.69
22. Add for HEPA filter (for canister/backpack vacuums)	1.00 EA @	67.69 =	67.69
23. Truck and tools - per day	1.00 EA @	225.00 =	225.00
24. Containment Barrier/Airlock/Decon. Chamber	320.00 SF @	1.73 =	553.60
Decontamination chamber			
25. Peel & seal zipper	1.00 EA @	15.30 =	15.30
26. Containment Barrier - tension post - per day	1.00 DA @	3.30 =	3.30
28. Contamination - on-site ATP testing	1.00 EA @	24.06 =	24.06



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Summary for Dwelling

Line Item Total	3,654.90
Total Tax(Rep-Maint)	324.37
Replacement Cost Value Net Claim	\$3,979.27
Net Claim	\$

From: James Michel [james@biorecovery.com] Sent: Friday, October 17, 2014 6:28 PM To: Andrew Faciano; Erika Yan Subject: RE: Requested estimate

Hello,

Attached you will find the requested pricing please contact us if you have any questions.

- 3 room apartment (bedroom, kitchen and bathroom)
- Total square footage = 800
- Moderate Contamination (no seepage)
- 150lbs of waste
- Disposal = Category A

Can you provide total costs for the following three areas:

1. Assessment Cost: + \$800.00

2. Cleanup/Decontamination/Setup Costs including Equipment/Supplies Cost using Level C PPE = \$7,990.00 / using Level A PPE = \$12,190.00

Above prices are based on a 8 hour day of work below is the breakdown of pricing.

OSHA certified Safety Officer = \$195.00 per hour

OSHA Certified Foreman = \$215.00 per hour

OSHA Certified Technician = \$195.00 per hour

Communications Expert = \$90.00 per hour (only if required)

Level C PPE = \$100.00 per suit

Level A PPE = \$800.00 per suit

3. Disposal Cost: \$1,500.00 (\$10.00 per pound) only additional cost would be the poly barrels which are \$125.00 each

Thank you

James Michel SENIOR ESTIMATOR BIO-RECOVERY CORP.

Phone:800-556-0621Fax:888-811-3912





1863 Pond Road Suite 4 Ronkonkoma, NY 11779 http://www.biorecovery.com

BID TABULATION

Service:

Bio-Hazard Cleanup & Decontamination

Scenario:	
# of Rooms	3
Total Square Footage	800
Waste (lbs.)	150
Disposal Level	Category A
Contamination Level	Moderate

	o-Recovery orporation		
Assessment Fee	\$ 800.00		
Cleanup/Decontamination/Setup Costs			
incl. Equipment & Supplies Cost	\$ 7,990.00	(
Disposal Cost	\$ 1,500.00		
Total	\$ 10,290.00		

From: Judy D [malto:judy@biorecovery.com] Sent: Tuesday, October 21, 2014 2:14 PM To: Andrew Faciano; Erika Yan; James Michel Subject: Fwd: RE: Requested estimate

Good Afternoon,

As promised below is an email we received from a Social Worker at Elmhurst Hospital. The second reference is a Ms. Brenda Schaeffer her phone number is

Thank you, Team Bio-Recovery	
BIO-RECOVERY CORP.	
Phone: 800-556-0621 Fax: 888-811-3912	
22	
	1863 Pond Road Suite 4 Ronkonkoma NY 11779

Hi Sal,

I wanted to send you a message to let you know how helpful Judy DeSantago was on a recent case of mine. I had two patient's (a mother and daughter) who were victim's of a brutal attack in their home. I was their social worker at Elmhurst Hospital Center and responsible for securing a safe dicharge. I knew that the patient's wanted to return home, but from family report, I also knew that the home was inhabitable. I fought with the landlord and property manager to obtain payment for the necessary crime scene clean-up. The landlord refused to help. The Office of Victim Services (OVS) eventually agreed to pay \$2,500 towards the crime scene clean-up.

From the first day I spoke with Ms. DeSantiago, I knew that my job was going to get easier. Ms. DeSantiago was as outraged as I was about the landord's behavior and even reached out to them to assist me. Ms. DeSantiago was extremely knowledgable about the clean-up process and even knew beforehand that the OVS would only provide 12,500. There was never a discussion with Ms. DeSantiago bout payment: the stated immediately that Bio Recovery would help this family (for only 25,500). Later on in the process, OVS became more demanding and asked for more and more documentation. Ms. DeSantiago actives in the method work work of the own complicated the request. Kn. DeSantiago always assisted in en in this process.

Ms. DeSantiago was both professional and empathic all at once. She is excellent at her job and went over and beyond her job description to help this family. I wanted to let you know how grateful I am to have worked with Ms. DeSantiago. She made what could have been a crazy process, almost easy! Please let Ms. DeSantiago know how grateful the staff, patients, and I am for her assistance. Thank you very much!

Sincerely,

Lauren Clifford

P.S. The patient's family had the nicest things to say about the cleaning crew as well! The fam ly member told me that they refused to accept a tip and even stated that they were there to help the patients. Everyone on your staff has been extremely empathic and helpful. Thank you for the great service!

Lauren Clifford, LMSW Department of Social Work Elmhurst Hospital Center 79-01 Broadway Elmhurst, NY 11373 (718) 334-2747

Thank you for preparing and submitting the cost estimate. Can you please provide contact information for two clients that can serve as references for your work performing blood and other body fluid spill cleanup? Names of contacts in other NYC government agencies (OCME_OEM_PD_etc...) are acceptable. Please submit as soon as possible.

Thanks

Andrew

From: James Michel [mailto:james@biorecovery.com] Sent: Friday, October 17, 2014 6:29 PM To: Andrew Faciano: Frika Yan Subject: RE: Requested estimate

Hello,

Attached you will find the requested pricing please contact us if you have any questions.

3 room apartment (bedroom kitchen and bathroom)

- Total square footage = 800
- Moderate Contamination (no seepage)
- 150lbs of waste
- Disposal = Category A

Can you provide total costs for the following three areas

1. Assessment Cost: \$800.00

2. Cleanup/Decontamination/Setup Costs including Equipment/Supplies Cost using Level C PPE = \$7 990.00 /using Level A PPE = \$12 190.00

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Communications Expert \$90.00 per hour (only if required)

Level C PPE = \$100.00 per suit

Level A PPE = \$800.00 per suit

All equipment and cleaning agents = \$990.00 per day

3. Disposal Cost: \$1 500.00 (\$10.00 per pound) only additional cost would be the poly barrels which are \$125.00 each



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From: Andrew Faciano Sent: Tuesday, October 21, 2014 9:22 AM To: James Michel; info@biorecovery.com Cc: Erika Yan Subject: RE: Requested estimate Importance: High

Thank you for preparing and submitting the cost estimate. Can you please provide contact information for two clients that can serve as references for your work performing blood and other body fluid spill cleanup? Names of contacts in other NYC government agencies (OCME, OEM, PD, etc...) are acceptable. Please submit as soon as possible.

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Thank you

James Michel SENIOR ESTIMATOR BIO-RECOVERY CORP.	?	2
Phone: 800-556-0621 Fax: 888-811-3912		
???	1	863 Pond Road
		Suite 4
	Ronk	onkoma, NY 11779
	http://v	www.biorecovery.com

From: Andrew Faciano Sent: Wednesday, October 22, 2014 3:55 PM To: Nancy Clark Cc: Christopher D'Andrea Subject: RE: Conversation

Thus far Bio Recovery and TERS have positively affirmed that they have >10 staff on board with 40 hr HAZWOPER, and have either PPE training or a respiratory plan.

M
•

Just spoke to Sal at Bio Recovery, who provided the following reference:

Mercy Haven http://s396181523.initial-website.com/about-us/



From: Bio Recovery [mailto:info@biorecovery.com] Sent: Wednesday, October 22, 2014 3:15 PM To: Andrew Faciano Subject: Re: Requested estimate

All of our technicians, supervisors and safety officers have 40 hour HAZWOPER training. We have 35 technicians in New York Alone with such training. If need be, we can also pull additional employees from our other locations around the country.

We have extensive PPE knowledge. Doctor Joseph Monaco, a leading trainer in the industry, does a routine training at our office, as well as our own safety officers. We provide continuous training for all of our men and women on a monthly basis.

On Wed, Oct 22, 2014 at 2:21 PM, Andrew Faciano afaciano@health.nyc.gov> wrote:

Good Afternoon,

In addition to providing updated reference information, can you respond to the following questions before COB today? Give me a call if you need clarification on any of them.

- 1. How many staff at your company have 40 hour HAZWOPER training?
- 2. Do you have a respiratory protection plan or PPE plan?
- 3. How many staff at your company received respiratory/PPE training?

Thanks,

Andrew Faciano | Deputy Director

Housing Interventions & Special Projects Unit

Healthy Homes Program

Bureau of Environmental Disease and Injury Prevention

New York City Dept. of Health and Mental Hygiene

125 Worth St | Room 620, CN 58 | New York, NY 10013

Phone (646)632-6086 | Fax (646) 632-6409 | afaciano@health.nyc.gov

From: Andrew Faciano Sent: Tuesday, October 21, 2014 4:10 PM To: 'Judy D'; Erika Yan; James Michel Subject: RE: RE: Requested estimate

Thanks Judy. We aren't able to use the email as a reference. Do you have any organizations (public or private) that you contract with that we could contact? Also – Ms. Schaeffer: can you provide some context re: your relationship?

Best,

Andrew

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Team Bio-Recovery

 BIO-RECOVERY CORP.

 Phone:
 800-556-0621

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Suite 4 Ronkonkoma, NY 11779

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- Disposal = Category A

Can you provide total costs for the following three areas:

1. Assessment Cost: + \$800.00

2. Cleanup/Decontamination/Setup Costs including Equipment/Supplies Cost using Level C PPE = \$7,990.00 /using Level A PPE = \$12,190.00

Above prices are based on a 8 hour day of work below is the breakdown of pricing.

OSHA certified Safety Officer = \$195.00 per hour

OSHA Certified Foreman = \$215.00 per hour

OSHA Certified Technician = \$195.00 per hour

Communications Expert = \$90.00 per hour (only if required)

Level C PPE = \$100.00 per suit

Level A PPE = \$800.00 per suit

All equipment and cleaning agents = \$990.00 per day

3. Disposal Cost: \$1,500.00 (\$10.00 per pound) only additional cost would be the poly barrels which are \$125.00 each

Thank you

--

James Michel

SENIOR ESTIMATOR BIO-RECOVERY CORP.

 Phone:
 800-556-0621

 Fax:
 888-811-3912

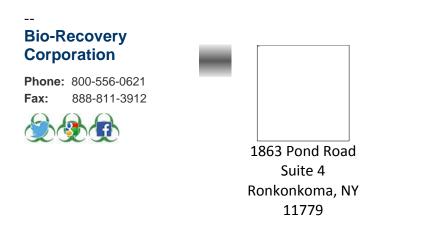




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BID TABULATION

Service:

Bio-Hazard Cleanup & Decontamination

Scenario:	
# of Rooms	3
Total Square Footage	800
Waste (lbs.)	150
Disposal Level	Category A
Equipment (PPE)	Level C
Contamination Level	Moderate

	Bio	-Recovery
		orporation
Assessment Fee	\$	295.00
Cleanup/Decontamination/Setup Costs		
incl. Equipment & Supplies Cost	\$	7,191.00
Disposal Cost	\$	1,500.00
Total	\$	8,986.00

Bio Recovery

Reference check with Donna Mercy Haven contracts with Bio Recovery in the event there is a death () in one of their supportive housing units.

10/22/14 4:00 p.m. Andrew Faciano, DOHMH

1 – What kind of job did they do for you? Going into homes for urine/feces cleanup as well as individual deaths – both immediate and several days/weeks after expiration

2 – How was their customer service? Very quick response – either same day or next day

2a. Did they meet timeframe - Yes

2b. Cost expectations? Bio Recovery has been very reasonable to them because of their not-for-profit status. Costs are negotiable and they have not have issues with overbilling.

3 – Were there any issues re the work they performed? No – Bio Reference works closely with them to make decisions on what should be removed versus what should be treated. Mercy Haven performs a visual after and has not encountered issues. Bio Reference also is good with not leaving any materials behind.

4 – Were you satisfied with their work? Yes. Wld you use them again? Yes





PURCHASING UNIT VENDOR PERFORMANCE EVALUATION FOR PROCURMENTS VALUED AT \$5K - \$100K

Use this form to evaluate all Procurements of goods/service/equipment and construction services. Please return this form to the Purchasing Unit at 421 East 26th Street, 10th Fl., New York, NY 10016.

A. Purchase Order Information

1. Current Purchase Order Number: POC 816 20142014341

2. Requisition Number: 14R0707

3. Performance Period: 02/06/14 - 06/30/14

4. Purchase Order Value: \$2,506.60

5. Purchase Order Issue Date: 02/17/2014

B. General Information

1. Vendor Name: BIO RECOVERY CORPORA	TION			
2. Address: 51-49 47 TH ST, WOODSIDE, NY, 11	1377			
3. EIN/SSN: PAY	YEE #: V00	00068331		
4. Program: FACILITIES - ENGINEERING / M	MAINTEN	ANCE	en la segui	
5. Purchase Order is for:				
a. Preventive Maintenance	🗌 Yes	No No		
b. Service / repair / time & material	X Yes	🗌 No		
c. Routine Maintenance	🗌 Yes	🛛 No		
d. Blanket, standard and/or one time Purchase	Yes	🛛 No		
Order for Goods e. Consultants Services	Yes	🛛 No		
f. Construction Services	Yes	No No		
6. Purchase Order description: PICK UP, REMO WOOD/METAL COFFINS	VAL AND	DISPOSAL OF B	IO-HAZARDOUS	
7. Original Purchase Order amount (from Advice of		\$2,506.60		
8. Final Purchase Order amount, if different:	\$7,109.6			
If different explain: Coffins are priced per pound and coffins amount cannot be predetermined.	0	⊠ Increase	Decrease	

Key to responses: E=Excellent, VG=Very Good, S=Satisfactory, NI=Needs Improvement, U=Unsatisfactory, NA=Not Applicable

OCME Vendor Performance Evaluation Form: Goods / Services, Construction and Consultants

C. Contract Schedule and timeliness of Performance

5. Provision of level, volume and frequency of

services required by Purchase Order

C. Contract Schedule and timeliness of Ferro	1 111411-0	Check c	ne Respoi	ase			
	Ε	VG	s	NI	U	NA	
1. Timeliness of deliverables							
2. Timeliness of services and reports			\boxtimes				
3. OVERALL TIMELINESS OF PERFORMANCE			\boxtimes				
4. Program Comments:							
			_				
D. Quality of Vendor Services			Check	one Respo	nse		
D. Quality of Vendor Services	E	VG	Check S	one Respo NI	nse U	NA	
	E	VG		-		NA	
1. Conformance of deliverables to Purchase Order	E	VG		-			
	E			-			

6. Technical and professional quality of services			\boxtimes				
7. Were all Purchase Order required tasks	_		_				
Completed?		ES	N 🛛				
If "No," explain: The vendor did not supply a r	receipt	at time o	of pick-	up and	did not	forward a disposal	
	_		-				
report within / days of the pick-up.							
report within 7 days of the pick-up.			Check	one Respor	ışe		
report within 7 days of the pick-up.	Е	VG	Check S	one Respor NI	use U	NA	
OVERALL QUALITY OF SERVICE	E	VG	_			NA	

 \boxtimes

E. Quality of Invoicing

	Check one Response							
	E	VG	S	NI	U	NA		
 Accuracy and timeliness of receiving invoice(s) 							?	
 Maintenance of time sheets, logs, and/or work Record(s) 							?	
3. Are there any unresolved invoice issues		35		0				
If "YES," explain:								

Key to responses: E=Excellent, VG=Very Good, S=Satisfactory, NI=Needs Improvement, U=Unsatisfactory, NA=Not Applicable

OCME Vendor Performance Evaluation Form: Goods / Services, Construction and Consultants

						<u> </u>	?
OVERALL QUALITY OF INVOICE(S)							
Program Comments:							
F. Overall Performance							
r. Over all I er for mance				ne Respons			
	<u>E</u>	VG	S	<u>NI</u>	U	NA	
VENDOR'S OVERALL PERFORMANCE			\boxtimes				
Program Comments: The vendor fulfilled the con	tract and	remove	ed the b	io-hazar	dous ca	skets fre	om the
mortuary, but the cost is astronomical. OCME is	paying r	oughly	\$1000	for the re	moval a	and desi	truction of
one casket. FY14 OCME paid over \$7000 for the	remova	of seve	m caske	ets. A rei	negotiati	ion of u	his price is
needed. If possible, a "per coffin" price may be m	ore cost	enecuv	<i>'e.</i>				
G. Program Signature Certification							
Signature Certification	•	•					n and in based
The foregoing evaluation represents my best judg			g the pe	riorman	ce or the	e vendo	r and is dased
on documentation on file in the Procurement Dep			Δ.				
ASYA MAGNUS M Program Representative Name (PRINT)	10rt	vary	Adr	, Mn	ر <i>ه</i> ا	a) 44	17-2046
Program Representative Name (PRINT)		Title (P	RINT)	<u> </u>	Pł	none Nu	umber
andrews			10	123/	14		
Signature	Date						
PURCHASING UNIT USE ONLY							
Agency Certification of Vendor Response (If required)							
1. Completed evaluation sent to the vendor.	ΠY	25	Пи	า			
1. Completed evaluation sent to the vendor.				•			
If "Yes", Date							

Agency Certification of Vendor Response (If required)				
1. Completed evaluation sent to the vendor. If "Yes": Date:	TYES	□ NO		
2. Vendor's written response received. If "No," check "NA" for question three (3) If "Yes" Date:	☐ YES	□ NO		
3. Agency's response to vendor's corrective action plan attached	YES			

Purchasing Approvals

Key to responses: E=Excellent, VG=Very Good, S=Satisfactory, NI=Needs Improvement, U=Unsatisfactory, NA=Not Applicable

•

Procurement Analyst Commets:	
Procurement Analyst Signature	Date
Purchase Director Signature	Date

Interim Scope of Services for Cleaning Ebola Virus Disease (EVD) Contamination in Non-healthcare Settings

I. Introduction

The work described in this scope of services applies to cleanup of homes, public spaces and other non-healthcare settings contaminated with body fluids including blood, feces, vomit, and other potentially infectious material (OPIM) from a person with active symptoms of confirmed Ebola virus disease (EVD).

II. Scope of Services for Contractor

1. Initial Assessment

A thorough visual assessment of all reported and potentially contaminated areas is required to develop a scope of work that effectively addresses all sources of exposure to Ebola virus. At a minimum, the contractor shall:

- Guided by information provided by the DOHMH, perform a visual assessment of all areas likely to be contaminated with blood or OPIM, such as bathrooms and sleeping areas.
- Document (photos, video, and written narrative) areas with body fluid contamination and estimate the size/extent of the contamination, and types of materials that are contaminated.
- Determine remedial actions either disposal, or cleaning and disinfecting. Porous items with visible or reported contamination should be discarded while nonporous/hard surfaces and items should be cleaned and disinfected.
 - a) If one or more personal items that are especially difficult to assess or treat are identified, the contractor shall contact DOHMH for guidance
- 4. Develop and submit a work plan that is informed by the actions described above. This site-specific work plan shall contain detailed information on the following:
 - a) Worker protection strategy

- i. Staging area plan
- ii. Personal protective equipment plan
- iii. Decontamination plan¹
- b) Cleanup, disinfecting, and removal strategy
- c) Waste removal and transport strategy
 - The waste removal strategy shall specify a dedicated waste corridor when use of common areas is required to remove waste from the area being treated.

Minimum work plan requirements for these three elements can be found below. Work plans must be approved by DOHMH prior to the commencement of cleanup, disinfecting, and removal activities.

2. Cleanup, Disinfecting and Removal

Prior to the commencement of cleanup and disinfecting activities, the contractor shall, at a minimum:

- 1. Restrict access to the work area using caution tape or warning signs until cleanup is complete.
- Set up all work areas, including staging areas to ensure adequate space for the donning and doffing of Personal Protective Equipment (PPE) and to ensure there is no cross contamination between "clean" areas and "dirty" areas.
- 3. Ensure that all necessary cleanup and disinfecting supplies are on site and that all employees are using the proper level of PPE. See Worker Protection section for guidance on appropriate PPE. All work must be conducted in compliance with the Occupational Safety and Health Administration (OSHA) Bloodborne Pathogens standard (1910.1030), OSHA guidelines² on the cleaning and decontamination of Ebola on surfaces, and other applicable OSHA standards.

¹ See <u>https://www.osha.gov/SLTC/hazardouswaste/training/decon.html</u> for guidance.

² https://www.osha.gov/Publications/OSHA_FS-3756.pdf

4. Ensure that all required waste handling and transport supplies are present and easily accessible in or near the work area.

The contractor shall perform work in a manner consistent with OSHA guidance³ in the following order:

- Sharp objects, such as broken glass, which may be contaminated with blood or OPIM, shall be placed in an appropriate puncture-resistant container.
- 2. For large spills with visible blood or body fluid contamination:
 - a. Cover the spill using disposable absorbent materials.
 - Pour disinfectant over the covered area and allow it to soak into spills for at least 30 minutes as per OSHA guidance.⁴
 - c. Place absorbent materials in leak-proof waste containers. Use tools, such as tongs from a spill kit, as much as possible rather than doing cleanup work directly with gloved hands.
- 3. Remove all contaminated items that cannot be cleaned and disinfected on site. At a minimum, the following items shall always be disinfected then packaged and discarded if contaminated:
 - Bedding and sheets, clothing, rugs and other textiles that have come in contact with contaminated blood or body fluids
 - Mattresses, upholstered furniture, carpets and other porous belongings visibly contaminated with blood or body fluids
 - Other contaminated items identified during assessment
- 4. After completion of steps 1-3 above, the contractor will proceed with the onsite cleaning and disinfecting of all remaining contaminated items/surfaces deemed cleanable. In addition, all "high touch" items/surfaces likely to be accessed by EVD case should be cleaned and disinfected.
 - a. Clean contaminated surfaces before they are disinfected. DO NOT employ cleaning methods that could generate aerosols such as steam cleaning or power washing.

³ https://www.osha.gov/Publications/OSHA_FS-3756.pdf

⁴ https://www.osha.gov/Publications/OSHA_FS-3756.pdf

b. Disinfect hard surfaces with a disinfectant registered by the U.S. Environmental Protection Agency (EPA) and New York State Department of Environmental Conservation (NYS DEC) which is effective against non-enveloped viruses such as norovirus, adenovirus or rotavirus. For example, a freshly mixed 1:10 bleach solution is an approved disinfectant. Bleach solution, if used, must be discarded at the end of each work shift and a fresh solution must be made at the beginning of each work shift. See NYS DEC registered disinfectant list<u>http://www.health.ny.gov/professionals/protocols and guidelines/antibiotic resistance/docs/hospital disinfectants for general disinfection of environm ental surfaces.pdf and EPA's website for a list of registered antimicrobial products effective against norovirus: http://www.epa.gov/oppad001/list_g_norovirus.pdf. Follow product label
</u>

instructions to ensure effective disinfectant concentration and contact time. Do not mix chemicals and ensure all containers are appropriately labelled.

Liquids not visibly contaminated with blood or body fluids, including used cleaning solution, may be disposed of by pouring them down the drain to the sanitary sewer. Cleaning supplies should be either packaged and discarded as untreated EVD RMW or cleaned and disinfected.

3. Worker Protection

The contractor shall provide DOHMH with an Exposure Control Plan (ECP) in accordance with the OSHA Bloodborne Pathogens standard. The Plan shall outline the protective measures the contractor will take to eliminate or minimize employee exposure to blood and other potentially infectious material (OPIM).

Minimum ECP requirements can be found below. The ECP must be submitted and approved by DOHMH prior to the commencement of cleanup, disinfecting, and removal activities.

Contractors are responsible for implementing the site work plan and the ECP and ensuring that all employees with potential occupational exposure to bloodborne pathogens comply with the

ECP and site work plan, perform all tasks in a manner that minimizes or eliminates potential exposure, and be properly trained.

Personal Protective Equipment (PPE)

Contractors are required to set up a staging area for workers to don and doff PPE and ensure that PPE is in place BEFORE entering the contaminated area. See the Centers for Disease Control and Prevention's Sequence for Putting On and Removing Personal Protective Equipment: http://www.cdc.gov/vhf/ebola/pdf/ppe-poster.pdf

2. Wear appropriate personal protective equipment (PPE) as described in Centers for Disease Control and Prevention (CDC) Guidance on Personal Protective Equipment To Be Used by Healthcare Workers (http://www.cdc.gov/vhf/ebola/hcp/procedures-for-ppe.html). Additional PPE should be used as needed.Respiratory protection may be required where using disinfectants/cleaning chemicals that may produce irritant fumes or in instances where workers may be exposed to bioaerosols (as a result of spraying liquids or air during cleaning). In these cases, medically qualified workers must use, at a minimum, a NIOSH-approved, fit-tested N95 respirator. DO NOT employ cleaning methods that could generate aerosols such as steam cleaning or power washing.

Contractor will supervise all practices when employees don or doff PPE to assure that recontamination does not occur.

Worker Exposure and Injury

In the event there is worker exposure and/or injury, the contractor shall implement procedures for post exposure evaluation and follow up that were included in the Exposure Control Plan and/or the Health and Safety Plan. For exposure incidents, the contractor shall document, at a minimum, the route(s) of exposure, and the circumstances under which the exposure incident occurred.

In addition to reporting required by OSHA, all incidents involving potential worker exposure, breach of PPE, worker injury, potential or actual releases of blood or OPIM, or cleaning and disinfecting chemicals shall be reported to DOHMH within one hour of occurrence.

4. Waste Handling and Transport

All waste generated during the removal, cleaning and disinfection of EVD contaminated surfaces shall be classified as untreated EVD regulated medical waste (RMW). Untreated EVD RMW is categorized as Category A infectious substance and as such is regulated by DOT's Hazardous Materials Regulations (HMR, 49 C.F.R., Parts 171-180) and NYS DEC regulations (6 NYCRR Subparts 360-10 and 17, and 6 NYCRR Part 364). Any item transported in commerce that is contaminated or suspected of being contaminated with a Category A infectious substance must be packaged and transported in accordance with the HMR or applicable DOT waiver. If the cleaning contractor does not provide waste transporting services, contractor must subcontract with a permitted waste removal and transport contractor. In this scenario, cleaning contractors are responsible for packaging of untreated EVD RMW in accordance with HMR, while waste transport contractors are responsible for transporting untreated EVD RMW in accordance with HMR and DEC regulations.

Transport and Disposal Requirements

Off-site transport, transfer, processing, and treatment of untreated EVD RMW must be in compliance with the NYSDEC's 6 NYCRR Subparts 360-10 and 17, and 6 NYCRR Part 364 regulations. Permitted transporters, transfer, treatment and disposal facilities may have additional requirements. Untreated EVD waste must be handled safely at all times with use of appropriate PPE and single-use leak-proof containers (unless otherwise approved by the NYSDEC).

Untreated EVD RMW shall be transported to and processed by a Permitted Facility for commercial treatment of RMW. A list of currently permitted facilities can be found here: http://www.dec.ny.gov/chemical/99119.html

After treatment of EVD RMW, transport and disposal of treated EVD RMW (TRMW) must be performed by facilities specifically authorized under 6 NYCRR Part 360. Pursuant to 6 NYCRR 360 regulations, only landfills, incinerators, and storage or transfer facilities which have been approved in writing by the NYSDEC for receipt of TRMW, are authorized to accept it for processing or disposal. In accordance with the Public Health Law and the Environmental Conservation Law (ECL), no RMW, regardless of where generated, may be disposed of by burial at a landfill disposal facility unless treated, and all sharps must be rendered unrecognizable. The ECL further states that TRMW must be accompanied by a certificate, in a form prescribed by the Commissioner of the NYSDOH, which evidences such treatment. Also, 6 NYCRR Part 360 requires that any facility processing or disposing of TRWM must collect and retain the certificate of treatment form for each load of TRMW received.

The Contractor shall provide DOHMH and NYS DEC with required NYS DEC Hazardous Waste Manifest forms.

The Contractor shall immediately contact DOHMH in the event the transport contractor is unable to pick up waste after the cleanup.

5. Clearance/Reoccupancy

A visual inspection of all areas identified during the assessment shall be performed at the conclusion of activities. The Contractor will inspect all areas to confirm all items have been treated in accordance with the work plan and to confirm all work items and supplies have been removed from the site.

Additionally, a visual inspection of the areas travelled while transporting waste from the work area to the means of waste transport is required. If accidental contamination is identified, contractor shall clean and decontaminate areas using methods described above.

The contractor shall document that all of the confirmations listed above occurred and will submit this documentation to DOHMH for final determination regarding the commencement of re-occupancy of the previously contaminated areas.

6. Documentation, Recordkeeping, and Reporting

The contractor shall provide the following to DOHMH for review and approval prior to the start of work:

- a) Exposure Control Plan
- b) Health and Safety Plan
- c) A Work Plan detailing the procedures, protocols, and materials to be used including the disinfectants being used and Material Safety Data Sheets for review prior to the start of

work. Site-specific deviations from the Exposure Control Plan should be included as well.

All assessments, plans, and reports shall be documented in formats and within timeframes identified by DOHMH and shall contain all data elements identified by DOHMH.

The Contractor must provide a daily report of activities conducted onsite (email or other written report format) and meet or telcon DOHMH or representatives as needed.

Documentation errors or omissions identified by DOHMH shall be corrected and resubmitted by the contractor within 1 day of notification.

All documents shall be maintained by the contractor for a period of 12 months.

The contractor shall comply with all documentation, recordkeeping, and reporting requirements listed within the OSHA Bloodborne Pathogens standard and all other applicable regulations and standards.

From: Bio Recovery [mailto:info@biorecovery.com] Sent: Thursday, October 23, 2014 9:57 PM To: Andrew Faciano Subject: Re: Meeting at 8:00 a.m. 10/24/14

Sounds good see you tomorrow

On Oct 23, 2014 9:55 PM, "Andrew Faciano" <<u>afaciano@health.nyc.gov</u>> wrote: Hi Sal,

Thanks for agreeing to meet to coordinate the approach to the cleanup. The meeting will take place at 8:00 a.m. tomorrow (10/24/14) at 125 Worth Street, 6th Floor, Room 630. Call my cell **and the set of t**

Please also bring MSDS's for the three cleaning products you are proposing to use.

See you tomorrow.

Andrew Faciano | Deputy Director Housing Interventions & Special Projects Unit Healthy Homes Program Bureau of Environmental Disease and Injury Prevention New York City Dept. of Health and Mental Hygiene 125 Worth St | Room 620, CN 58 | New York, NY 10013 Phone (646)632-6086 | Fax (646) 632-6409 | afaciano@health.nyc.gov

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From:Erika YanTo:Bio RecoveryCc:Andrew Faciano; Judi SoehrenSubject:RE: FW: Requested estimateDate:Thursday, October 23, 2014 1:23:44 PMAttachments:image002.png

Thanks Sal!. We will be in touch!

Erika

Erika Yan, MPA

Deputy Agency Chief Contracting Officer NYC Department of Health and Mental Hygiene 42-09 28th Street, 17th Floor, CN 30A Long Island City, NY 11101 P: 347-396-6660 C: 646-634-3089 F: 347-396-6759



From: Bio Recovery [mailto:info@biorecovery.com] Sent: Thursday, October 23, 2014 1:10 PM To: Erika Yan Subject: Re: FW: Requested estimate

As per our conversation this is 100% agreed upon thank you very much and we look forward to working with you in the future

On Oct 23, 2014 1:08 PM, "Erika Yan" <<u>eyan@health.nyc.gov</u>> wrote: Hi Sal,

As per our phone conversation, please confirm the reduced rates:

1. Assessment Cost: \$295

2. Cleanup/Decontamination/Setup Costs including Equipment/Supplies Cost: 10% reduction across the board, which mean the cost for the above using Level C PPE = \$7,191 (using Level A PPE = \$10,971)

The cost for disposal will remain the same.

Thanks, Erika

From: James Michel [mailto:james@biorecovery.com] Sent: Friday, October 17, 2014 6:29 PM To: Andrew Faciano; Erika Yan Subject: RE: Requested estimate

Hello,

Attached you will find the requested pricing please contact us if you have any questions.

- 3 room apartment (bedroom, kitchen and bathroom)
- Total square footage = 800
- Moderate Contamination (no seepage)
- 150lbs of waste
- Disposal = Category A

Can you provide total costs for the following three areas:

1. Assessment Cost: + \$800.00

2. Cleanup/Decontamination/Setup Costs including Equipment/Supplies Cost using Level C PPE = \$7,990.00 /using Level A PPE = \$12,190.00

Above prices are based on a 8 hour day of work below is the breakdown of pricing.

OSHA certified Safety Officer = \$195.00 per hour

OSHA Certified Foreman = \$215.00 per hour

OSHA Certified Technician = \$195.00 per hour

Communications Expert = \$90.00 per hour (only if required)

Level C PPE = \$100.00 per suit

Level A PPE = \$800.00 per suit

All equipment and cleaning agents = \$990.00 per day

3. Disposal Cost: \$1,500.00 (\$10.00 per pound) only additional cost would be the poly barrels which are \$125.00 each

Thank you

James Michel SENIOR ESTIMATOR BIO-RECOVERY CORP.

Phone:800-556-0621Fax:888-811-3912

1863 Pond Road

Suite 4 Ronkonkoma, NY 11779 <u>http://www.biorecovery.com</u> From: Flores, Lisa [mailto:lflores@comptroller.nyc.gov]
Sent: Friday, October 24, 2014 7:32 AM
To: Judi Soehren
Cc: Stover, Christian; Malusa, Stephen; SCushman@law.nyc.gov; MOwh@cityhall.nyc.gov; LCamilo@cityhall.nyc.gov; hfriedma@law.nyc.gov
Subject: Re: Ebola emergency FW: Emergency Purchase

I approve on behalf of the Comptroller.

From: Judi Soehren [mailto:jsoehren@health.nyc.gov] Sent: Thursday, October 23, 2014 05:18 PM To: Flores, Lisa Cc: Stover, Christian; Malusa, Stephen; Cushman, Steven Stein (Law) <<u>SCushman@law.nyc.gov</u>>; Owh, Michael <<u>MOwh@cityhall.nyc.gov</u>>; Camilo, Lisette <<u>LCamilo@cityhall.nyc.gov</u>>; Friedman, Howard <<u>hfriedma@law.nyc.gov</u>> Subject: Re: Ebola emergency FW: Emergency Purchase

No, there were no assumptions about service level made.

Judi Rich Soehren Agency Chief Contracting Officer NYC Dept. of Health & Mental Hygiene

> From: Judi Soehren [mailto:jsoehren@health.nyc.gov] Sent: Thursday, October 23, 2014 5:00 PM To: Flores, Lisa Cc: Stover, Christian; Malusa, Stephen; Cushman, Steven Stein (Law); Owh, Michael; 'Camilo, Lisette'; Friedman, Howard Subject: RE: Ebola emergency FW: Emergency Purchase

Lisa - We will only be paying for services rendered. We do not have to pay them to stand-by.



From: Judi Soehren [mailto:jsoehren@health.nyc.gov] Sent: Thursday, October 23, 2014 1:01 PM To: Cushman, Steven Stein (Law); <u>LFlores@cityhall.nyc.gov</u>; Stover, Christian Cc: Friedman, Howard (<u>hfriedma@law.nyc.gov</u>); Camilo, Lisette; <u>mowh@cityhall.nyc.gov</u>; Erika Yan Subject: Emergency Purchase Importance: High

In accordance with Section 3-06 of the Procurement policy Board Rules, DOHMH is requesting your approval of an emergency purchase of assessment, cleanup and disposal of bio-hazardous waste from homes, public spaces, the public health lab and other settings contaminated with body fluids including blood, feces, vomit, and other potentially infectious material from a person with active symptoms of known Ebola virus disease (EVD). EVD is a severe, often fatal disease that affects humans and some animals. Over 50% of patients with Ebola have died during past outbreaks. On September 30, 2014, the first travel-related U.S. case of Ebola was diagnosed in Dallas, Texas. Since then, there have been confirmed cases of patients contracting Ebola in the US.

DOHMH has been actively planning for the likely possibility that there will be Ebola patients in NYC in the near future. We contacted 16 firms to learn about the services they provide and to determine if they could potentially provide assessment, cleanup and bio-hazardous waste removal services for DOHMH. Of these sixteen firms contacted, only two firms with the required expertise submitted bids. While the cost for cleanup will vary depending on the situation, in order to obtain comparable rates, we requested bids for assessment, clean up and bio-hazardous waste removal for a three room apartment.

- Total Environmental Restoration Solutions, Inc., has a current VENDEX questionnaire on file, with no cautions, liens or warrants found. They have three PEs on file since 2010; all have an Overall Rating of Excellent or Good. In the scenario provided, their assessment cost would be \$485; their cost for clean-up, decontamination equipment and supplies would be \$6,880; and their disposal cost would be \$240.
- Bio Recovery Corporation is known to VENDEX, but does not have any Performance Evaluations on file. In the scenario provided, their assessment cost would be \$295; their cost for clean-up, decontamination equipment and supplies would be \$7,191; their disposal cost would be \$1,500.

DOHMH believes it is necessary to contract with multiple firms; therefore, we are requesting approval to proceed with an emergency purchase with both of these firms. The maximum reimbursable amount for each of the contracts would be \$500,000.

Please let me know if you have any questions.

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Erika Yan

From:	Friedman, Howard (Law) <hfriedma@law.nyc.gov></hfriedma@law.nyc.gov>
Sent:	Thursday, October 23, 2014 1:19 PM
То:	Judi Soehren; Cushman, Steven Stein (Law); LFlores@cityhall.nyc.gov; Stover, Christian
	(cstover@comptroller.nyc.gov)
Cc:	Camilo, Lisette; mowh@cityhall.nyc.gov; Erika Yan
Subject:	RE: Emergency Purchase

I approve for the Law Dept.

Howard Friedman Deputy Chief, Contracts and Real Estate New York City Law Department 100 Church Street, Room 5-200 New York, New York 10007 Tel: (212) 356-2052 hfriedma@law.nyc.gov

From: Judi Soehren [mailto:jsoehren@health.nyc.gov] Sent: Thursday, October 23, 2014 1:01 PM To: Cushman, Steven Stein (Law); LFlores@cityhall.nyc.gov; Stover, Christian (cstover@comptroller.nyc.gov) Cc: Friedman, Howard (Law); Camilo, Lisette; mowh@cityhall.nyc.gov; Erika Yan Subject: Emergency Purchase Importance: High

In accordance with Section 3-06 of the Procurement policy Board Rules, DOHMH is requesting your approval of an emergency purchase of assessment, cleanup and disposal of bio-hazardous waste from homes, public spaces, the public health lab and other settings contaminated with body fluids including blood, feces, vomit, and other potentially infectious material from a person with active symptoms of known Ebola virus disease (EVD). EVD is a severe, often fatal disease that affects humans and some animals. Over 50% of patients with Ebola have died during past outbreaks. On September 30, 2014, the first travel-related U.S. case of Ebola was diagnosed in Dallas, Texas. Since then, there have been confirmed cases of patients contracting Ebola in the US.

DOHMH has been actively planning for the likely possibility that there will be Ebola patients in NYC in the near future. We contacted 16 firms to learn about the services they provide and to determine if they could potentially provide assessment, cleanup and bio-hazardous waste removal services for DOHMH. Of these sixteen firms contacted, only two firms with the required expertise submitted bids. While the cost for cleanup will vary depending on the situation, in order to obtain comparable rates, we requested bids for assessment, clean up and bio-hazardous waste removal for a three room apartment.

- Total Environmental Restoration Solutions, Inc., has a current VENDEX questionnaire on file, with no
 cautions, liens or warrants found. They have three PEs on file since 2010; all have an Overall Rating of
 Excellent or Good. In the scenario provided, their assessment cost would be \$485; their cost for cleanup, decontamination equipment and supplies would be \$6,880; and their disposal cost would be \$240.
- Bio Recovery Corporation is known to VENDEX, but does not have any Performance Evaluations on file. In the scenario provided, their assessment cost would be \$295; their cost for clean-up, decontamination equipment and supplies would be \$7,191; their disposal cost would be \$1,500.

DOHMH believes it is necessary to contract with multiple firms; therefore, we are requesting approval to proceed with an emergency purchase with both of these firms. The maximum reimbursable amount for each of the contracts would be \$500,000.

Please let me know if you have any questions.

Sent from the New York City Department of Health & Mental Hygiene. This email and any files transmitted with it may contain confidential information and are intended solely for the use of the individual or entity to whom they are addressed. This footnote also confirms that this email message has been swept for the presence of computer viruses.

Apartment Decon 10/24/2014

- DOHMH team met with contractor at 9:00 to go over the scope of services and discuss the details of the remediation. DOHMH instructed the contractor to disinfect all high-touch hard surfaces with a dilute bleach solution. Additionally the contractor was instructed to dispose of bedding, towels and toiletries, dirty cloths, and uneaten food. They were instructed to wash/disinfect any dirty dishes.
- DOHMH team arrived on site at approximately 11am. DOHMH met with contractor and building superintendent to go up to the apartment.
- Tenants in the adjacent apartments were notified that a cleanup of the apartment in question was to commence once an assessment had been conducted.
- Contractor determined that two of their crew members would walk into the apartment to conduct an initial assessment to better understand the necessary scope of work. Crew went in "high-level" C PPE to assess the area and took photos and videos of the apartment to determine the scope. It was determined that there were no visible bodily fluids in the apartment. A sock in the hamper was discolored at the toe. Resident of the apartment was contacted and it was determined that the sock was discolored due to burn from a campfire.
- In order to avoid sealing off the corridor and permit access to two adjacent and occupied apartments, the containment unit was set up inside of the apartment to.
- Tenants in the adjacent apartments were informed that they would not have to leave as initially assumed. One tenant elected to relocate overnight for familial concerns. The other tenant elected to stay in the building while the work was being performed. Other tenants on the floor were informed of the work that would be conducted and reassured that they could stay in their apartments if they elected to.
- Contractor was informed by DOH staff that clean waste in the hall must be properly contained and disposed of and not left in the common areas. Contractor began to set up the necessary equipment in the corridor of the fifth floor
- FDNY provided three filled air tanks to contractor.
- Waste management issues arose as crew was setting up that continued to be worked on throughout the cleanout. Examples included used PPE equipment in hallway and opened drums.
- Around 3 pm, 2 of the contractor crew members began suiting up in level A and entered the apartment to establish simple decontaminator chamber inside the apartment, starting at the entry door. The area where the decon chamber was to be established was fully sprayed with disinfected solution prior to commencement of setup.
- Around 330/4pm, 2 of the contractor crew members began suiting up in level A PPE and entered the apartment to begin disinfecting, which took approximately 25 minutes. . Crew conducted a full spray down of walls and floors, in addition to hard surfaces. One of the crew members who entered the apartment had an equipment failure (the valve for the oxygen tank in the enclosed suit was not fully opened), and one of the crew members had to leave the apartment leaving a single responder inthe apartment. Contractor stated that a few items (small potted plants) had

been knocked over accidentally in the process. Potted plants were located on a radiator in one of the bedrooms.

- After a short break, contractor began a second round of disinfecting and cleaning, which took approximately 45 minutes. The contractor, reportedly, conducted a full spray down of all surfaces and materials in the apartment. The contractor was again reminded by DOHMH staff of agreed upon cleaning measures.
- Select members of the contracting crew were not informed of the Stericycle protocol waste handling requirements. Issue remedied prior to commencement of final disinfecting and waste removal, which began approximately 6:30.
- Crew of approximately 6 went into the area in "high-level" C PPE and worked from the back of the apartment to remove certain materials. Contractor communicated with DOH staff for inquiries for items that were not initially on the list came up for disposal. In addition to the items that were slated to be removed, the following items were disposed of: a pair of running shoes and a purse that came into contact with the bleach solution, several dishes as the contractor determined that there were too many left in the sink to be sanitized in a timely fashion, several throw pillows and throw blankets in living areas throughout the apartment, clothing left on the floor, an area rug in the room closest to the entry, and a hamper partially filled with clothes . Contractor asked for guidance on whether to remove luggage, several gooseneck tied garbage bags whose contents were undetermined, and a box with grooming items (nail clippers, tweezers, etc.) and complied with DOHMH feedback not to remove.
- Contractor finished work at approximately 8:30 pm and removed all work items from the apartment, including decon chamber, PPE, and cleaning supplies.
- 16 thirty gallon drums were packed as per Stericycle protocol. Contractor stated that the drums were wiped/sprayed with a microban solution prior to their entry into the common hall area.
- A room-by-room assessment was conduct by two DOHMH staff along with the Contractor. A mild to moderate bleach odor was present throughout the apartment. All rooms appeared to be thoroughly cleaned and left in good condition. No work-related items were found during the walk through. Contractor identified some areas that were damaged (discolored) due to contact with the bleach solution. Items: Metal trim around a wooden table and possibly the red fabric on the couch. Some items were damp to the touch as a result of the cleaning process. Both DOHMH staff were in agreement that the apartment did not require any additional cleaning and disinfecting.
- As a result of the moderate bleach odor and dampness of some items, DOHMH instructed contractor to place a dehumidifier and a fans in select rooms in the apartment.
- Contractor began removal of work items from 5th floor common area. 4-5 Contractor staff leave site to begin cleanup work at different site.
- After setup of dehumidifiers and air cleaners, contractor and DOHMH staff did final walkthrough to ensure no work items remained. Apartment was then locked, with DOHMH staff arranging to meet with Contract at 8:00 am to remove dehumidifier(s) and air cleaner(s). A walkthrough of all common areas accessed by the Contractor was performed to confirm no work items remained within building.

- All drums were transferred from the 5th floor common area to an area behind the staircase in the lobby.
- At 10:45, OEM truck arrived. Contractor proceeded to load and secure drums into OEM truck. All drums were loaded and secured by 12:05. Three of the four remaining Contractor staff leave site.
- At 12:10 Contractor commenced cleaning (mopping with dilute bleach solution) of all common areas (floors and stairs), all handrails.
- At approx. 12:30, OEM began transport of 16 drums. Last remaining Contractor staff loads cleaning equipment and leftover bucket solution into truck and leaves site around 12:45 a.m.
- DOHMH leaves premises at approximately 1 am.

From:	dkass@health.nyc.gov
To:	Mary Bassett
Cc:	<u>Garcia, Kathryn (kgarcia@dsny.nyc.gov); Diggins, Dennis (DSNY) (ddiggins@dsny.nyc.gov); Susan Blank;</u> <u>Kenneth Peskowitz; Jay Varma</u>
Subject:	Re: Can Confirm no Blood/Body Fluid Contamination in the Apartment
Date:	Friday, October 24, 2014 8:56:51 PM

They were instructed to discard only specific materials (e.g.blinens, laundry in hamper, food in fridge, household waste, etc.) Much of the waste will actually be their own PPE and the breakdown of the decon unit they created within the apartment to don and doff PPE and bag materials.



On Oct 24, 2014, at 1:22 PM, "Daniel Kass" <<u>dkass@health.nyc.gov</u>> wrote:

Our contractor just completed an assessment of the apartment and it has no contamination. Cleanup will begin, and the contractor + DOHMH is working on transport plan for the household waste, which will be treated as medical waste.





From: Andrew Faciano
Sent: Thursday, October 23, 2014 7:37 PM
To: Christopher D'Andrea; Nancy Clark
Cc: Andriana Azarias; Maytal Rand
Subject: Emergency contact Info for cleaning firms

Emergency Contact Info



Bio Recovery Emergency line: 800-556-0621 Sal Pain, President

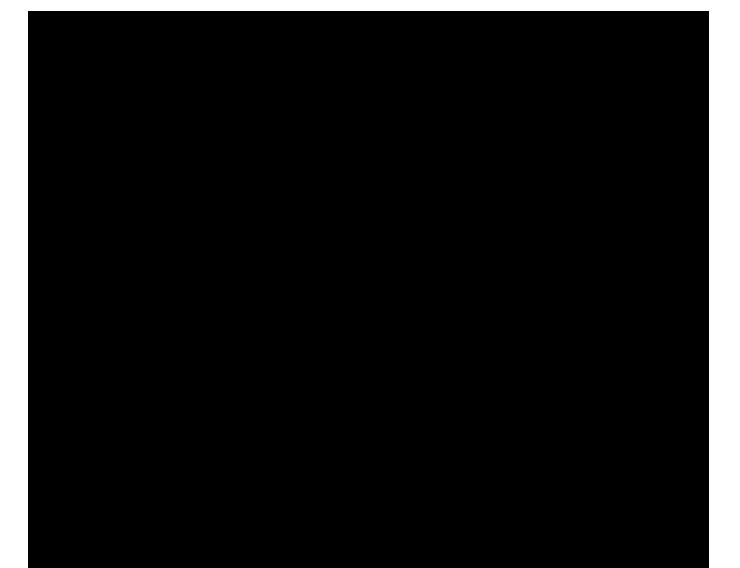
Andrew Faciano | Deputy Director Housing Interventions & Special Projects Unit Healthy Homes Program Bureau of Environmental Disease and Injury Prevention New York City Dept. of Health and Mental Hygiene 125 Worth St | Room 620, CN 58 | New York, NY 10013 Phone (646)632-6086 | Fax (646) 632-6409 | afaciano@health.nyc.gov



From: Bio Recovery [mailto:info@biorecovery.com]
Sent: Sunday, October 26, 2014 3:20 PM
To: Amita Toprani
Subject: Re: FW: Category a waste handling and packaging procedure

Also the crew members were wearing nitrile gloves high risk 2 pairs Everyone had slip resistant cemtec boots on all seams were taped and sealed twice over again

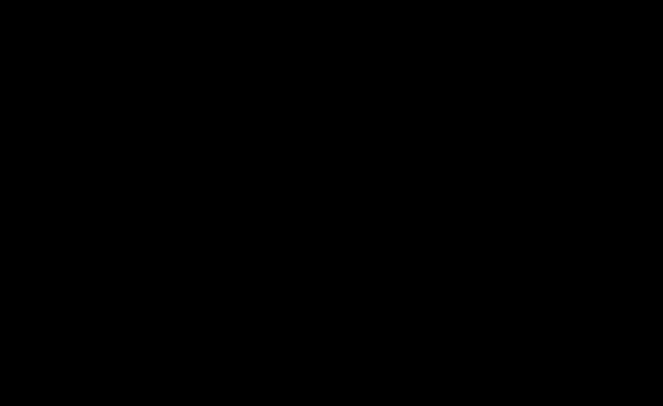
On Oct 26, 2014 2:33 PM, "Amita Toprani" <<u>atoprani@health.nyc.gov</u>> wrote: Sal, can you list the PPE your staff wore during the cleanup? Thx. Amita



From: Bio Recovery [mailto:info@biorecovery.com]
Sent: Sunday, October 26, 2014 3:17 PM
To: Amita Toprani
Subject: Re: FW: Category a waste handling and packaging procedure

PPE used was level A DuPont xl tan safespec 2.0 18mil tychem for the 2 men who went in first and second the scuba gear used was a Scotts pack with a one hour air bottle The rest of the crew used level C high DuPont safe spec 2.0 TF145 GY Tychem.F with a 3m power assist p100 with filter organic with activated charcoal filter

On Oct 26, 2014 2:33 PM, "Amita Toprani" <<u>atoprani@health.nyc.gov</u>> wrote: Sal, can you list the PPE your staff wore during the cleanup? Thx. Amita



From: Erika Yan Sent: Tuesday, October 28, 2014 2:25 PM To: Andrew Faciano Subject: FW: Bio Recovery

Hi Andrew,

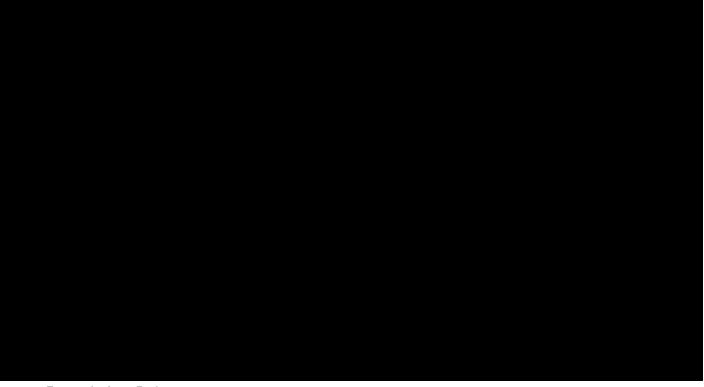
the assessment cost was reduced from \$800 to \$295 and and cleanup/equipment cost was reduced by 10% of the quoted rates.

VENDOR NAME:

BIO RECOVERY CORPORATION

Description of Services	Cost	Unit of Measure
Assessment:	\$ 295.00	Each
Cleanup/Decontamination/Setup including Equipment/Supplies (Level C PPE): <u>Title</u>	\$ 7,191.00	Each
OSHA Certified Safety Officer	\$ 175.50	Hour
OSHA Certified Foreman	\$ 193.50	Hour
OSHA Certified Technician	\$ 175.50	Hour
Communications Expert	\$ 81.00	Hour
<u>Equipment</u>		
Level C PPE	\$ 90.00	Suit
Level A PPE	\$ 720.00	Suit
All equipment and cleaning agents	\$ 891.00	Day
Disposal (for 150lbs of waste):	\$ 1,500.00	

Additional Waste	\$ 10.00	Pound
Poly Barrel	\$ 125.00	Each



From: Andrew Faciano
Sent: Monday, October 27, 2014 9:15 AM
To: Mark Misener; Christopher D'Andrea; Nancy Clark; Amita Toprani; Maytal Rand
Cc: Sayone Thihalolipavan
Subject: RE: Question about cleaning products used in guarantinee apartment

I was able to get in touch with the contractor. They applied Microban to PPE (prior to doffing), not for general disinfection of apartment. The contractor indicated that this was the only other product used.

From:	Nancy Clark
To:	Norrell, Neil (Norrell.Neil@epa.gov)
Cc:	Christopher D"Andrea; Mark Maiello; situnit
Subject:	FW: Requested Docs - PDF"s
Date:	Wednesday, October 29, 2014 3:07:45 PM
Attachments:	DRAFT LHD EH ebola guidance document.pdf Ebola Cleanup Contractor Scope of Services 10232014.pdf Ebola remediation guidelines for Contractors 10-22-14 Cleared Interim.pdf Stericycle Category%20A%20Waste%20Handling%20and%20Packaging%20Procedures.pdf BioRecoveryWastePlan_EVD_NYCDOHMH.PDF Waste Hauler Scope.pdf

Hi Neil – sorry for delay – it took us a bit to pull all these together. Let me know if you have questions.

- 1. NYC DOHMH Interim Guidance for Cleaning Non-Healthcare Settings
- 2. NYC DOHMH Scope of Services for Cleaning Ebola Virus
- 3. Stericycle Procedures for Cat A infectious waste
- 4. Bio Recovery Waste Management Plan
- 5. NYS DOHGuidance for Local Health Departments
- 6. DOHMH Scoping Doc for Waste (Email from Andrew)

Guidance for Local Health Departments on Ebola Virus Environmental Cleaning and Disinfection in Non-healthcare and Non-laboratory Settings¹ Draft 10/23/14

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Attachment 2 – Detailed Cleanup Protocol	

Background Information about Ebola Virus

<u>Transmission</u>: Based on current U.S. Centers for Disease Control and Prevention (CDC) and World Health Organization (WHO) guidance², and review of available scientific information, Ebola spreads through direct contact by touching the blood or other body fluids (such as feces, saliva, urine, vomit, and semen) of a person who is sick with Ebola virus disease (EVD). Infected blood or other body fluids can spread Ebola through contact with eyes, nose, or mouth or an open cut, wound, or abrasion. Transmission can also occur through exposure to objects (such as needles) that have been contaminated with infected blood or other body fluids. Published investigations of past outbreaks in Africa indicate that person-to-person transmission occurred through direct physical contact with symptomatic patients or deceased bodies during funeral rites or with body fluids of patients including heavy contamination with blood or other body fluids on objects such as linens.

Ebola is not spread through the air or by water, or in general, by food.³ There is no evidence that mosquitos or other insects can transmit Ebola virus. The role of minor or residual contamination on objects such as door handles or railings in transmission has not been established.

¹ This guidance document is based on information current at the time it was written. Information regarding Ebola environmental management is an emerging issue in the United States and this guidance is subject to revision based on release of federal guidance and scientific information following publication.

² CDC: <u>http://www.cdc.gov/vhf/ebola/hcp/environmental-infection-control-in-hospitals.html</u> WHO: <u>http://www.who.int/mediacentre/news/ebola/06-october-2014/en/</u>

³ However, people in the affected countries in Africa may be at risk when handling contaminated "bush meat." DRAFT DRAFT DRAFT

<u>Persistence in the environment</u>: Viruses cannot reproduce in the environment outside of their host; exposed to the environment, they are inactivated over time. Some types of viruses are more resistant to inactivation. Ebola virus is a type that is more susceptible to inactivation over time. However, there is limited information about the precise length of time it can survive on environmental surfaces or in environmental media, or about how environmental factors (e.g., temperature, relative humidity, type of surface material, organic load, and light) affect its persistence.⁴

Currently, one published study directly addresses the environmental persistence of Ebola virus in a field setting. The study was conducted in an active treatment clinic during an Ebola outbreak. The study found that the virus was not detectable by either culture or polymerase chain reaction (PCR)⁵ in wipe samples taken from surfaces within the clinic, with the exception of positive-control samples taken from a visibly bloody glove and skin surface. During the outbreak, the clinic followed a daily surface disinfection protocol by treating the floor each day and other visibly contaminated surfaces as needed.

<u>Cleaning and disinfection – general principles</u>: In general, routine cleaning practices and methods that remove soiling from materials and surfaces also help to remove disease-causing microorganisms from the environment. Based on the information above, the focus of cleaning and disinfection actions in the non-healthcare and non-laboratory settings should be to address locations, surfaces, and objects that have visible soiling or contamination with blood and other body fluids from someone with symptoms of EVD. Certain high-contact materials that might not be visibly soiled, such as linens from a bed used by such a person, are also covered by this cleanup guidance.

Decisions regarding the need for cleaning and disinfection actions should take into account the clinical state of the patient. For example, a person who is not symptomatic is not shedding virus and, therefore, no special cleaning or disinfection activities are needed. Likewise, if a person with EVD develops fever, but has no additional symptoms prior to seeking treatment in a healthcare facility, there is no indication that additional cleaning or disinfection actions are needed. However, additional targeted cleaning and disinfection would be appropriate for a primary contact who becomes ill with symptoms that result in visible contamination with blood or other body fluids.

⁴ In laboratory experiments, Ebola virus cultures dried onto glass slides and kept in the dark at room temperature and moderate relative humidity (i.e., relatively benign environmental conditions) showed that approximately 0.01% of the original virus load remained viable after six days. A follow-up experiment found that exposure of dried cultures to UV light for up to 30 seconds achieved approximately the same level of inactivation. Other laboratory studies of Ebola and other hemorrhagic fever viruses suggest that, in general, low temperatures and darkness can enhance environmental persistence. Experimental studies of other enveloped viruses (coronaviruses and HIV) suggest that, in water, osmotic pressure and the presence of organic materials from sewage treatment effluent can increase environmental inactivation.

⁵ Culture detects live virus that can cause infection. PCR detects the presence of viral nucleic acid and can sometimes be detected even if live virus are not present.

Case Definitions for Ebola Virus Disease

- <u>Person Under Investigation (PUI)</u> Person Under Investigation, or PUI, means a person who has both consistent symptoms and risk factors, as defined by CDC at: <u>http://www.cdc.gov/vhf/ebola/hcp/case-definition.html</u>.
- <u>Confirmed Case</u> Confirmed Case means a case with laboratory-confirmed diagnostic evidence of Ebola virus infection as defined by CDC at: <u>http://www.cdc.gov/vhf/ebola/hcp/case-</u> <u>definition.html</u>.

Cleaning and Disinfection Definitions

- <u>Cleaning product</u> A product intended to remove soiling from a surface or material through the combined action of mechanical scrubbing, detergents, and water. Cleaning products are not intended to kill microorganisms, but they can reduce microbial load on surfaces through physical removal. Cleaning is a necessary first step to disinfection; without initial cleaning the effectiveness of a sanitizer or disinfectant will be reduced.
- <u>Disinfectant product</u> An antimicrobial pesticide product that makes a specific claim, on the product label, that it kills certain microorganisms. Any product that makes an antimicrobial claim must be registered⁶ by the New York State Department of Environmental Conservation (DEC) and by the federal Environmental Protection Agency (EPA)⁷. Use of a disinfectant product is a form of environmental decontamination, but is not considered treatment of regulated medical waste under DEC rules.
- <u>Routine cleaning</u> Use of a cleaning product to reduce soil load on a surface, textile, or other object. Routine cleaning includes wearing gloves and using proper hand washing, to minimize potential exposure to cleaning chemicals and contaminants present in soil load.

Frequently Asked Questions about Cleaning and Disinfecting

The following questions address specific details regarding cleaning and disinfection in the nonhealthcare and non-laboratory settings, based on the general principles described above.

Non-healthcare or non-laboratory setting where a PUI or confirmed case of EVD was present.

⁶ "Registration" means that a pesticide product has been evaluated and accepted for sale and use by the EPA. Such pesticides will have an "EPA Registration Number" on the product label. An antimicrobial pesticide product must also be registered by the New York State Department of Environmental Conservation before it can be sold or used in New York State.

⁷ More information on antimicrobial pesticide registration is available at: <u>http://www2.epa.gov/pesticide-registration/antimicrobial-pesticide-registration</u>

Q: What are the recommended cleanup procedures for furnishings and household items contaminated with blood or other body fluids?

A: Follow the recommendations for selecting personal protective equipment (PPE) provided in Attachment 1. Follow the recommended cleanup protocols listed in Attachment 2 for cleaning, disinfecting, and proper handling and packaging of all items visibly contaminated with blood or other body fluids.

Q: Who is responsible for cleanup?

A: In general, property owners are responsible for cleanup.

Q: Who should review cleaning plans prepared by cleaning contractors and do they require approval?

A: Although approval is not required for cleaning plans, cleaning contractors should demonstrate that they are capable of satisfying the guidance provided in Attachments 1 and 2. If asked to do so, Local Health Departments should review cleanup plans with emphasis on assuring that the plan is consistent with Attachments 1 and 2, as well as the most current guidance from the Occupational Health and Safety Administration (OSHA) on worker health and safety.⁸

Q: What types of products are recommended for routine cleaning and for cleaning surfaces that are to be disinfected?

A: Routine household cleaning products that contain soap or a detergent can be used.

Q: What disinfection products are recommended?

A: For disinfection on hard, non-porous surfaces, use an EPA and DEC registered disinfectant product labeled as effective against non-enveloped viruses (such as norovirus). Non-enveloped viruses are more resistant to disinfectants than enveloped viruses such as Ebola. As a precaution, (and because no registered disinfectant products are specifically labeled for Ebola virus) selection of a disinfectant product with a higher potency than what is normally required for an enveloped virus is being recommended at this time.⁹ Carefully follow the label directions to ensure effective disinfectant concentration and contact time and safety of use.

Any visibly contaminated materials that are not comprised of exclusively hard, non-porous surfaces must be carefully packaged, transported, and disposed of in accordance with State and federal regulations. Porous materials include but are not limited to linens, clothing, rugs, mattresses, upholstered furniture, carpets, and other porous textiles. See Attachments 1 and 2.

Q: Is any environmental clearance sampling recommended to show that cleaning is complete?

A: No. Environmental sampling before or after cleaning is not recommended at this time, because standardized environmental clearance sampling protocols do not currently exist.

⁸ See: <u>https://www.osha.gov/Publications/OSHA_FS-3756.pdf</u>

⁹ Guidance on disinfectants effective against non-enveloped viruses:

http://www.health.ny.gov/professionals/protocols_and_guidelines/antibiotic_resistance/docs/hospital_disinfectants_f or_general_disinfection_of_environmental_surfaces.pdf

Q: Are there special cleaning or disinfection recommendations for surfaces and household items that do not have visible contamination with blood or other body fluids?

A: No. In general, use routine cleaning when there is no visible contamination. However, when cleaning an area that has been occupied by a PUI or person with laboratory-confirmed EVD, certain high-contact materials, such as linens from a bed that was used by the PUI or person with laboratory-confirmed EVD should be managed as contaminated waste, even if visible contamination with blood or body fluids is not present.

Q: Can cleanup be limited only to the rooms where the patient visited, or must the entire living space be cleaned?

A: Cleanup can be limited to locations visibly contaminated by blood or other body fluids. As mentioned, use routine cleaning when there is no visible contamination.

Q: Should outside surfaces or items in the outside environment (e.g., patio furniture, sidewalks) be cleaned or disinfected?

A: Clean and disinfect visibly contaminated outside surfaces and items in the same manner as inside surfaces and items. As mentioned, use routine cleaning when there is no visible contamination.

Q: Can time and temperature be considered as an alternative to cleaning? The CDC references a study which found that, under certain lab conditions, a small fraction of the virus load placed on a surface can still be active for up to six days. If the indoor environment of concern does not need to be immediately occupied, should cleaning only take place after a six day waiting period?

A: No, time and temperature should not take the place of cleaning and disinfection.

Q: Are normal household dishwashing procedures adequate for cleaning?

A: Dishes and other items that might normally be cleaned in a dishwasher should be treated the same as other household items. That is, clean and disinfect items following Attachments 1 and 2. Use routine cleaning for items without visible contamination.

Q: Are there cleaning procedures that are NOT recommended?

A: DO NOT employ cleaning methods that could generate aerosols such as steam-cleaning or power washing.

DO NOT vacuum without HEPA (high-efficiency particulate air) filtration.

DO NOT use compressed air, pressurized water, or similar procedures, which might create droplets of infectious materials.

Q: What regulations apply to professional cleaning contractors?

A: As with all private employers in the U.S., professional contractors must comply with the Occupational Safety and Health Administration (OSHA) Bloodborne Pathogens (29 CFR 1910.1030), Hazard Communication (29 CFR 1910.1200) and Personal Protective Equipment

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(29 CFR 1910.132) Standards, and all other applicable regulations. Additional information is posted on the OSHA web page for Ebola: <u>https://www.osha.gov/SLTC/ebola/standards.html</u>.

Q: Are there special cleaning or disinfection recommendations for locations that have been occupied by asymptomatic persons with EVD exposure, as defined by the CDC?

A: No. Persons without active symptoms cannot transmit EVD. This includes individuals who have been in contact with an EVD-infected person but have no symptoms and persons who have completely recovered from EVD. Use routine cleaning in locations where such persons live, work, or visit.

Heating, ventilating, and air conditioning (HVAC) systems

Q: What cleaning or disinfection is necessary for HVAC systems? Should air filters, humidifiers, fans, be decontaminated?

A: Ebola transmission does not occur by aerosol route. Therefore, no special cleaning or disinfection actions are recommended for HVAC systems or components, such as air filters, humidifiers, or fans.

Cleaning/disinfection of private motor vehicles and public transportation systems

Q: Are there recommendations for cleanup of vehicles and public transportation systems contaminated by blood or other body fluids of a patient with EVD?

A: Clean and disinfect hard, non-porous items with visible contamination. Any visibly contaminated materials that are not comprised of exclusively hard, non-porous surfaces must be carefully packaged, transported, and disposed of in accordance with State and federal regulations. See Attachments 1 and 2.¹⁰

Q: Who would be responsible for cleaning and disinfection for public transportation?

A: Operators and public transportation authorities are responsible for cleaning and disinfection for public transportation.

Solid waste handling¹¹

Q: Are there guidelines for waste sorting and disposal?

A: Specific waste-handling precautions are described in Attachments 1 and 2. Keep wastes with visible contamination separate from other household waste.

¹⁰ Note that CDC has developed guidance for cleaning and disinfection on airplanes where a sick traveler may have EVD: <u>http://www.cdc.gov/quarantine/air/managing-sick-travelers/ebola-guidance-airlines html#personnel</u>.
 ¹¹ Solid waste is defined in DEC Part 360 regulations: http://www.dec.ny.gov/regs/4415.html

Q: How do I handle materials and objects that have no visible indication of direct contamination with blood or other body fluids from a PUI or person with laboratory confirmed EVD?

A: In most cases, use routine cleaning and waste-handling practices. Keep wastes with visible contamination separate from other household waste. Certain high-contact materials such as linens from a bed that was used by a PUI or person with laboratory-confirmed EVD should be managed as contaminated waste, even if visible contamination with blood or body fluids is not present.

Wastewater handling

Q: Can the wastewater associated with the cleaning be discharged into the existing plumbing/sanitary sewer or into an individual septic system?

A: Yes. Wastewater from cleaning can be discharged into existing sanitary sewer lines or an individual septic system. Ebola virus is more sensitive to environmental inactivation than many other infectious agents. In previous outbreaks of Ebola in Africa, no transmission was documented through incidental exposure to contaminated wastewater. CDC is reportedly developing guidance for sewage workers and Ebola.¹² DOH will post the guidance when it is available.

¹² http://www.watereuse.org/node/3461 DRAFT

ATTACHMENT 1

New York State Department of Health Center for Environmental Health

Guidance on the Selection and Use of Personal Protective Equipment for Cleaning Spaces Occupied by a Person with Ebola Virus Disease in Non-Healthcare and Non-Laboratory Settings

Summary

Personal protective equipment (PPE) should be worn when cleaning surfaces and materials that have visible blood or other body fluids. The PPE should cover skin, eyes, and mucous membranes. The selection of the specific types of PPE to be used in a given situation should be made on a case-by-case basis, considering factors such as the specific tasks to be performed, the amount of blood or body fluids to be cleaned, and the amount of time the PPE needs to be worn.

Scope and Applicability

This guidance on PPE is intended for the cleaning of blood and other body fluids in non-healthcare and non-laboratory settings. These settings include, but are not limited to, workplaces, private residences, public housing, public transportation, hotels and motels, homeless shelters, restaurants, theaters, and other places of public and private congregation. Guidance developed for specific settings should be followed when they are available. For example, the Centers for Disease Control and Prevention (CDC) has published guidance on PPE for cleaning commercial aircraft (<u>http://www.cdc.gov/quarantine/air/managing-sick-travelers/ebola-guidance-airlines.html</u>).

Routes of Exposure - What Needs to be Protected?

Ebola spreads through direct contact by touching the blood or other body fluids (such as feces, saliva, urine, vomit, and semen) of a symptomatic person who is sick with EVD. Infected blood or other body fluids can spread Ebola through breaks in your skin or contact with eyes, nose, or mouth. Transmission can also occur through exposure to objects (such as needles) that have been contaminated with infected blood or other body fluids.

PPE should be selected and used to protect skin, eyes, and mucous membranes from direct contact with surfaces, materials, and equipment that may be contaminated with blood or other body fluids. PPE should also provide protection from splashes and large droplets. Respiratory protection, such as an N95 mask, is not necessary but may be worn for coverage of the nose and mouth.

Selection of PPE

The selection of PPE should be made on a case-by-case basis, taking into consideration factors such as the specific tasks to be performed, the amount of blood or body fluids to be cleaned, and the amount of time the PPE needs to be worn. PPE should:

- Provide full coverage of skin, eyes, and mucous membranes.
- Protect against splashes and large droplets.
- Fit properly. This may require having different sizes available for different workers.
- Allow adequate range of motion and not interfere with cleaning tasks.
- Be simple to put on and remove.
- Be resistant to tears, abrasions, punctures, and wear, particularly in areas that have direct contact with surfaces.
- Be disposable or easily cleanable, e.g. no hidden recesses that can trap materials.

At a minimum, PPE should include:

- Waterproof gloves
- Facemask that covers nose and mouth
- Goggles and face shield
- Waterproof coveralls
- Closed-toe shoes and shoe covers

When large amounts of blood or body fluids are present, PPE should include:

- Double-gloving
- Waterproof boots
- Coveralls that have integral hoods

Training

Training on proper use of PPE is essential to achieving the intended level of protection. Persons that use PPE should receive training prior to use and periodically as needed. Elements of training should include:

- Routes of exposure and role of PPE as protective gear.
- Limitations of PPE.
- Proper donning and doffing (dressing and undressing) procedures.
- Signs and symptoms of heat stress.
- Evaluating PPE for tears, abrasions, and signs of wear.
- Determining when higher levels of PPE are needed.

Putting On (Donning) and Removing (Doffing) PPE

Proper donning of PPE is **critical** to ensure adequate protection during use. Proper removal is **critical** for avoiding contact with contaminated PPE. Persons should be trained on procedures for putting on and removing PPE. These procedures should be practiced by the user to attain familiarization and proficiency prior to wearing them in a contaminated environment.

After removing PPE it should either be properly disinfected, if possible, or handled as contaminated waste. After removing PPE, perform proper hand hygiene by washing hands thoroughly using soap and water or by using a waterless alcohol-based hand sanitizer with at least 60% alcohol. Hand hygiene following glove removal further ensures that the hands will not carry potentially infectious material that might have penetrated through unrecognized tears or that could contaminate the hands during glove removal. If hands are visibly soiled, use soap and water, not alcohol-based hand rubs.

Heat Stress

PPE inhibits the body's natural thermal regulating properties. This is particularly true for water impermeable clothing, which reduces the ability of the body to cool. The degree of stress placed on the body by PPE is additionally influenced by the level of activity, the duration of work, the physiologic status of the wearer, ambient temperature and humidity, and other factors.

Workers who may wear PPE for an extended period of time or in hot environments should receive training on the recognition and prevention of heat stress. Additional information is available at: <u>http://www.cdc.gov/niosh/topics/heatstress</u>

Occupational Safety and Health Administration (OSHA)

As with all private employers in the U.S., professional contractors must comply with the Occupational Safety and Health Administration (OSHA) Bloodborne Pathogens (29 CFR 1910.1030), Hazard Communication (29 CFR 1910.1200) and Personal Protective Equipment (29 CFR 1910.132) Standards, and all other applicable regulations. Additional information is posted on the OSHA web page for Ebola: https://www.osha.gov/SLTC/ebola/standards.html

ATTACHMENT 2

Guidelines for Environmental Infection Control and Cleanup of Homes, Public Spaces, and other Non-healthcare and Non-laboratory Settings Contaminated by Body Fluids where a PUI or Confirmed Case of EVD was present

Introduction

This document provides recommendations for environmental infection control and cleanup in non-healthcare and non-laboratory settings that were contaminated with human blood or other body fluids (including urine, feces, saliva, semen and vomit) from a person who is identified as a Person Under Investigation (PUI) or Confirmed Case of EVD.

When to use these guidelines

These guidelines apply to homes, public spaces, and other non-healthcare and non-laboratory settings contaminated with blood or body fluids where a person who is a PUI or Confirmed Case was present. Hiring a professional cleaning contractor is recommended.

No special environmental infection control measures are required in places where persons without active EVD symptoms live, work, or visit. Persons without active symptoms cannot transmit EVD, including individuals who have been in contact with an EVD-infected person but have no symptoms and persons who have completely recovered from EVD.

Cleanup Procedures for Professional Cleaning Contractors

The goal of cleanup is to return the property and its contents to a state of hygiene that poses no risk of exposure to occupants to Ebola virus. This must be achieved without the threat of exposure to those conducting cleanup. Cleaning contractors should make sure employees follow these steps when cleaning potentially contaminated homes, public spaces, and other non-healthcare and non-laboratory settings.

Follow the recommended Occupational Safety and Health Administration (OSHA) guidance entitled "Cleaning and Decontamination of Ebola on Surfaces."¹³

Additionally, follow the steps below:

- 1. Assess all areas known or thought to have been contaminated with blood or other bodily fluids and isolate the work area from non-contaminated areas. Restrict access to the work area until cleanup is complete. Use caution tape or warning signs to warn the public and keep them away from the site.
- 2. Ensure adequate ventilation in areas where workers are using disinfectants, including by opening windows and doors, or using mechanical ventilation equipment.

¹³ Available at: <u>https://www.osha.gov/Publications/OSHA_FS-3756.pdf</u>

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- 3. Wear appropriate personal protective equipment (PPE) as described in Attachment 1 and OSHA guidance.¹⁴
- 4. DO NOT employ cleaning methods that could generate aerosols such as steam-cleaning or power washing.
- 5. DO NOT vacuum without HEPA (high-efficiency particulate air) filtration.
- 6. DO NOT use compressed air, pressurized water or similar procedures, which might create droplets of infectious materials.
- 7. Clean surfaces before they are disinfected. Many commercial disinfectants include a cleanser (such as soap or a detergent), which allows for cleaning and disinfection at the same time.
- 8. For disinfection on hard, non-porous surfaces, use an EPA and DEC registered disinfectant product labeled as effective against non-enveloped viruses (such as norovirus)¹⁵. Non-enveloped viruses are more resistant to disinfectants than enveloped viruses such as Ebola. As a precaution, (and because no registered disinfectant products are specifically labeled for Ebola virus) selection of a disinfectant product with a higher potency than what is normally required for an enveloped virus is being recommended at this time. Carefully follow the label directions to ensure effective disinfectant concentration and contact time.
- 9. To reduce the risk of exposure to body fluids during the additional steps necessary to clean and disinfect porous materials, any visibly contaminated materials that are <u>not comprised exclusively</u> of hard, non-porous surfaces must be carefully packaged, transported, and disposed of in accordance with State and federal regulations. Waste must not be shredded or reduced in size prior to packaging, transport, and disposal. This includes but is not limited to linens, clothing, rugs, mattresses, upholstered furniture, carpets, and other porous textiles.
- 10. Certain high-contact materials such as linens from a bed that was used by a PUI or person with laboratory-confirmed EVD should be managed as contaminated waste, even if visible contamination with blood or body fluids is not present. See the section below entitled **Waste Disposal**.
- 11. Large spills of liquid blood, body fluids, and any fluids visibly contaminated with blood or body fluids should be removed with disposable absorbent materials before cleaning and disinfecting the surface. Cover spills with absorbent material (e.g., paper towels), then pour disinfectant to saturate the area, and allow disinfectant to soak into spills before cleaning. The absorbent materials used to collect the fluid must be packaged, transported, and disposed of in accordance with State and federal regulations (see section below entitled Waste Disposal). After cleaning and disinfection are complete, liquids including used cleaning solution may be disposed of by pouring them down the drain to the sanitary sewer or individual septic system.
- 12. Inspect area to ensure that all affected areas and items have been treated.
- 13. Disinfect reusable cleaning equipment with an EPA- and DEC-registered disinfectant that can kill non-enveloped viruses. If they can't be cleaned and disinfected, they must be

¹⁵ For guidance on disinfectants effective against non-enveloped viruses:

http://www.health.ny.gov/professionals/protocols and guidelines/antibiotic resistance/docs/hospital disinfectants f or general disinfection of environmental surfaces.pdf.

¹⁴ Id.

packaged, transported, and disposed of in accordance with State and federal regulations (see section below entitled **Waste Disposal**).

- 14. Remove PPE before leaving the work area following the detailed guidance provided in Attachment 1 and by OSHA.¹⁶ Disinfect reusable PPE with an EPA- and DEC-registered disinfectant that can kill non-enveloped viruses. PPE that cannot be cleaned and disinfected must be packaged, transported, and disposed of in accordance with State and federal regulations (see section below entitled Waste Disposal).
- 15. Wash hands and all exposed skin thoroughly with soap and water when cleanup is complete.

Waste Disposal

Professional cleaning contractors are responsible for ensuring disposal of waste in accordance with New York State and federal regulations. Any material contaminated with blood and body fluids must be carefully handled, packaged, and transported in accordance with U.S. Department of Transportation (DOT) regulations for Category A infectious substances, or with an applicable DOT waiver. Refer to the DOT document entitled "Procedural Guidance on the Proper Packaging of Ebola Suspected Waste."¹⁷ Additionally, New York State Department of Environmental Conservation (DEC) regulations require that the transporter be permitted to transport regulated medical waste (RMW).

With respect to disposal, DEC regulations require that the waste be disposed of at a facility permitted to accept RMW. For more information on RMW disposal, see DEC's webpage entitled "New York State Ebola Waste Disposal Fact Sheet", available at: <u>http://www.dec.ny.gov/chemical/99119.html</u>.

Contractor Compliance with Applicable Regulations

As with all private employers in the U.S., professional contractors must comply with the Occupational Safety and Health Administration (OSHA) Bloodborne Pathogens (29 CFR 1910.1030), Hazard Communication (29 CFR 1910.1200) and Personal Protective Equipment (29 CFR 1910.132) Standards and all other applicable regulations. Additional information is posted on the OSHA web page for Ebola: <u>https://www.osha.gov/SLTC/ebola/standards.html</u>.

References and Resources

1. CDC Interim Guidance for Environmental Infection Control in Hospitals for Ebola Virus: http://www.cdc.gov/vhf/ebola/hcp/environmental-infection-control-in-hospitals.html

¹⁶ Available at: <u>https://www.osha.gov/Publications/OSHA_FS-3756.pdf</u>.

¹⁷ Available at:

http://phmsa.dot.gov/pv_obj_cache/pv_obj_id_E7AFD0A1C5DBDDE54BCAAA0A80F9D6898FF50400/filename/ suspected_ebola_patient_packaging_guidance_final.pdf

- CDC Guidance for Safe Handling of Human Remains of Ebola Patients in U. S. Hospitals and Mortuaries: <u>http://www.cdc.gov/vhf/ebola/hcp/guidance-safe-handling-human-remains-ebola-patients-</u> us-hospitals-mortuaries.html
- 3. US Department of Transportation Guidance for Transporting Ebola Contaminated Items: http://phmsa.dot.gov/portal/site/PHMSA/menuitem.6f23687cf7b00b0f22e4c6962d9c8789/ ?vgnextoid=4d1800e36b978410VgnVCM100000d2c97898RCRD&vgnextchannel=d2487 24dd7d6c010VgnVCM10000080e8a8c0RCRD&vgnextfmt=print
- 4. OSHA Bloodborne Pathogen Standard (29 CFR 1910.1030): https://www.osha.gov/pls/oshaweb/owadisp.show_document?p_id=10051&p_table=STAN DARDS
- 5. Environmental Protection Agency list of registered antimicrobial products effective against norovirus: <u>http://www.epa.gov/oppad001/list_g_norovirus.pdf</u>.

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DRAFT Scope of Services for cleaning Ebola virus disease (EVD) contamination in non-healthcare settings

I. Introduction

The work described in this scope of services applies to cleanup of homes, public spaces and other non-healthcare settings contaminated with body fluids including blood, feces, vomit, and other potentially infectious material (OPIM) from a person with active symptoms of confirmed Ebola virus disease (EVD).

II. Scope of Services for Contractor

1. Initial Assessment

A thorough visual assessment of all reported and potentially contaminated areas is required to develop a scope of work that effectively addresses all sources of exposure to Ebola virus. At a minimum, the contractor shall:

- Guided by information provided by the DOHMH, perform a visual assessment of all areas likely to be contaminated with blood or OPIM, such as bathrooms and sleeping areas.
- Document (photos, video, and written narrative) areas with body fluid contamination and estimate the size/extent of the contamination, and types of materials that are contaminated.
- Determine remedial actions either disposal, or cleaning and disinfecting. Porous items with visible or reported contamination should be discarded while nonporous/hard surfaces and items should be cleaned and disinfected.
 - a) If one or more personal items that are especially difficult to assess or treat are identified, the contractor shall contact DOHMH for guidance
- 4. Develop and submit a work plan that is informed by the actions described above. This site-specific work plan shall contain detailed information on the following:
 - a) Worker protection strategy

- i. Staging area plan
- ii. Personal protective equipment plan
- iii. Decontamination plan¹
- b) Cleanup, disinfecting, and removal strategy
- c) Waste removal and transport strategy
 - The waste removal strategy shall specify a dedicated waste corridor when use of common areas is required to remove waste from the area being treated.

Minimum work plan requirements for these three elements can be found below. Work plans must be approved by DOHMH prior to the commencement of cleanup, disinfecting, and removal activities.

2. Cleanup, Disinfecting and Removal

Prior to the commencement of cleanup and disinfecting activities, the contractor shall, at a minimum:

- Restrict access to the work area using caution tape or warning signs until cleanup is complete.
- 2. Set up all work areas, including staging areas to ensure adequate space for the donning and doffing of Personal Protective Equipment (PPE) and to ensure there is no cross contamination between "clean" areas and "dirty" areas.
- 3. Ensure that all necessary cleanup and disinfecting supplies are on site and that all employees are using the proper level of PPE. See Worker Protection section for guidance on appropriate PPE. All work must be conducted in compliance with the Occupational Safety and Health Administration (OSHA) Bloodborne Pathogens standard (1910.1030), OSHA guidelines² on the cleaning and decontamination of Ebola on surfaces, and other applicable OSHA standards.

¹ See <u>https://www.osha.gov/SLTC/hazardouswaste/training/decon.html</u> for guidance.

² https://www.osha.gov/Publications/OSHA_FS-3756.pdf

4. Ensure that all required waste handling and transport supplies are present and easily accessible in or near the work area.

The contractor shall perform work in a manner consistent with OSHA guidance³ in the following order:

- 1. Sharp objects, such as broken glass, which may be contaminated with blood or OPIM, shall be placed in an appropriate puncture-resistant container.
- 2. For large spills with visible blood or body fluid contamination:
 - a. Cover the spill using disposable absorbent materials.
 - Pour disinfectant over the covered area and allow it to soak into spills for at least 30 minutes as per OSHA guidance.⁴
 - c. Place absorbent materials in leak-proof waste containers. Use tools, such as tongs from a spill kit, as much as possible rather than doing cleanup work directly with gloved hands.
- 3. Remove all contaminated items that cannot be cleaned and disinfected on site. At a minimum, the following items shall always be disinfected then packaged and discarded if contaminated:
 - Bedding and sheets, clothing, rugs and other textiles that have come in contact with contaminated blood or body fluids
 - Mattresses, upholstered furniture, carpets and other porous belongings visibly contaminated with blood or body fluids
 - Other contaminated items identified during assessment
- 4. After completion of steps 1-3 above, the contractor will proceed with the onsite cleaning and disinfecting of all remaining contaminated items/surfaces deemed cleanable. In addition, all "high touch" items/surfaces likely to be accessed by EVD case should be cleaned and disinfected.
 - Clean contaminated surfaces before they are disinfected. DO NOT employ cleaning methods that could generate aerosols such as steam cleaning or power washing.

³ https://www.osha.gov/Publications/OSHA_FS-3756.pdf

⁴ https://www.osha.gov/Publications/OSHA_FS-3756.pdf

b. Disinfect hard surfaces with a disinfectant registered by the U.S. Environmental Protection Agency (EPA) and New York State Department of Environmental Conservation (NYS DEC) which is effective against non-enveloped viruses such as norovirus, adenovirus or rotavirus. For example, a freshly mixed 1:10 bleach solution is an approved disinfectant. Bleach solution, if used, must be discarded at the end of each work shift and a fresh solution must be made at the beginning of each work shift. See NYS DEC registered disinfectant list<u>http://www.health.ny.gov/professionals/protocols_and_guidelines/antibiotic_resistance/docs/hospital_disinfectants_for_general_disinfection_of_environm_ ental_surfaces.pdf and EPA's website for a list of registered antimicrobial products effective against norovirus:</u>

http://www.epa.gov/oppad001/list_g_norovirus.pdf. Follow product label instructions to ensure effective disinfectant concentration and contact time. Do not mix chemicals and ensure all containers are appropriately labelled.

Liquids not visibly contaminated with blood or body fluids, including used cleaning solution, may be disposed of by pouring them down the drain to the sanitary sewer. Cleaning supplies should be either packaged and discarded as untreated EVD RMW or cleaned and disinfected.

3. Worker Protection

The contractor shall provide DOHMH with an Exposure Control Plan (ECP) in accordance with the OSHA Bloodborne Pathogens standard. The Plan shall outline the protective measures the contractor will take to eliminate or minimize employee exposure to blood and other potentially infectious material (OPIM).

Minimum ECP requirements can be found below. The ECP must be submitted and approved by DOHMH prior to the commencement of cleanup, disinfecting, and removal activities.

Contractors are responsible for implementing the site work plan and the ECP and ensuring that all employees with potential occupational exposure to bloodborne pathogens comply with the

ECP and site work plan, perform all tasks in a manner that minimizes or eliminates potential exposure, and be properly trained.

Personal Protective Equipment (PPE)

Contractors are required to set up a staging area for workers to don and doff PPE and ensure that PPE is in place BEFORE entering the contaminated area. See the Centers for Disease Control and Prevention's Sequence for Putting On and Removing Personal Protective Equipment: <u>http://www.cdc.gov/vhf/ebola/pdf/ppe-poster.pdf</u>

2. Wear appropriate personal protective equipment (PPE) as described in Centers for Disease Control and Prevention (CDC) Guidance on Personal Protective Equipment To Be Used by Healthcare Workers (http://www.cdc.gov/vhf/ebola/hcp/procedures-for-ppe.html). Additional PPE should be used as needed.Respiratory protection may be required where using disinfectants/cleaning chemicals that may produce irritant fumes or in instances where workers may be exposed to bioaerosols (as a result of spraying liquids or air during cleaning). In these cases, medically qualified workers must use, at a minimum, a NIOSH-approved, fit-tested N95 respirator. DO NOT employ cleaning methods that could generate aerosols such as steam cleaning or power washing.

Contractor will supervise all practices when employees don or doff PPE to assure that recontamination does not occur.

Worker Exposure and Injury

In the event there is worker exposure and/or injury, the contractor shall implement procedures for post exposure evaluation and follow up that were included in the Exposure Control Plan and/or the Health and Safety Plan. For exposure incidents, the contractor shall document, at a minimum, the route(s) of exposure, and the circumstances under which the exposure incident occurred.

In addition to reporting required by OSHA, all incidents involving potential worker exposure, breach of PPE, worker injury, potential or actual releases of blood or OPIM, or cleaning and disinfecting chemicals shall be reported to DOHMH within one hour of occurrence.

4. Waste Handling and Transport

All waste generated during the removal, cleaning and disinfection of EVD contaminated surfaces shall be classified as untreated EVD regulated medical waste (RMW). Untreated EVD RMW is categorized as Category A infectious substance and as such is regulated by DOT's Hazardous Materials Regulations (HMR, 49 C.F.R., Parts 171-180) and NYS DEC regulations (6 NYCRR Subparts 360-10 and 17, and 6 NYCRR Part 364). Any item transported in commerce that is contaminated or suspected of being contaminated with a Category A infectious substance must be packaged and transported in accordance with the HMR or applicable DOT waiver. If the cleaning contractor does not provide waste transporting services, contractor must subcontract with a permitted waste removal and transport contractor. In this scenario, cleaning contractors are responsible for packaging of untreated EVD RMW in accordance with HMR, while waste transport contractors are responsible for transporting untreated EVD RMW in accordance with HMR and DEC regulations.

Transport and Disposal Requirements

Off-site transport, transfer, processing, and treatment of untreated EVD RMW must be in compliance with the NYSDEC's 6 NYCRR Subparts 360-10 and 17, and 6 NYCRR Part 364 regulations. Permitted transporters, transfer, treatment and disposal facilities may have additional requirements. Untreated EVD waste must be handled safely at all times with use of appropriate PPE and single-use leak-proof containers (unless otherwise approved by the NYSDEC).

Untreated EVD RMW shall be transported to and processed by a Permitted Facility for commercial treatment of RMW. A list of currently permitted facilities can be found here: http://www.dec.ny.gov/chemical/99119.html

After treatment of EVD RMW, transport and disposal of treated EVD RMW (TRMW) must be performed by facilities specifically authorized under 6 NYCRR Part 360. Pursuant to 6 NYCRR 360 regulations, only landfills, incinerators, and storage or transfer facilities which have been approved in writing by the NYSDEC for receipt of TRMW, are authorized to accept it for processing or disposal. In accordance with the Public Health Law and the Environmental Conservation Law (ECL), no RMW, regardless of where generated, may be disposed of by burial at a landfill disposal facility unless treated, and all sharps must be rendered unrecognizable. The ECL further states that TRMW must be accompanied by a certificate, in a form prescribed by the Commissioner of the NYSDOH, which evidences such treatment. Also, 6 NYCRR Part 360 requires that any facility processing or disposing of TRWM must collect and retain the certificate of treatment form for each load of TRMW received.

The Contractor shall provide DOHMH and NYS DEC with required NYS DEC Hazardous Waste Manifest forms.

The Contractor shall immediately contact DOHMH in the event the transport contractor is unable to pick up waste after the cleanup.

5. Clearance/Reoccupancy

A visual inspection of all areas identified during the assessment shall be performed at the conclusion of activities. The Contractor will inspect all areas to confirm all items have been treated in accordance with the work plan and to confirm all work items and supplies have been removed from the site.

Additionally, a visual inspection of the areas travelled while transporting waste from the work area to the means of waste transport is required. If accidental contamination is identified, contractor shall clean and decontaminate areas using methods described above.

The contractor shall document that all of the confirmations listed above occurred and will submit this documentation to DOHMH for final determination regarding the commencement of re-occupancy of the previously contaminated areas.

6. Documentation, Recordkeeping, and Reporting

The contractor shall provide the following to DOHMH for review and approval prior to the start of work:

- a) Exposure Control Plan
- b) Health and Safety Plan
- c) A Work Plan detailing the procedures, protocols, and materials to be used including the disinfectants being used and Material Safety Data Sheets for review prior to the start of

work. Site-specific deviations from the Exposure Control Plan should be included as well.

All assessments, plans, and reports shall be documented in formats and within timeframes identified by DOHMH and shall contain all data elements identified by DOHMH.

The Contractor must provide a daily report of activities conducted onsite (email or other written report format) and meet or telcon DOHMH or representatives as needed.

Documentation errors or omissions identified by DOHMH shall be corrected and resubmitted by the contractor within 1 day of notification.

All documents shall be maintained by the contractor for a period of 12 months.

The contractor shall comply with all documentation, recordkeeping, and reporting requirements listed within the OSHA Bloodborne Pathogens standard and all other applicable regulations and standards.



Interim guidelines for environmental infection control and cleanup of homes, public spaces and other non-healthcare settings contaminated by body fluids from patients with confirmed or suspected Ebola virus disease

Introduction

This document provides recommendations for environmental infection control and cleanup in non-health care settings contaminated with human blood or other body fluids (including urine, feces and vomit) from a person with confirmed or suspected Ebola virus disease (EVD).

Definitions

<u>Confirmed Ebola virus disease</u> – symptoms consistent with EVD and laboratory confirmation of Ebola virus in blood or body fluids (See <u>http://www.nyc.gov/html/doh/html/diseases/ebola.shtml</u> for a list of Ebola symptoms)

 $\underline{Suspected\ Ebola\ virus\ disease} - symptoms\ consistent\ with\ EVD\ and\ history\ of\ contact\ with\ a\ person\ with\ known\ EVD$

When to use these guidelines

These guidelines apply to cleanup of homes, public spaces and other non-healthcare settings contaminated with blood or body fluids from a person with active symptoms of known or suspected EVD.

A room or area visibly contaminated with blood or body fluids from a person with suspected EVD should be closed off and isolated until laboratory results from the symptomatic person are available and, if applicable, EVD cleanup procedures are completed. In buildings with multiple residential or office units, only the units with visible blood or body fluid contamination require isolation and cleaning.

If EVD is confirmed, a qualified contractor should perform cleanup following these guidelines. If EVD testing is negative, the property owner or other responsible party is responsible for cleaning the residence using usual cleanup procedures. Standard precautions including wearing gloves are recommended for cleanup of any blood or body fluid.

No special environmental infection control measures are required in places where persons without active EVD symptoms live, work or visit. Persons without active symptoms cannot

transmit EVD, including individuals who have been in contact with an EVD-infected person but have no symptoms and persons who have completely recovered from EVD.

Clean-up Procedures for Professional Cleaning Contractors

The goals of clean-up are to return the property and its belongings to a state of hygiene that poses no risk of exposure to occupants to Ebola virus. This must be achieved without the threat of exposure to those conducting clean-up. Cleaning contractors should make sure employees follow these steps when cleaning potentially contaminated homes, public spaces and other non-health care settings:

- Assess area to be cleaned and isolate the work area from non-contaminated areas. Restrict access to the work area until clean-up is complete. Use caution tape or warning signs to warn the public and keep them away from the site.
- Wear appropriate personal protective equipment (PPE) as described in Centers for Disease Control and Prevention (CDC) Guidance on Personal Protective Equipment To Be Used by Healthcare Workers (<u>http://www.cdc.gov/vhf/ebola/hcp/procedures-for-ppe.html</u>). Additional PPE should be used as needed. Set up staging areas for workers to don and doff PPE and ensure that PPE is in place BEFORE entering the contaminated area.
- 3. Place sharp objects, such as broken glass, which may be contaminated with blood or other bodily fluids in an appropriate puncture-resistant container.
- 4. Cover large spills or collections of body fluids with disposable absorbent material (e.g., paper towels) then pour disinfectant on to saturate the area and allow it to soak into spills for at least 30 minutes before cleaning to kill any infectious agents that may be present.
- Clean surfaces before they are disinfected. Many commercial disinfectants include a cleanser (e.g. detergent) which allows for cleaning and disinfection at the same time. DO NOT employ cleaning methods that could generate aerosols such as steam cleaning or power washing.
- 6. Disinfect hard surfaces with a disinfectant registered by the U.S. Environmental Protection Agency (EPA) and New York Department of Environmental Conservation (DEC) which is effective against non-enveloped viruses such as norovirus, adenovirus or rotavirus. Note that Ebola virus is an enveloped virus. Enveloped viruses are typically easier to kill than non-enveloped viruses. The recommendation for a disinfectant effective against non-enveloped viruses is made to provide a substantial margin of safety. Follow product label instructions to ensure effective disinfectant concentration and contact time.

- 7. Discard linens, clothing, rugs and other textiles that may have come in contact with contaminated blood or body fluids in leak-proof bags. Mattresses, upholstered furniture, carpets and other porous items visibly contaminated with blood or body fluids should be packaged and discarded in accordance with state and federal regulations (see section below entitled Waste Disposal).
- 8. Liquid blood, body fluids and any fluids visibly contaminated with blood or body fluids should be removed with disposable absorbent materials and placed in leak-proof waste containers. After cleaning and disinfection are complete, other liquids including used cleaning solution may be disposed of by pouring them down the drain to the sanitary sewer or individual septic system.
- 9. Inspect area to ensure that all affected areas and items have been treated.
- 10. Disinfect reusable cleaning equipment with an EPA-registered disinfectant that can kill non-enveloped viruses. If these items can't be cleaned, they must be packaged and disposed of in accordance with State and federal regulations (see section below entitled Waste Disposal).
- 11. Remove PPE after it becomes contaminated and before leaving the work area in the staging following the detailed procedure provided in CDC's Guidance on Personal Protective Equipment To Be Used by Healthcare Workers. Soak materials and PPE used in cleanup and decontamination in disinfectant, double-bag, and place in a leak-proof container. Decontaminate reusable PPE with an EPA-registered disinfectant effective against non-enveloped viruses.
- 12. Wash hands and all exposed skin thoroughly with soap and water when clean-up is complete.

Waste Disposal

Cleaning contractors are responsible for disposal of waste in accordance with applicable law.

- 1. Dispose of all sharp objects contaminated with blood and body fluids by placing them in an appropriate puncture-resistant, sealable container. Sharps containers can be sealed with heavy-duty tape.
- 2. Place non-sharp waste contaminated with blood and body fluids in leak-proof containment.
- Package and transport waste in accordance with the U.S. Department of Transportation's (DOT) guidance for transporting Ebola contaminated items (see References and Resources)

section below) or applicable DOT waiver. Waste should be transported to a New York State Department of Environmental Conservation (DEC)-permitted regulated medical waste treatment facility. Consult the appropriate DEC Regional Office for information on waste treatment facilities: <u>http://www.dec.ny.gov/about/50230.html</u>.

Contractor Compliance with Applicable Regulations

Professional contractors must comply with the Occupational Safety and Health Administration (OSHA) Bloodborne Pathogens (29CFR 1910.1030), Hazard Communication (29 CFR 1910.1200) and Personal Protective Equipment (29 CFR 1910.132) standards and all other applicable regulations and standards including those pertaining to worker protection and waste handling.

References and Resources

 CDC Guidance on Personal Protective Equipment To Be Used by Healthcare Workers During Management of Patients with Ebola Virus Disease in U.S. Hospitals, Including Procedures for Donning and Doffing:

http://www.cdc.gov/vhf/ebola/hcp/procedures-for-ppe.html

 CDC Guidance for Safe Handling of Human Remains of Ebola Patients in U. S. Hospitals and Mortuaries: http://www.cdc.gov/whf/ebola/hcp/quidance.safe handling human remains ebola patients.

http://www.cdc.gov/vhf/ebola/hcp/guidance-safe-handling-human-remains-ebola-patients-u s-hospitals-mortuaries.html

- OSHA Fact Sheet on Cleaning and Decontamination of Ebola on Surfaces in Non-Healthcare/Non-Laboratory Settings <u>https://www.osha.gov/Publications/OSHA_FS-3756.pdf</u>
- OSHA Bloodborne Pathogen Standard (29 CFR 1910.1030): <u>https://www.osha.gov/pls/oshaweb/owadisp.show_document?p_id=10051&p_table=STAN_DARDS</u>
- 5. DEC New York State Ebola Waste Disposal Fact Sheet: http://www.dec.ny.gov/chemical/99119.html
- 6. DOT Guidance for Preparing Packages of Ebola Contaminated Waste for Transportation and Disposal:

http://phmsa.dot.gov/pv_obj_cache/pv_obj_id_E7AFD0A1C5DBDDE54BCAAA0A80F9

 $\underline{D6898FF50400/filename/suspected_ebola_patient_packaging_guidance_final.pdf}$

 7. DOT Guidance for Transporting Ebola Contaminated Items: <u>http://phmsa.dot.gov/portal/site/PHMSA/menuitem.6f23687cf7b00b0f22e4c6962d9c8789/</u> <u>?vgnextoid=4d1800e36b978410VgnVCM100000d2c97898RCRD&vgnextchannel=d2487</u> <u>24dd7d6c010VgnVCM10000080e8a8c0RCRD&vgnextfmt=print</u>



Category A Waste Handling & Packaging Procedures Guidelines for a Suspected or Confirmed Case of Ebola

- With a suspected or confirmed Ebola case immediately contact the local/state health department and CDC.
- All waste generated from a suspected/confirmed patient should be treated as Category A waste as follows:
 - 1. Place soft waste or sealed sharps containers into a primary medical waste bag (1.5ml ASTM tested; can be provided by Stericycle).
 - 2. Apply bleach or other virocidal disinfectant into the primary bag to sufficiently cover the surface of materials contained within the bag; securely tie the bag.



- 3. Treat the exterior surface of the primary container with bleach or other virocidal disinfectant.
- 4. Place the primary bag into a secondary bag and securely tie the outer bag.
- 5. Treat the exterior surface of the secondary bag with bleach or other virocidal disinfectant.
- 6. The double bagged waste should then be place into special Category A packaging provided by Stericycle with the liner tied securely and container closed per the packaging instructions provided.
- 7. Store the Category A waste containers separate from other regulated medical waste and in a secure area preferably isolated and with limited access.
- Stericycle recommends using disposable sharps containers for suspected/confirmed Ebola cases. The disposable container should be sealed and disposed of as special Category A waste following the instructions above. If a reusable sharps container is inadvertently used that container should also be sealed and disposed of inside the bags with the Category A waste.
- Contact your Stericycle representative who will arrange delivery of the special Category A waste containers as well as begin the process with the DOT to acquire a "Special Permit" as required.
 - Stericycle has been advised by the DOT and CDC that we must address each situation on a case by case basis until such time that they have an all encompassing protocol.
 - Once the Special Permit has been granted, Stericycle will provide a current copy of the special permit to be maintained at the Generator's site as per DOT regulations.
 - Contact your Stericycle representative should you need additional supplies to properly package Category A waste.
 - We will develop additional guidance for contingency planning as more information becomes available.

Additional information sources:

CDC directly at CDC.gov <<u>http://CDC.gov</u>> <u>http://www.phmsa.dot.gov/portal/site/PHMSA/menuitem.6f23687cf7b00b0f22e4c6962d9c8789/?vgnextoid=</u> <u>4d1800e36b978410VgnVCM100000d2c97898RCRD&vgnextchannel=0f0b143389d8c010VgnVCM1000008049a</u> 8c0RCRD&vgnextfmt=print



BioRecovery Corp.

Ebola Virus Disease Waste Management Plan

<u>Purpose</u>

To describe the plan for managing regulated medical waste from a confirmed Ebola Virus Disease (EVD) case including:

- 1. Steps for safe handling and transport of regulated medical waste to designated storage area
- 2. Description of designated storage area
- 3. Contact information

<u>Scope</u>

This plan applies to:

• To-be-determined non-health care settings associated with confirmed EVD case

Regulated Medical Waste Storage Area Description:

• To be determined based on in-field site assessment

<u>Requirements</u>

- 1. FDA
- 2. U.S. Department of Transportation
- 3. NYSDOH
- 4. 10 NYCRR 70, section 70-2.1
- 5. Waste Transport and Processing Contractor

www.biorecovery.com

<u>Policy</u>

- All staff will have documented successful training and demonstrated competency in the proper use of required PPE prior to performing this task
- All staff will follow the required steps while performing this task
- Containment and Storage: regulated medical waste must be separated from other waste as soon as practicable at the point of generation prior to stored, treatment or disposal.
- Virocidal agent must be EPA-registered hospital disinfectant with a label claim for a non-enveloped virus that is recommended by the CDC for use as a disinfectant for the Ebola virus.
- Containment of regulated medical waste for handling, storage, and treatment shall be accomplished with a primary container for protection from the elements and limiting exposure to employees and the public. Each primary container holding regulated medical waste shall be:
 - Marked prominently with the universal warning sign or the word "biohazard"
 - Secured and situated so as to prevent leakage or preclude loss of contents during handling, storage and/or transport
- With the exception of sharps, the regulated waste primary container shall be a plastic bag, red in color, impervious to moisture, and of strength sufficient to resist ripping, tearing, or bursting under normal condition of use and handling.
- The primary container for discarded sharps shall be rigid, leak-resistant, puncture resistant and closable, and may serve as secondary container for purposes of transport.
- Transport of regulated medical waste shall be performed by using the buddy system (2 person)
 - Regulated waste shall not be moved by gravity alone such as trash chutes, or slides and shall not be compacted prior to treatment
- Response Plan: corrective action will be taken when notified that regulated medical waste, known or suspected to be untreated, has been found comingled with solid waste. Corrective action will be documented and reported to:

Sal Pain, Chief Safety Officer, (800) 556-0621

Definitions

- 1. EVD: Ebola Virus Disease
- 2. Covered Personnel: all employees of Bio Remediation who may be involved in the cleaning or disinfection of equipment or areas accessed by confirmed EVD cases
- 3. Storage: temporary containment of regulated medical waste in such a manner as not to constitute disposal of such waste

4. Transport: Shipment or conveyance of regulated medical waste in such a manner as not to constitute disposal of such waste.

NOTE: The Ebola Virus is classified as a Category A Infectious substance regulated by the U.S Department of Transportation's (DOT) Hazardous Materials Regulation's (HMR, 49 C.F.R., Parts 171-180). Any item transported offsite for disposal that is contaminated or suspected of being contaminated with a Category A infectious substance must be packaged and transported in accordance with the HMR. This includes bulk materials, sharps, linens, and used cleaning products (such as soiled absorbent pads or clothes, used PPE, and byproducts of cleaning contaminated or suspected of being contaminated with a Category A infectious substance.

Process

- 1. At a minimum, the following PPE shall be donned in accordance with applicable procedure:
 - Hood
 - N95 Respirator
 - Double nitrile examination gloves with extended cuffs
 - Impermeable gown
 - Impermeable leg covers including shoe covers
 - Impermeable apron when required
 - Face shield
 - Rubber boots when required
- Place all soft waste and sealed sharps containers into a primary waste bag (3.0ml ASTM tested)
- 3. Apply Sodium Hypochlorite (10%) or another approved virocidal disinfectant into the primary bag to sufficiently cover the surface of the materials contained within the bag. Securely tie the bag.
- 4. Treat the exterior surface of the primary bag, again with Sodium Hypochlorite (10%) or another approved virocidal disinfectant.
- 5. Place the primary bag into a secondary bag and tie the secondary bag!
- 6. Treat the exterior surface of the secondary bag with Sodium Hypochlorite (10%) or another approved virocidal disinfectant.
- 7. Place the secondary bag into a tertiary bag. Tie the secondary bag. Treat the tertiary bag with Sodium Hypochlorite (10%) or another approved virocidal disinfectant.
- 8. Place the triple bagged waste into a specialized 'Category A' package, provided by the disposal company or another qualified source.
- 9. Using the buddy system, place waste drum on designated cart/hand truck and transport to designated storage area using the freight elevators if available. Store the 'Category A' waste containers separate from any other 'Regulated Medical Waste' in a secure area, preferably isolated and with limited and controlled access.
- 10. Complete all necessary waste manifest forms
- 11. Contact Waste Transport Contractor immediately for planned pickup

Bio Recovery Contact Information:

Name_____ Number:_____

<u>References</u>

- 1. 10 NYCRR 70, section 70-2.1
- 2. U.S. Department of Transportation, Pipeline and Hazardous Materials Safety Administration Memo, dated 16 October, 2014
- 3. Stericycle, Category A Waste Handling & Packaging Procedures, Guidelines for a Suspected or Confirmed Case of Ebola Memo
- 4. 29CFR1910 Occupational Safety and Health Standards:
 - Sub-Part I Personal Protective Equipment
 - 1910.134 Respiratory protection
 - Sub-Part Z Toxic and Hazardous Substances
 - 1910.1030 Blood-borne Pathogens

Approved by:

Name/Signature	Title	Date
Name/Signature	Title	Date
Name/Signature	Title	Date
Reviewed and Readopted W	ithout Change	
Name/Signature	Title	Date
Removed from Service		
Reason: By:		

ICS-EnvOps-DOfficer

Subject:

Waste Hauler Scope

The following is in very simplistic language that can be elaborated and incorporated into your emergency procurement document. We just wanted to be clear about the over-packing and transloading steps. And we don't speak about truck de-con, chain of custody paperwork or all of the other requirements DOHMH will have. Underneath the draft scope is language from the USDOT nationwide permit for your reference:

Scope: Transport EV waste from homes and other non-health care settings to disposal facility in compliance with relevant regulatory requirements, including USDOT nationwide permit

1. Collection

Pick up EV residential de-con waste at any location in the City of New York as directed by DOHMH.

Provide appropriately sized Delivery Vehicle to designated location. Receive 30-gallon sealed drums from the emergency de-con contractor and immediately load them onto the Delivery Vehicle.

2. Over-packing

Deliver 30-gallon sealed drums to designated DOHMH 'Over-Packing' Facility. Once the Delivery Vehicle is completely inside the Over-Packing Facility, pack the 30-gallon drums into the 96-gallon sealed drums to continue the move for final disposal.

Sealed drums shall remain in the Delivery Vehicle for no more than 24 hours, by which time they must be transloaded.

3. Transload

Tractor Trailer Trucks destined for final disposal shall pull up to the Over-Packing Facility in such a manner that the 96-gallon drums can be moved from the Delivery Vehicle to the Tractor Trailer Truck directly (truck to truck).

4. Transport to final disposal site

USDOT definitions:

Transloading is when you transfer the material from one packaging to another for the purpose of continuing the move (see 49 CFR 171.8).

(H) The carrier may only transport the vehicle loaded with the material to a destination, for overpacking, treatment or disposal of such materials, without unnecessary delay from the time the carrier's motor vehicle leaves the site of origin. Storage incidental to transportation is authorized provided that all of the provisions of the special permit are met and the sealed packages are not opened or repackaged.

(Storage incidental to movement (also defined in § 171.8) is temporary storage when the material has not yet reached its end destination).

(M) Transportation may only be made to the nearest appropriate disposal facility available at the time the material is offered for transportation. Provided all of the provisions of the special permit are met, multiple shipper locations are authorized for one vehicle. Offloading of the vehicle is only authorized at the final destination, or at a secure facility when transloading is necessary for operational considerations.

From:	Ava Gay Blagrove
To:	situnit; Nancy Clark; ICS-EnvOps-DOfficer
Cc:	Christopher D"Andrea; Laurie Vanvynck; Mark Maiello
Subject:	Apt Waste Operation Summary
Date:	Thursday, October 30, 2014 8:58:01 AM

- Last night (10/29/14) at approximately 8:50pm the DCAS truck with the patient's apt waste was removed from the PHL garage by OEM.
- The truck was driven to the Bellevue loading dock by an OEM employee.
- At the loading dock, BioRecovery, the contractor who remediated the patient's apt, overpacked the 30 gallon drums that were on the DCAS truck into 95 gallon drums (provided by Stericycle) and placed them unto Stericycle's truck. In all 17 drums were placed unto Stericycle's truck.
- The DCAS truck and Bellevue's loading dock were deconned by BioRecovery. The operation was completed by approximately 11:45pm.



From: Ben Smith <<u>ben@buzzfeed.com</u>> Date: October 30, 2014 at 6:33:21 PM EDT To: "Walzak, Phil" <<u>PWalzak@cityhall.nyc.gov</u>>, "Katz, Rebecca" <<u>RKKatz@cityhall.nyc.gov</u>>, Andrew Kaczynski <<u>Andrew.Kaczynski@buzzfeed.com</u>> Subject: urgent — very strange apparent ebola-scam story

Hey guys,

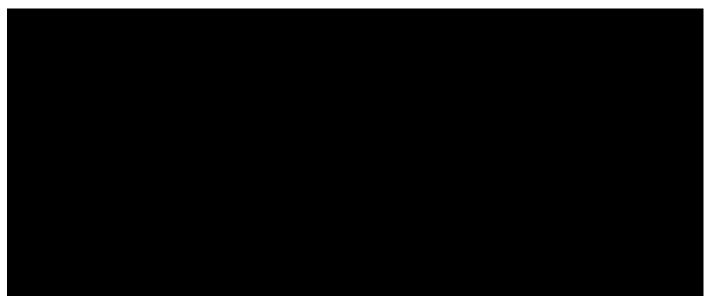
Andrew here is working on a very, very strange story about a man who has been presented in the press and in wire photos as a state or possibly city ebola cleanup contractor, and who has been photographed leaving Craig Spencer's apartment in a hazmat suit.

The guy, Salvatore Pane or Pain, has been in legal trouble over mortgage fraud among other things; the state says they have no idea who he is.

Andrew's phone number is 646 589 0478 — very grateful if someone over there could help him figure out what the hell is going on.

Ben

Ben Smith @buzzfeedben cell: 646 369 3687



From: Daniel Kass [mailto:dkass@health.nyc.gov]
Sent: Friday, October 31, 2014 5:17 PM
To: Sam Miller; Walzak, Phil; Williams, Dominic; Shorris, Anthony; Jean Weinberg; Casey, Daniel
Subject: RE: Question Sal Pane

Sal Pane participated in multi-agency coordinating calls for the management of the waste. Those calls included OEM, DOHMH, HHC and NYS DEC officials.

From: Daniel Kass
Sent: Friday, October 31, 2014 5:02 PM
To: Sam Miller; Walzak, Phil; Williams, Dominic; Shorris, Anthony; Jean Weinberg; Casey, Daniel
Subject: RE: Question Sal Pane

 our staff have been in many conversations with the staff of

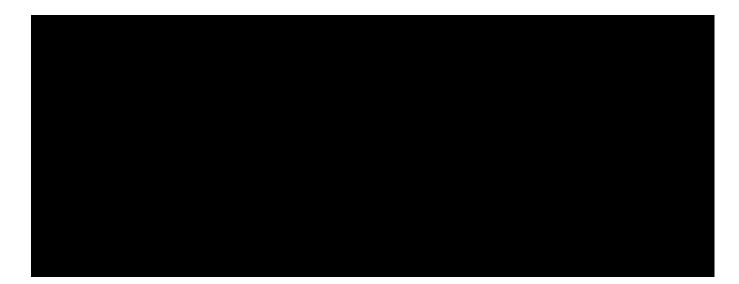
 BioRecover, Inc (I can't confirm whether it was Mr. Pane).

 those calls were about operational issues for the cleanup of the

 apartment, and for the management of the movement and transfer of waste to a long

 distance hauler.
 it didn't go higher than Asst.

 Commissioner level.



From: Andrew Kaczynski [mailto:andrew.kaczynski@buzzfeed.com] Sent: Friday, October 31, 2014 4:44 PM To: Walzak, Phil; Katz, Rebecca; Ben Smith Subject: Re: Question Sal Pane

Another question on this Phil. Pane claimed to have been on a conference call with "the highest level government officials." Cuomo's said people confirmed no one spoke to the guy.

So I'm trying to run down if the city had a conference call with him with top officials from the city.

Thanks,

Andrew

On Fri, Oct 31, 2014 at 3:41 PM, Andrew Kaczynski <<u>andrew.kaczynski@buzzfeed.com</u>> wrote: Hey Phil,

I was told by the AG's office they became aware of the situation on Monday notified you about Bio-Recovery.

What actions did the city take when you heard of this?

Thanks,

Andrew Kaczynski BuzzFeed Politics Reporter <u>216-299-8432</u> (Our cell service sucks, call my desk first) <u>646-589-0478</u> (Desk) @BuzzFeedAndrew

Andrew Kaczynski BuzzFeed Politics Reporter 216-299-8432 (Our cell service sucks, call my desk first) 646-589-0478 (Desk) @BuzzFeedAndrew

From:	Judi Soehren
То:	Nancy Clark
Cc:	Emiko Otsubo; Daniel Kass; Assunta Rozza; Oxiris Barbot; Sam Miller; Jean Weinberg; Thomas Merrill
Subject:	Re: Question from CHcleaning vendor
Date:	Thursday, October 30, 2014 8:27:52 PM

We did perform a VENDEX query and found that the firm was known to VENDEX, but did not have any Performance Evaluations on file. we found that OCME had used them in the past. OCME reported that BioRecovery's performance was satisfactory.

Judi Rich Soehren Agency Chief Contracting Officer NYC Dept. of Health & Mental Hygiene

On Oct 30, 2014, at 8:15 PM, "Nancy Clark" <<u>nclark@health.nyc.gov</u>> wrote:

Biorecovery only company able to respond so quickly.

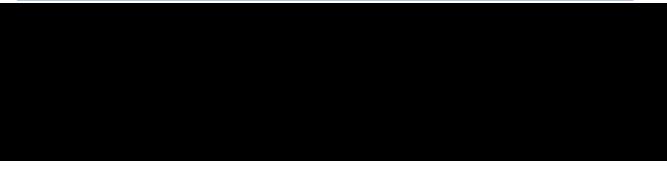
Sent from my BlackBerry 10 smartphone on the Verizon Wireless 4G LTE network.



From: Lestch, Corinne [mailto:clestch@nydailynews.com]
Sent: Saturday, November 01, 2014 12:21 PM
To: Adams, Marti
Cc: Walzak, Phil
Subject: RE: Update on patient at Bellevue Hospital

HI, who is handling clean up of places and homes visited by possible Ebola patients after Bio-Recovery contract has been put on hold? Are city contracts with Bio-Recovery being investigated? We are writing a story for tomorrow's paper on the company's contract with the city. Thanks.

Corinne



From: <u>HHCPRESS@nychhc.org</u> [<u>mailto:HHCPRESS@nychhc.org</u>] Sent: Saturday, November 01, 2014 11:00 AM To: HHCPRESS <<u>HHCPRESS@nychhc.org</u>> Subject: Update on patient at Bellevue Hospital



nyc.gov/hhc

For Immediate Release November 1, 2014; 10:45 am Contact: <u>HHCpress@nychhc.org</u>

Update on Patient at Bellevue Hospital

Statement from NYC Health and Hospitals Corporation

Based on our patient's clinical progress and response to treatment, today HHC is updating his condition to 'stable' from 'serious but stable'. The patient will remain in isolation and continue to receive full treatment.

##

Visit <u>www.nyc.gov/hhc</u>

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message. Thank you.

***********(NJ)

4 pm today

Duarte Geraldino

Correspondent Al Jazeera America $305 \ West \ 34^{th} \ St$, New York, NY 10001 (W) 347-607-3660 (M) 347-927-1091 Twitter: @DuarteReports



From: Megan Montalvo [mailto:mmontalvo@health.nyc gov] Sent: Monday, November 03, 2014 12:26 PM To: Duarte Geraldino; NYC Health Department Press Office Subject: RE: Media Request: Bio-Recovery Corp & Sal Pain

Hi Geraldino,

We're looking into this for you. What's your deadline?

Megan Montalvo | Deputy Press Secretary NYC Department of Health and Mental Hygiene mmontalvo@health.nyc gov | 347.396.4177



From: Duarte Geraldino [mailto:Duarte.Geraldino@aljazeera.net] Sent: Monday, November 03, 2014 12:02 PM To: NYC Health Department Press Office Subject: Media Request: Bio-Recovery Corp & Sal Pain

Al Jazeera America is looking in to the work of Bio-Recovery Corporation and Sal Pain. We understand the dept. of health suggested this company. We have a few questions:

How was the company vetted? 1.

- Which documents did Bio-Recovery submit to the city for review? Was his decontamination of Dr. Spencer's apartment reviewed? 2.
- 3 What were the results of that review?
- How was it conducted? 4.
- 5. 6. 7.
- How many jobs has Bio-Recovery done for the dept. of health? How much money was the company paid? Do you currently have a list of other companies that have been vetted in case there is another Ebola situation in NYC?

Duarte Geraldino Correspondent Al Jazeera America $305\ West\ 34^{th}\ St$, New York, NY 10001 (W) 347-607-3660 (M) 347-927-1091 Twitter: @DuarteReports



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Form: Andrew Kaczynski <u>andrew kaczynski@buzzfeed com</u>> Date: Fri, Nov 7, 2014 at 12 04 PM Subject: Ebola Clean Up Question To: <u>pressoffice@health.nyc_gov</u>

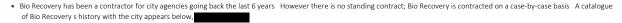
Hi,

I'm a journalist at BuzzFeed com and I'm trying to track down the proposal submitted by the company, Bio Recovery Corporation, to clean Dr Craig Spencer's apartment

I assume a proposal was submitted in response to a RFP and was hoping to get a copy of the paperwork they submitted

Thanks,

Andrew Kaczynski BuzzFeed Politics Reporter 216-299-8432 (Our cell service sucks, call my desk first) 646-589-0478 (Desk) @ BuzzFeedAndrew



- Intersection to work Bio Recovery does for city agencies has actually been very small. All of the contracts have been micro-purchases. The dollar amount of their work hasn t surpassed \$100,000, so Bio Recovery wasn t at the VENDEX reporting threshold. This means the company was not required to report company sofficers, so the people behind the company were never in the system. "In short, the firm only had basic business information in VENDEX since its prior City contracts were too small."
- The characterization that Bio Recovery is "leading the NYC Ebola clean up" is not accurate The NYC Dept of Health, in conjunction with the Mayor s Office and HHC, is leading the efforts around the City s Ebola response including cleanup efforts DOHMH contracts with vendors for tasks like cleanup, waste disposal, etc, and DOHMH oversees, supervises and verifies that work
- All of Bio Recovery s work at Dr Spencer s apartment was checked and approved by DOHMH officials and health experts after it was completed, and the cleanup work was approved There have been no allegations the work was subpar Even if there were to have been something missed, which there is no evidence of, the apartment was vacant for more than two days, as Dr Spencer s fiancée was at Bellevue from Thursday morning through Saturday night – much longer than the virus can survive on surfaces

BIO RECOVERY CITY WORK HISTORY

Spending Category:

Contracts Department: UTILITY - OTPS Expense Category: CONTRACTUAL SERVICES GENERAL Check Amount: \$2 68K TRANSACTION #4: SPENDING

Spending Category: Contracts Department: OFFICE OF CHIEF MEDICAL EXAMINER - OTPS Expense Category: OTHR SERV AND CHRGS-GENERAL

Agency:

Department of Environmental Protection Payee Name: BIO RECOVERY CORPORATION Contract ID: POD82620142030395 Issue Date: June 25. 2014

Agency:

Department of Health and Mental Hygiene Payee Name: BIO RECOVERY CORPORATION Contract ID: POCR1620142014341

Check Amount: \$2 51K TRANSACTION #5: SPENDING

Spending Category:

Contracts Department: OFFICE OF CHIEF MEDICAL EXAMINER - OTPS Expense Category: OTHR SERV AND CHRGS-GENERAL Check Amount: \$4 60K

Issue Date: September 29, 2014

Agency:

Department of Health and Mental Hygiene Payee Name: BIO RECOVERY CORPORATION Contract ID: POC81620142014341 Issue Date: September 29, 2014

			tblPri	meContractsofVe	ndor_subform	n				
DEPT_SH_NM	ContractID	EPIN	Description	Method	OriginalValue	CurrentValue	StartDate	EndDate	RegistrationDate	VEND_CUST_CD
ENV PROTECT	POD82620152003319	5003162	Cleanup Servies for Bodily	MICROPURCHASE	\$1,000 00	\$1,000 00	7/25/2014	6/30/2015	9/10/2014	V000006833
			Fluids 5003162	- UNDER \$20,000						
ENV PROTECT	POD82620142030395	4016026	4016026 - CONFIRMATORY HAZARD CLEANUP IN KINGSTON CONFIRMATORY ORDER - PAYMENT ONLY	MICROPURCHASE - UNDER \$20,000	\$2,680 00	\$0 00	5/27/2014	6/30/2014	5/27/2014	V000006833
HLTH & MNTL	POC81620142014341	14R0707AA	COFFIN REMOVAL WOOD/METAL FY2014 SA 14R0707AA	SMALL PURCHASE - WRITTEN	\$2,509 60	\$2,509 60	2/6/2014	6/30/2014	2/7/2014	V000006833
ENV PROTECT	POD82620122020836	2003115	Cleanup Services for blood & bodily fluids 2003115	MICROPURCHASE - UNDER \$20,000	\$3,000 00	\$0 00	11/3/2011	6/30/2012	11/15/2011	V000006833
DEPT SANIT	POD82720112017915	20112000082		SMALL PURCHASE - WRITTEN	\$650 00	\$0 00	10/14/2010	10/28/2010	10/14/2010	V000006833
ENV PROTECT	POD82620112011028	1003111	CLEANUP SERVICES FOR BLOOD & BODILY FLUIDS	MICROPURCHASE - UNDER \$20,000	\$5,000 00	\$5,000 00	9/1/2010	6/30/2011	9/2/2010	V000006833
ENV PROTECT	POD82620100003102	X003102826	CLEANUP SERVICES FOR BLOOD &	MICROPURCHASE - UNDER \$20,000	\$5,000 00	\$0 00	8/24/2009		8/24/2009	V000006833
ENV PROTECT	POD82620099003105	9003105826	DECREASE	MICROPURCHASE - UNDER \$20,000	\$0 00	\$0 00	11/18/2008	8/21/2010	11/18/2008	V000006833



From: Judi Soehren [mailto:jsoehren@health.nyc.gov]
Sent: Tuesday, November 11, 2014 1:17 PM
To: Sam Miller
Cc: Daniel Kass; Walzak, Phil; Hagelgans, Andrea; Adams, Marti; Camilo, Lisette; Megan Montalvo; Jean Weinberg; Nancy Clark
Subject: Re: Ebola Clean Up Question

We have no formal agreement with them. (No contract, no PO) This was an emergency purchase. With emergency purchases, a contract can be developed after the service period begins.

Judi Rich Soehren Agency Chief Contracting Officer NYC Dept. of Health & Mental Hygiene

From: Daniel Kass
Sent: Tuesday, November 11, 2014 1:07 PM
To: Walzak, Phil; Sam Miller; Hagelgans, Andrea; Adams, Marti; Camilo, Lisette; Megan Montalvo; Jean Weinberg; Nancy Clark
Subject: RE: Ebola Clean Up Question

. We hired them because they had the requisite skills in blood and body fluid assessment and cleanup, were available on very short notice, and had successfully completed a variety of small jobs for other city agencies



From: Andrew Kaczynski Sent: Tuesday, November 11, 2014 12:45 PM To: NYC Health Department Press Office Subject: Re: Ebola Clean Up Question

Just FYI, adding to my question if the city believed when they hired Bio Recovery if they were the company who cleaned up anthrax in 2001 and had experience in it.

My current lede is that the man at the center of the company has made numerous lies about the company's past work and right now the mayor's office and Department of Health aren't even acknowledging requests for comment.

Please get back to me.

Thanks,

Andrew

On Mon, Nov 10, 2014 at 11:21 AM, Andrew Kaczynski <<u>andrew.kaczynski@buzzfeed.com</u>> wrote:

> Following up on this to see if this was received. I should be getting

> a copy of a proposal submitted by Bio Recovery Corporation to Texas

> related to the Ebola clean up there so it would be great if NYC had a

> similar copy of a proposal.

> Thanks so much,

>

>

> Andrew

>

> ----- Forwarded message ------

> From: Andrew Kaczynski < andrew kaczynski@buzzfeed.com >

> Date: Fri, Nov 7, 2014 at 2:41 PM

> Subject: Fwd: Ebola Clean Up Question

> To: press.office@exec ny.gov

>

>

> Following up to see if this was received.

>

>

> ----- Forwarded message ------> From: Andrew Kaczynski < andrew kaczynski@buzzfeed.com > > Date: Fri, Nov 7, 2014 at 12:04 PM > Subject: Ebola Clean Up Question > To: pressoffice@health.nyc.gov \geq > > Hi, > > I'm a journalist at <u>BuzzFeed.com</u> and I'm trying to track down the > proposal submitted by the company, Bio Recovery Corporation, to clean > Dr. Craig Spencer's apartment. > > I assume a proposal was submitted in response to a RFP and was hoping > to get a copy of the paperwork they submitted. > > Thanks, > > ---> Andrew Kaczynski > BuzzFeed Politics Reporter > 216-299-8432 (Our cell service sucks, call my desk first) > 646-589-0478 (Desk) > @BuzzFeedAndrew >>> ---> Andrew Kaczynski > BuzzFeed Politics Reporter > 216-299-8432 (Our cell service sucks, call my desk first) > 646-589-0478 (Desk) > @BuzzFeedAndrew > > > ---> Andrew Kaczynski > BuzzFeed Politics Reporter > 216-299-8432 (Our cell service sucks, call my desk first) > 646-589-0478 (Desk) > @BuzzFeedAndrew

Andrew Kaczynski BuzzFeed Politics Reporter 216-299-8432 (Our cell service sucks, call my desk first) 646-589-0478 (Desk) @BuzzFeedAndrew

Sent from the New York City Department of Health & Mental Hygiene. This email and any files transmitted with it may contain confidential information and are intended solely for the use of the individual or entity to whom they are addressed. This footnote also confirms that this email message has been swept for the presence of computer viruses.



1863 Pond Rd. Suite 4 Ronkonkoma, NY 11779 Phone: (800) 556-0621 Fax: (888) 811-3912 info@biorecovery.com http://www.biorecovery.com

Insured: Dr. Spencer Ebola Cleanup

Claim Number:

Policy Number:

Type of Loss:

Date of Loss: Date Inspected: Date Received: Date Entered:

10/27/2014 4:29 PM

Price List: NYMN8X_OCT14 Restoration/Service/Remodel Estimate: 2014-10-27-1629



1863 Pond Rd. Suite 4 Ronkonkoma, NY 11779 Phone: (800) 556-0621 Fax: (888) 811-3912 info@biorecovery.com http://www.biorecovery.com

2014-10-27-1629

2014-10-27-1629

DESCRIPTION	QTY	REMOVE	REPLACE	TAX	TOTAL
42. Assessment cost	1.00 EA	0.00	250.00	0.00	250.00
33. Hazardous Waste - Supervisory/Admin- per hour	20.00 HR	0.00	215.00	0.00	4,300.00
OSHA certified foreman.					
32. Hazardous Waste - Supervisory/Admin- per hour	20.00 HR	0.00	215.00	0.00	4,300.00
OSHA certified foreman					
30. Hazardous Waste - Supervisory/Admin- per hour	19.50 HR	0.00	215.00	0.00	4,192.50
OSHA certified foreman					
34. Hazardous Waste - Supervisory/Admin- per hour	20.00 HR	0.00	195.00	0.00	3,900.00
OSHA certified safety officer					
35. Hazardous Waste Technician - per hour	20.00 HR	0.00	195.00	0.00	3,900.00
36. Hazardous Waste Technician - per hour	20.00 HR	0.00	195.00	0.00	3,900.00
37. Hazardous Waste Technician - per hour	17.50 HR	0.00	195.00	0.00	3,412.50
38. Hazardous Waste Technician - per hour	17.50 HR	0.00	195.00	0.00	3,412.50
 Hazardous Waste CommunicationsTechnician - per hour 	8.00 HR	0.00	95.00	0.00	760.00
9. Add for personal protective equipment (hazardous cleanup)	38.00 EA	0.00	100.00	0.00	3,800.00
Level C (high)					
14. Add for personal protective equipment (hazardous cleanup) - level A	4.00 UN	0.00	800.00	0.00	3,200.00
Level A					
15. Supply Air Respirator (SAR) - per day	4.00 DA	0.00	175.00	0.00	700.00
Level A					
40. Plastic bag - used for hazardous waste cleanup - Large	51.00 EA	0.00	3.54	0.00	180.54
16. Plastic container - hazardous waste cleanup - 40 gl	17.00 EA	0.00	125.12	0.00	2,127.04
23. Truck and tools - per day	1.00 EA	0.00	225.00	0.00	225.00
41. Equipment and cleaning agent	1.00 EA	0.00	990.00	0.00	990.00
014 10 27 1620				11/12/2014	

11/12/2014



1863 Pond Rd. Suite 4 Ronkonkoma, NY 11779 Phone: (800) 556-0621 Fax: (888) 811-3912 info@biorecovery.com http://www.biorecovery.com

CONTINUED - 2014-10-27-1629

DESCRIPTION	QTY	REMOVE	REPLACE	TAX	TOTAL
43. Dehumidifier (per 24 hour period) - Large - No monitoring	1.00 EA	0.00	200.00	0.00	200.00
44. Air mover axial fan (per 24 hour period) - No monitoring	3.00 EA	0.00	150.00	0.00	450.00
Below charges are from 2nd day of work	ζ.				
46. Hazardous Waste - Supervisory/Admin- per hour	5.50 HR	0.00	215.00	0.00	1,182.50
OSHA certified foreman.					
47. Hazardous Waste - Supervisory/Admin- per hour	5.50 HR	0.00	195.00	0.00	1,072.50
OSHA certified safety officer					
48. Hazardous Waste Technician - per hour	5.50 HR	0.00	195.00	0.00	1,072.50
49. Hazardous Waste Technician - per hour	5.50 HR	0.00	195.00	0.00	1,072.50
50. Add for personal protective equipment (hazardous cleanup)	5.00 EA	0.00	100.00	0.00	500.00
Level C (high)					
53. 10% Discount	1.00 EA	0.00	-4,910.00	0.00	-4,910.00
Total: 2014-10-27-1629				0.00	44,190.08
Line Item Totals: 2014-10-27-1629				0.00	44,190.08



1863 Pond Rd. Suite 4 Ronkonkoma, NY 11779 Phone: (800) 556-0621 Fax: (888) 811-3912 info@biorecovery.com http://www.biorecovery.com

Summary for Dwelling

Line Item Total

Replacement Cost Value Net Claim 44,190.08

\$44,190.08 \$44,190.08 -----Original Message-----

From: Andrew Kaczynski [<u>mailto:andrew.kaczynski@buzzfeed.com</u>] Sent: Friday, November 14, 2014 3:30 PM To: Walzak, Phil Cc: Ben Smith (ben@buzzfeed.com); Alex Campbell Subject: Re: Bio Recovery Question

Thanks I'll follow up with them on this end.

On Fri, Nov 14, 2014 at 3:26 PM, Walzak, Phil <PWalzak@cityhall.nyc.gov> wrote:

> im not sure

> a question for health, I think

>

> remember, city has been dealing w Bio-Recovery starting 6 yrs ago

>

> ----- Original Message-----

> From: Andrew Kaczynski [mailto:andrew.kaczynski@buzzfeed.com]

> Sent: Friday, November 14, 2014 3:07 PM

> To: Walzak, Phil

> Cc: Ben Smith (ben@buzzfeed.com); Alex Campbell

> Subject: Re: Bio Recovery Question

>

> Thanks Phil, who was the person within Bio Recovery that the city talked to? How do you come in contact with them?

>

> Thanks,

>

> Andrew

>

> On Fri, Nov 14, 2014 at 2:55 PM, Andrew Kaczynski <andrew.kaczynski@buzzfeed.com> wrote:

>> Thanks Phil, I think it will be pretty clear in the story what the

>> Department of Health has said and you won't have any surprises.

>>

>> If I have any other questions I'll follow up.

>>

>> Andrew

>>

>> On Fri, Nov 14, 2014 at 2:48 PM, Walzak, Phil <PWalzak@cityhall nyc.gov> wrote:

>>> Hey Andrew -

>>>

>>> So, a couple things here

>>>

>>> 1) As we told you during your initial inquiry, DOHMH fully inspected and reviewed Bio-Recovery's work at Dr. Spencer's apartment, and approved of the quality and success of the job in cleaning the unit. Additionally, as we also told you, DOHMH worked with and talked through the cleanup plan and operations before the work was done. Such preplanning and post-work review would occur with any vendor.

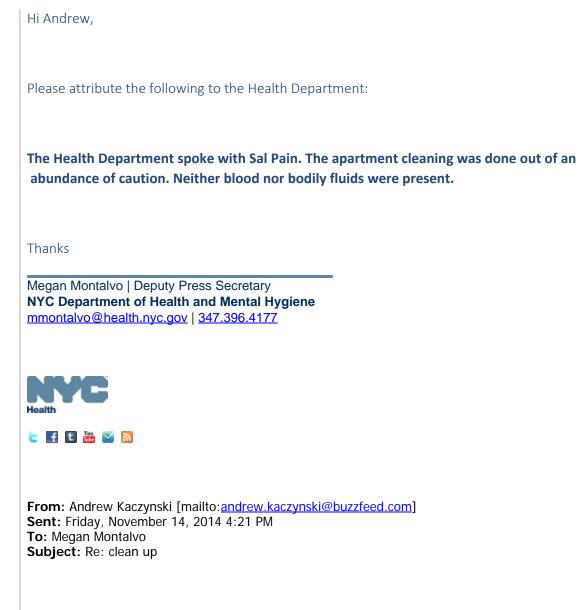
>>>

>>> I'm emphasizing this because it would be inaccurate to report that there were problems or deficiencies found with Bio-Recovery's cleanup work. Don't need wrong info about public health out there, that would be a disservice and not responsible. >>> >>> 2) The review I mentioned was regarding whether Bio-Recovery, based on the information learned about one of its employees, would be retained for future work. No determination about that has been made yet. >>> >>> Hope it helps, >>> >>> Thanks >>> >>> ----- Original Message----->>> From: Andrew Kaczynski [mailto:andrew.kaczynski@buzzfeed.com] >>> Sent: Friday, November 14, 2014 2:04 PM >>> To: Walzak, Phil >>> Subject: Bio Recovery Question >>> >>> Hey Phil, >>> >>> We're in the process of writing our story. One quick question on how the city's review of bio recovery is going. We have the Health Department in the article approving of bio recovery's work. >>> >>> We also have an infectious disease expert on record saying shoddy work could be dangerous, but wanted to ask how the city's review of Bio Recovery was going? >>> >>> It is still ongoing? >>> >>> Thanks >>> >>> -->>> Andrew Kaczynski >>> BuzzFeed Politics Reporter >>> 216-299-8432 (Our cell service sucks, call my desk first) >>> 646-589-0478 (Desk) >>> @BuzzFeedAndrew >> >> >> >> -->> Andrew Kaczynski >> BuzzFeed Politics Reporter >> 216-299-8432 (Our cell service sucks, call my desk first) >> 646-589-0478 (Desk) >> @BuzzFeedAndrew > > > > --> Andrew Kaczynski > BuzzFeed Politics Reporter > 216-299-8432 (Our cell service sucks, call my desk first) > 646-589-0478 (Desk) > @BuzzFeedAndrew

From:	Andrew Kaczynski
To:	<u>Megan Montalvo</u>
Cc:	NYC Health Department Press Office
Subject:	Re: clean up
Date:	Friday, November 14, 2014 5:08:16 PM
Attachments:	image001.png

Thanks Megan, I appreciate you helping me with this and will add to our story which like I said is in the process being written.

On Fri, Nov 14, 2014 at 5:02 PM, Megan Montalvo <<u>mmontalvo@health.nyc.gov</u>> wrote:



We're in the process of writing the story and contacting all the parties mentioned. I'd suspect it would be going live Monday morning or Sunday evening.

On Fri, Nov 14, 2014 at 4:16 PM, Megan Montalvo <<u>mmontalvo@health.nyc.gov</u>> wrote:

Andrew, can you please share your deadline for this with us?

Megan Montalvo | Deputy Press Secretary NYC Department of Health and Mental Hygiene mmontalvo@health.nyc.gov | 347.396.4177





From: Andrew Kaczynski [mailto:<u>andrew.kaczynski@buzzfeed.com]</u> Sent: Friday, November 14, 2014 3:30 PM To: Sam Miller; Megan Montalvo Subject: Re: clean up

Hey Sam and Megan,

I have another question on this, who was the person within Bio Recovery that the city talked to? How did you come in contact with them? City Hall sent me over here for that question.

Thanks

Andrew

On Tue, Nov 11, 2014 at 4:15 PM, Andrew Kaczynski <<u>andrew.kaczynski@buzzfeed.com</u>> wrote:

Thanks, I think this answers questions on my end but if I have any other questions I'll let you know.

On Tue, Nov 11, 2014 at 4:02 PM, Sam Miller <<u>smiller15@health.nyc.gov</u>> wrote:

We knew this from prior work they had done. Whether they had done work on anthrax or not wasn't a factor.

Sent from my BlackBerry 10 smartphone on the Verizon Wireless 4G LTE network.

From: Andrew Kaczynski

Sent: Tuesday, November 11, 2014 3:21 PM

To: Sam Miller

Cc: Megan Montalvo

Subject: Re: Fw: clean up

Thanks so much for getting back to me.

Just to follow up, how did the city know they had had the requisite skills in blood and body fluid assessment and cleanup?

Was there something submitted to the city or was this based off of past work? Was the city under the impression this was the company that cleaned up anthrax?

Thanks,

Andrew

On Tue, Nov 11, 2014 at 3:03 PM, Sam Miller <<u>smiller15@health.nyc.gov</u>> wrote:

Andrew:

See below.

Sent from my BlackBerry 10 smartphone on the Verizon Wireless 4G LTE network.

From:

Sent: Tuesday, November 11, 2014 2:59 PM

To: Sam Miller

Subject:

+City hired Bio-Recovery because they had the requisite skills in blood and body fluid assessment and cleanup

+There was no RFP because this was an emergency purchase given the need to move swiftly once news of Dr. Spencer's Ebola diagnosis broke

+We have already shared w Buzzfeed Bio-Recovery's history of work with the City – less than 10 jobs going back 6 years – all of which were micropurchases (under \$20,000, ranging from \$650-\$5000)

+Bio-Recovery is not doing any work for the City while this situation is reviewed.

+DOHMH worked w Bio-Recovery before the cleaning began, and checked the work after it was completed, and found the cleanup was successfully performed and executed.

Sent from the New York City Department of Health & Mental Hygiene. This email and any files transmitted with it may contain confidential information and are intended solely for the use of the individual or entity to whom they are addressed. This footnote also confirms that this email message has been swept for the presence of computer viruses.

--

Andrew Kaczynski

BuzzFeed Politics Reporter

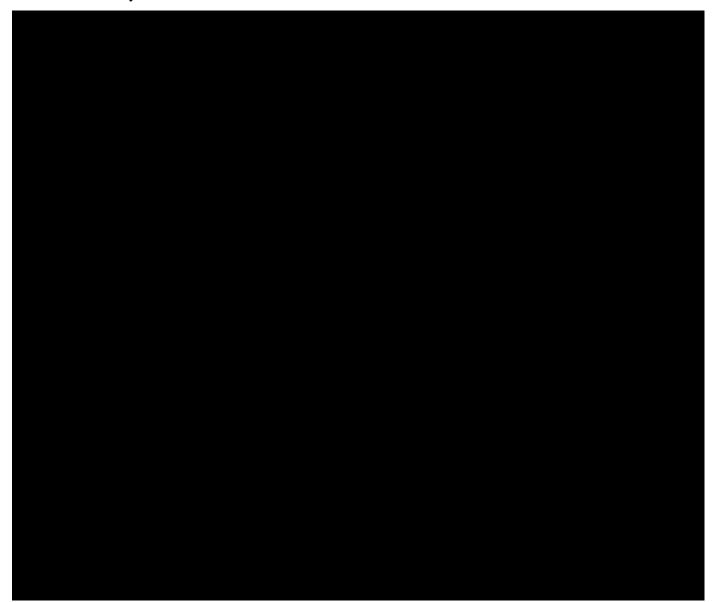
216-299-8432 (Our cell service sucks, call my desk first)

646-589-0478 (Desk)

From:Erika YanTo:Judi SoehrenSubject:Re: clean up/BuzzFeed InquiryDate:Friday, November 14, 2014 4:31:35 PM

Andrew and I spoke to Sal Pain.

Sent from my iPhone



From: Andrew Kaczynski [mailto:andrew.kaczynski@buzzfeed.com] Sent: Friday, November 14, 2014 3:30 PM To: Sam Miller; Megan Montalvo Subject: Re: clean up

Hey Sam and Megan,

I have another question on this, who was the person within Bio Recovery that the city talked to? How did you come in contact with them? City Hall sent me over here for that question.

Thanks

Andrew

On Tue, Nov 11, 2014 at 4:15 PM, Andrew Kaczynski <<u>andrew.kaczynski@buzzfeed.com</u>> wrote: Thanks, I think this answers questions on my end but if I have any other questions I'll let you know.

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Sent from my BlackBerry 10 smartphone on the Verizon Wireless 4G LTE network.

From: Andrew Kaczynski Sent: Tuesday, November 11, 2014 3:21 PM To: Sam Miller Cc: Megan Montalvo Subject: Re: Fw: clean up

Thanks so much for getting back to me.

Just to follow up, how did the city know they had had the requisite skills in blood and body fluid assessment and cleanup?

Was there something submitted to the city or was this based off of past work? Was the city under the impression this was the company that cleaned up anthrax?

Thanks,

Andrew

On Tue, Nov 11, 2014 at 3:03 PM, Sam Miller <<u>smiller15@health.nyc.gov</u>> wrote: Andrew:

See below.

Sent from my BlackBerry 10 smartphone on the Verizon Wireless 4G LTE network.

From: Sent: Tuesday, November 11, 2014 2:59 PM To: Sam Miller Subject:

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+There was no RFP because this was an emergency purchase given the need to move swiftly once news of Dr. Spencer's Ebola diagnosis broke

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--

Andrew Kaczynski BuzzFeed Politics Reporter <u>216-299-8432</u> (Our cell service sucks, call my desk first) <u>646-589-0478</u> (Desk) @BuzzFeedAndrew

Sent from the New York City Department of Health & Mental Hygiene. This email and any files transmitted with it may contain confidential information and are intended solely for the use of the individual or entity to whom they are addressed. This footnote also confirms that this email message has been swept for the presence of computer viruses. 8:30PM. Thanks Jean!

-----Original Message-----From: "Jean Weinberg" <jweinberg@health.nyc.gov> Sent: Saturday, November 15, 2014 6:20pm To: "desk@fox5ny.com" <desk@fox5ny.com> Cc: "NYC Health Department Press Office" <pressoffice@health.nyc.gov> Subject: Re: REQUEST FOR COMMENT - FOX 5 NEWS

Working on this. Deadline?

Sent from my iPhone

On Nov 15, 2014, at 5:20 PM, "desk@fox5ny.com" <desk@fox5ny.com> wrote:

Good Afternoon,

This is John Riley with Fox 5 News. We have seen reports about Sal Pane, the head of the Bio Recovery, the company who cleaned up the apartments of Dr. Craig Spencer and the bowling alley in Brooklyn where he bowled. The reports suggest that Mr. Pane and his company's state permit to haul medical waste expired in 2012. The reports have other accusations as well. Below is an article from Buzz Feed on the accusations against Mr. Pane. Is there a comment/statement from the Health Department on this? I can be reached at 212-452-3808. Thank you!

http://www.buzzfeed.com/alexcampbell/how-new-york-city-hired-a-conartist-to-clean-up-ebola

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Thank you so much for your speedy response.

Best, Magdalena

From: Jean Weinberg <jweinberg@health.nyc.gov>
Sent: Sunday, November 16, 2014 12:29 PM
To: Magdalena Doris
Cc: NYC Health Department Press Office; NEWS12BX; Manoj Shamdasani; Theresa Kentner; Brooke Rothenberg; Emily Pecot; Jason Wirchin
Subject: Re: News 12 the Bronx Media Request

Here is a response from the Health dept-

The Department of Health vigorously reviewed all of Bio-Recovery's cleanup work, and determined it was successfully performed, and that there were no public health risks. The City was not aware of the past history of this individual. This matter is now under review, and Bio-Recovery will not receive any future work until this review is complete.

Sent from my iPhone

On Nov 16, 2014, at 11:55 AM, Magdalena Doris <<u>MDORIS@news12.com</u>> wrote:

There have been some allegations made about Bio-Recovery Corp. and it's spokesperson, Sal Pane.

"BuzzFeed" is reporting that the company is unlicensed for biological waste clean up and that the business' NY State permit to haul medical waste expired in 2012. Bio-Recovery Corp was hired to clean up the Gutter Bowling alley in Brooklyn after a man infected with Ebola visited the alley.

Bio-Recovery Corp was also hired to clean the Harlem apartment of that same man, Dr.Craig Spencer.

The "BuzzFeed" article states that Bio-Recovery Corp. is licensed by the EPA to carry hazardous materials but was acting outside of that permit by cleaning the areas.

Is Bio-Recovery Corp. qualified to handle contaminated waste and clean public areas that may be infected with Ebola?

Are all of the Bio-Recovery Corp. permits that would be required to clean these areas *up to date* according to your records? Was there an investigation into these allegations? Will there be an investigation?

Here is a link to said "BuzzFeed" Article:

http://www.buzzfeed.com/alexcampbell/how-new-york-city-hired-a-con-artist-toclean-up-ebola

Please send us a statement <u>news12bx@news12.com</u> or call News 12 the Bronx at (718) 861 6800

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Thanks.

On Nov 17, 2014, at 8:19 AM, Jean Weinberg <<u>jweinberg@health.nyc.gov</u>> wrote:

Josh-

Sorry for delay. See below from Health Dept.

The Department of Health vigorously reviewed all of Bio-Recovery's cleanup work, and determined it was successfully performed, and that there were no public health risks. The City was not aware of the past history of this individual. This matter is now under review, and Bio-Recovery will not receive any future work until this review is complete.

Sent from my iPhone

On Nov 17, 2014, at 5:15 AM, Margolin, Josh <<u>Josh.Margolin@abc.com</u>> wrote:

Resending... Any info on this? Tnx

On Nov 16, 2014, at 10:35 PM, Margolin, Josh <<u>Josh.Margolin@abc.com</u>> wrote:

Sam, Jean:

GMA is doing a piece on Sal Pane and Bio-Recovery.

Have your people learned anything more about this guy's background? Are you still confident in the work that was done? Anything more the Dept can say in this?

Thanks,

Josh Margolin ABC NEWS 646-484-0469

Sent from the New York City Department of Health & Mental Hygiene. This email and any files transmitted with it may contain confidential information and are intended solely for the use of the individual or entity to whom they are addressed. This footnote also confirms that this email message has been swept for the presence of computer viruses.

Thank you Levi.

Cherno

On Mon, Nov 17, 2014 at 10:20 AM, Levi Fishman <<u>lfishman@health.nyc.gov</u>> wrote:

Hi Cherno,

Please attribute the following to the Health Department:

The Department of Health vigorously reviewed all of Bio-Recovery's cleanup work, and determined it was successfully performed, and that there were no public health risks.

Thank you,

Levi

Levi Fishman | Deputy Press Secretary Department of Health and Mental Hygiene pressoffice@health.nyc.gov | p:347.396.4177





From: Cherno Baba Jallow [mailto:<u>cbj2111@columbia.edu</u>] Sent: Monday, November 17, 2014 10:15 AM To: Levi Fishman Subject: Hello Fishman

Hello,

This is Cherno B. Jallow, a student reporter at the Columbia University Graduate School of Journalism. We did exchange emails before on a story I was doing.

I am reaching out to you again to help me get some comment on the Ebola clean-up process undertaken by the Bio-Recovery Corporation in Harlem and Brooklyn. A lot has been written about an employee of this biohazard company and who actually took part in the cleaning process.

Question: how satisfied is the department of health with the cleaning at the doctor's residence and the bowling alley? Could someone in the concerned unit within the dept. speak on this?

I am doing a story due tonight at 10 p.m.

Thanks,

Cherno

Sent from the New York City Department of Health & Mental Hygiene. This email and any files transmitted with it may contain confidential information and are intended solely for the use of the individual or entity to whom they are addressed. This footnote also confirms that this email message has been swept for the presence of computer viruses.

From:DiBlasio, NatalieTo:Megan MontalvoSubject:Re: USA TODAY; Bio-RecoveryDate:Tuesday, November 18, 2014 3:41:45 PMAttachments:image001.png

Ahh they sent me to you. Okay! Thank you! --Natalie DiBlasio USA TODAY — Breaking News @ndiblasio 703-854-8904 1575 Eye Street NW Suite 350 Washington, DC 20005

From: Megan Montalvo <<u>mmontalvo@health.nyc.gov</u>>
Date: Tuesday, November 18, 2014 at 3:37 PM
To: "DiBlasio, Natalie" <<u>ndiblasio@usatoday.com</u>>
Subject: RE: USA TODAY; Bio-Recovery

That's actually a question for the CDC. They oversee JFK as it relates to Ebola/public health.

Megan Montalvo | Deputy Press Secretary NYC Department of Health and Mental Hygiene mmontalvo@health.nyc.gov | 347.396.4177



From: DiBlasio, Natalie [mailto:ndiblasio@usatoday.com] Sent: Tuesday, November 18, 2014 3:32 PM To: Megan Montalvo Subject: Re: USA TODAY; Bio-Recovery

Hi Megan – thank you SO much for getting this back to me so quickly. I really appreciate it. I am also wondering – do you know if any planes had been quarantined at JFK for Ebola clean up? I can't find this information anywhere and a few agencies directed me to the health department.

-Natalie DiBlasio
USA TODAY — Breaking News
@ndiblasio
703-854-8904
1575 Eye Street NW Suite 350
Washington, DC 20005

Date: Tuesday, November 18, 2014 at 3:28 PM To: "DiBlasio, Natalie" <<u>ndiblasio@usatoday.com</u>>, NYC Health Department Press Office <<u>pressoffice@health.nyc.gov</u>>

Subject: RE: USA TODAY; Bio-Recovery

The Department of Health vigorously reviewed all of Bio-Recovery's cleanup work, and determined it was successfully performed, and that there were no public health risks. The City was not aware of the past history of this individual. This matter is now under review, and Bio-Recovery will not receive any future work until this review is complete.

- The city hired Bio-Recovery because they had the requisite skills in blood and body fluid assessment and cleanup
- There was no RFP because this was an emergency purchase given the need to move swiftly once news of Dr. Spencer's Ebola diagnosis broke
- We have already shared Bio-Recovery's history of work with the city less than 10 jobs going back 6 years all of which were micropurchases (under \$20,000, ranging from \$650-\$5000)
- Bio-Recovery is not doing any work for the city while this situation is reviewed.
- DOHMH worked w Bio-Recovery before the cleaning began, and checked the work after it was completed, and found the cleanup was successfully performed and executed.

Sent from the New York City Department of Health & Mental Hygiene. This email and any files transmitted with it may contain confidential information and are intended solely for the use of the individual or entity to whom they are addressed. This footnote also confirms that this email message has been swept for the presence of computer viruses.



Bio Recovery Corporation 1863 Pond Rd. Suite 4 Ronkonkoma, NY 11779

ROSTER FOR 10/27/2014

NAME	START TIME	END TIME
INSIDE WORK	ERS	
SAL PANE (FOREMAN)	9AM	5AM
PATRICK BORGES (FOREMAN)	9AM	5AM
OUTSIDE WOR	KERS	
ROY SPITZER (FOREMAN)	9AM	4:30AM
JOHN FUSCO (SAFETY OFFICER)	9AM	5AM
STEVE CLARNO	9AM	5AM
NICK KEYIAN	9AM	5AM
ROBERT WALTERS	9AM	2:30AM
ROB YOST	9AM	2:30AM
JUDY DESANTIAGO (COMMUNICATIONS)	6AM	2:30PM



Bio Recovery Corporation 1863 Pond Rd. Suite 4 Ronkonkoma, NY 11779

ROSTER FOR 10/29/2014

NAME	START TIME	END TIME
SAL PANE (FOREMAN)	8PM	1:30AM
JOHN FUSCO (SAFETY OFFICER)	8PM	1:30AM
STEVE CLARNO	8PM	1:30AM
ROY SPITZER	8PM	1:30AM

10/27/2014

*** HAZARDOUS WASTE SUPERVISORY/ADMIN. OSHA CERTIFIED FOREMAN - SALVATORE PANE*** *** HAZARDOUS WASTE SUPERVISORY/ADMIN. OSHA CERTIFIED FOREMAN – PATRICK BORGES*** *** HAZARDOUS WASTE SUPERVISORY/ADMIN. OSHA CERTIFIED FOREMAN – ROY SPITZER*** *** HAZARDOUS WASTE SUPERVISORY/ADMIN. OSHA CERTIFIED FOREMAN – JOHN FUSCO*** *** HAZARDOUS WASTE TECHNICIAN – STEVE CLARNO *** *** HAZARDOUS WASTE TECHNICIAN – ROBERT YOST***

*** HAZARDOUS WASTE TECHNICIAN – NOBERT 1031

*** HAZARDOUS WASTE TECHNICIAN – ROBERT WALTERS***

*** HAZARDOUS WASTE COMMUNICATIONS TECHNICIAN - JUDY DESANTIAGO ***

10/29/2014

*** HAZARDOUS WASTE SUPERVISORY/ADMIN. OSHA CERTIFIED FOREMAN - SALVATORE PANE*** *** HAZARDOUS WASTE SUPERVISORY/ADMIN. OSHA CERTIFIED FOREMAN – PATRICK BORGES*** *** HAZARDOUS WASTE TECHNICIAN – STEVE CLARNO *** *** HAZARDOUS WASTE TECHNICIAN – JOHN FUSCO***



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Salvatore Pane

HAS SUCCESSFULLY COMPLETED 8 HOURS OSHA COURSE ENTITLED

HAZWOPER REFRESHER COURSE

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HAZARDOUS WASTE OPERATION AND EMERGENCY RESPONSE IN ACCORDANCE WITH 29 CFR 1910.120 OSHA REGULATIONS

On this 6th day of November, 2014 Date(s) of course: 11/06/2014

Allen

Director: Tomasz Chabowski

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Completion Date: 11/06/2014 Expiration Date: 11/06/2015

Certificate #: 11062014HAZREF-01

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Environmental and Occupational Health and Safety Training Tel: (718) 349-3235 Fax: (718) 349-3238 44-01 21st Street, Long Island City, NY 11101

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HEREBY CERTIFIES THAT Patrick M. Borges HAS SUCCESSFULLY COMPLETED 40 HOURS OSHA COURSE ENTITLED

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OSHA HAZWOPER WORKER COURSE

IN ACCORDANCE WITH 29 CFR 1910.120 OSHA REGULATIONS

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HAZARDOUS WASTE OPERATION AND EMERGENCY RESPONSE HEALTH AND SAFETY

On this 5th Day of November, 2014

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Date(s) of Course: 11/1,2,3,4,5/2014

Protective Equipment Level: "B", "C", "D" Certificate #: 110520140SHA40-01 Expiration Date: 11/05/2015

Completion Date: 11/05/2014

Director: Tomasz Chabowski

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Environmental and Occupational Health and Safety Training Tel: (718) 349-3235 Fax: (718) 349-3238 44-01 21st Street, Long Island City, NY 11101

HEREBY CERTIFIES THAT

Roy V. Spitzer

HAS SUCCESSFULLY COMPLETED 40 HOURS OSHA COURSE ENTITLED

OSHA HAZWOPER WORKER COURSE

IN ACCORDANCE WITH 29 CFR 1910.120 OSHA REGULATIONS

HAZARDOUS WASTE OPERATION AND EMERGENCY RESPONSE HEALTH AND SAFETY

Completion Date: 11/05/2014 Expiration Date: 11/05/2015 Certificate #: 110520140SHA40-06 Protective Equipment Level: "B", "C", "D.

On this 5th Day of November, 2014 Date(s) of Course: 11/1,2,3,4,5/2014

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Director: Tomasz Chabowski

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Environmental and Occupational Health and Safety Training Tel: (718) 349-3235 Fax: (718) 349-3238 44-01 21st Street, Long Island City, NY 11101

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HEREBY CERTIFIES THAT John L. Fusco III HAS SUCCESSFULLY COMPLETED 40 HOURS OSHA COURSE ENTITLED

OSHA HAZWOPER WORKER COURSE

IN ACCORDANCE WITH 29 CFR 1910.120 OSHA REGULATIONS

HAZARDOUS WASTE OPERATION AND EMERGENCY RESPONSE HEALTH AND SAFETY

On this 5th Day of November, 2014 Date(s) of Course: 11/1,2,3,4,5/2014

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Director: Tomasz Chabowski

(OPPA)

Certificate #: 110520140SHA40-04 Completion Date: 11/05/2014 Expiration Date: 11/05/2015

Protective Equipment Level: "B", "C", "D"



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Environmental and Occupational Health and Safety Training Tel: (718) 349-3235 Fax: (718) 349-3238 44-01 21st Street, Long Island City, NY 11101

HEREBY CERTIFIES THAT Nicholas W. Keyian

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HAS SUCCESSFULLY COMPLETED 40 HOURS OSHA COURSE ENTITLED

OSHA HAZWOPER WORKER COURSE

IN ACCORDANCE WITH 29 CFR 1910.120 OSHA REGULATIONS HAZARDOUS WASTE OPERATION AND EMERGENCY RESPONSE HEALTH AND SAFETY

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Completion Date: 11/05/2014 Expiration Date: 11/05/2015 Certificate #: 110520140SH440-05

On this 5th Day of November, 2014 Date(s) of Course: 11/1,2,3,4,5/2014

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Director: Tomasz Chabowski

Protective Equipment Level: "B", "C", "D"



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Tel: (718) 349-3235 Fax: (718) 349-3238 44-01 21st Street, Long Island City, NY 11101

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HEREBY CERTIFIES THAT Robert A. Yost HAS SUCCESSFULLY COMPLETED 40 HOURS OSHA COURSE ENTITLED

OSHA HAZWOPER WORKER COURSE

HAZARDOUS WASTE OPERATION AND EMERGENCY RESPONSE HEALTH AND SAFETY

IN ACCORDANCE WITH 29 CFR 1910.120 OSHA REGULATIONS

Date(s) of Course: 11/1,2,3,4,5/2014

Director: Tomasz Chabowski

On this 5th Day of November, 2014

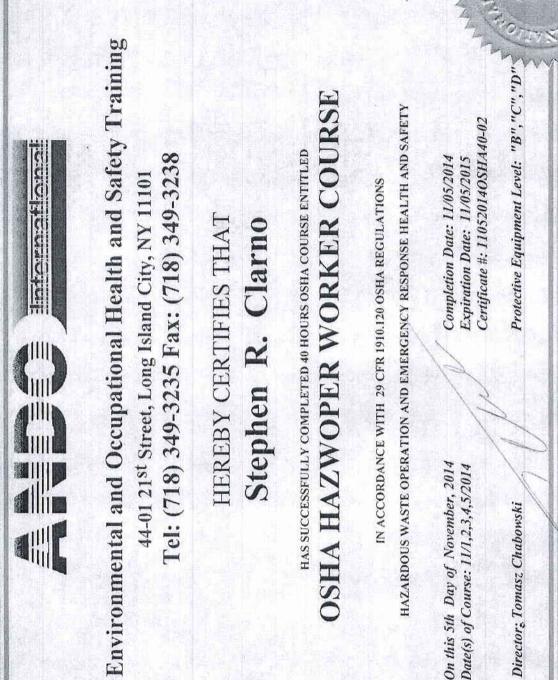
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Protective Equipment Level: "B", "C", "D"

Certificate #: 110520140SHA40-09

Completion Date: 11/05/2014 Expiration Date: 11/05/2015



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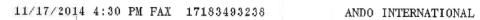
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Big Apple Occupational Safety Corp 505 Eighth Avenue, New York, New York 10018 212-564-7656 This is to certify that 212-564-7656 This is to certify that 512-564-7656 This is to certify that 512 Safetor Pane II 512 Safetor Pane Pane 113 Safetor Pane Pane 113 Safetor Pane 11	
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J. J. Keller's Training on Demand

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Certificate of Completion

Sal Pane

Has completed the online, interactive training course

HAZWOPER: Accidental Release Measures and Spill Cleanup Procedures

And achieved a score of 100 % on the Final Exam.

Vinmar Associates Company Name 1863 Pond Rd Ste 4 Company Address

19976

N.W.

Date

Ronkonkoma, NY 11779 City, State, Zip

PAR

Signature of Company Representative

11.22

Sal Pane

1/30/2012 Date of Completion

Note: It is the responsibility of the trainer and the trainer's company (named as Company, loft) to determine and verify a student's competency. Course completion certificates do not state or imply competency on any given subject, only that the student has completed the online training.



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Certificate of Completion

Sal Pane

Has completed the online, interactive training course

HAZWOPER: Confined Space Entry

And achieved a score of 90 % on the Final Exam.

Vinmar Associates Company Name 1863 Pond Rd Ste 4 Company Address

Ronkonkoma, NY 11779

AND STATES

City, State, Zip

Test

Sal Pane

1/31/2012 Date of Completion

Signature of Company Representative Date

Note: It is the responsibility of the trainer and the trainer's company (named as Company, left) to determine and verify a student's competency. Course completion certificates do not state or imply competency on any given subject, only that the student has completed the online training.



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Certificate of Completion

Roy Spitzer

Has completed the online, interactive training course

Hazmat Drivers: Training for Safe Transport

And achieved a score of 92 % on the Final Exam.

Vinmar Associates Company Name

NENTRY STATISTICS

1863 Pond Rd Ste 4 Company Address

Ronkonkoma, NY 11779

City, State, Zip

Past

Roy Spitzer

1/18/2013 Date of Completion

Signature of Company Representative Date

Note: It is the responsibility of the trainer and the trainer's company (named as Company, left) to determine and verify a student's competency. Course completion certificates do not state or imply competency on any given subject, only that the student has completed the online training.



V. S. WICZ

Certificate of Completion

Roy Spitzer

Has completed the online, interactive training course

HAZWOPER: Personal Protective Equipment

And achieved a score of 100 % on the Final Exam.

Vinmar Associates Company Name

ALL SALVING

Star Press

N.I.

Date

1863 Pond Rd Ste 4

Company Address

Ronkonkoma, NY 11779

Signature of Company Representative

City, State, Zip

Roy Spitzer

8/28/2012 Date of Completion

Note: It is the responsibility of the trainer and the trainer's company (named as Company, left) to determine and verify a student's competency, Course completion certificates do not state or imply competency on any give subject, only that the student has completed the online training.



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Certificate of Completion

Roy Spitzer

Has completed the online, interactive training course

Right-To-Know for Healthcare Facilities

And achieved a score of 100 % on the Final Exam.

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Vinmar Associates Company Name

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1863 Pond Rd Ste 4 Company Address

Ronkonkoma, NY 11779

City, State, Zip

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Note: It is the responsibility of the trainer and the trainer's company (named as Company, above) to determine and verify a student's competency. Course completion certificates do not state or imply competency on any given subject, only that the student has completed the online training,

17/10

1780

8/29/2012 Date of Completion

> J. J. Keller & Associates, Inc.* Since 1953

Hi Jean,

Thanks for responding. Sorry I wanted to respond sooner, but got thrown on something else.

Can you say how much the city paid for this specific incident? Also, was there any background check that went into the process – how did you decide on Bio-Recovery Corp as opposed to another company to do this job?

It seems like technically no laws were broken – is that what you guys are looking into? It doesn't seem like misrepresenting your experience to gain a contract is a crime, unless it is?

Thanks Chris Laible 917-301-1207 (mobile)

From: Jean Weinberg [mailto:jweinberg@health.nyc.gov]
Sent: Monday, November 17, 2014 5:48 PM
To: Laible, Chris
Subject: CBS News Request -- Sal Pane Statement/Interview

Hi Chris,

Following up on your inquiry to City Hall.

Please see below.

Thanks,

Jean

+City hired Bio-Recovery because they had the requisite skills in blood and body fluid assessment and cleanup

+There was no RFP because this was an emergency purchase given the need to move swiftly once news of Dr. Spencer's Ebola diagnosis broke

+We have already shared w Buzzfeed Bio-Recovery's history of work with the City – less than 10 jobs going back 6 years – all of which were micropurchases (under \$20,000, ranging from \$650-\$5000)

+Bio-Recovery is not doing any work for the City while this situation is reviewed.

+DOHMH worked w Bio-Recovery before the cleaning began, and checked the work after it was completed, and found the cleanup was successfully performed and executed.

Also, if needed, you can attribute this to the Health Department.

The Department of Health vigorously reviewed all of Bio-Recovery's cleanup work, and determined it was successfully performed, and that there were no public health risks. The City was not aware of the past history of this individual. This matter is now under review, and Bio-Recovery will not receive any future work until this review is complete.

Thanks, Jean

From: Laible, Chris [mailto:LaibleC@cbsnews.com]
Sent: Monday, November 17, 2014 3:27 PM
To: Mayor's Press Office
Subject: CBS News Request -- Sal Pane Statement/Interview

Hello,

I'm a producer with CBS This Morning. We are doing a story based off Buzzfeed's reporting on Sal Pane – the man who ran Bio-Recovery's operations into cleaning up Dr. Craig Spencer's apartment as well as The Gutter bowling alley – and the allegations that he is actually a fraud.

I wanted to speak with someone from either the Mayor's office or the Department of Health about the allegations raised in the Buzzfeed article. Specifically about the city's relationship with Sal and his company Bio-Recovery.

We are looking to do this piece on this as soon as possible, so please feel free to contact me as soon as possible.

Thank you.

Chris Laible Producer, CBS This Morning 917-301-1207 (mobile) LaibleC@cbsnews.com

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of the individual or entity to whom they are addressed. This footnote also confirms that this email message has been swept for the presence of computer viruses.

From:	Megan Montalvo
To:	DiBlasio, Natalie
Cc:	NYC Health Department Press Office
Subject:	RE: USA TODAY; Bio-Recovery
Date:	Wednesday, November 19, 2014 4:41:00 PM
Attachments:	image001.png

Hi Natalie,

On background, this was an emergency purchase. With emergency purchases, a contract can be developed after the service period begins.

Thanks,

Megan Montalvo | Deputy Press Secretary NYC Department of Health and Mental Hygiene mmontalvo@health.nyc.gov | 347.396.4177



From: DiBlasio, Natalie [mailto:ndiblasio@usatoday.com] Sent: Wednesday, November 19, 2014 3:41 PM To: Megan Montalvo Subject: Re: USA TODAY; Bio-Recovery

5 p.m. Today. If that's not possible, I can try to beg my editor to push it back .

Natalie DiBlasio USA TODAY — Breaking News @ndiblasio 703-854-8904 1575 Eye Street NW Suite 350 Washington, DC 20005

From: Megan Montalvo <<u>mmontalvo@health.nyc.gov</u>>
Date: Wednesday, November 19, 2014 at 3:39 PM
To: "DiBlasio, Natalie" <<u>ndiblasio@usatoday.com</u>>
Cc: NYC Health Department Press Office <<u>pressoffice@health.nyc.gov</u>>
Subject: RE: USA TODAY; Bio-Recovery

Hi Natalie,

We'll look into this for you. What's your deadline?

Megan Montalvo | Deputy Press Secretary NYC Department of Health and Mental Hygiene mmontalvo@health.nyc.gov | 347.396.4177



From: DiBlasio, Natalie [mailto:ndiblasio@usatoday.com] Sent: Wednesday, November 19, 2014 3:38 PM To: Megan Montalvo Subject: Re: USA TODAY; Bio-Recovery

Hi Megan,

Thank you so much for your time yesterday. I have a few follow up questions: Did Bio-Recovery Corp need a Regulated Medical Waste permit and EPA certification for the Ebola clean up jobs they were contracted to do in NYC? If so – did they have valid permits and certifications?

Thanks again,

-Natalie DiBlasio
USA TODAY — Breaking News
@ndiblasio
703-854-8904
1575 Eye Street NW Suite 350
Washington, DC 20005

From: Megan Montalvo <mmontalvo@health.nyc.gov>
Date: Tuesday, November 18, 2014 at 3:28 PM
To: "DiBlasio, Natalie" <ndiblasio@usatoday.com</pre>, NYC Health Department Press Office
cpressoffice@health.nyc.gov>
Subject: RE: USA TODAY; Bio-Recovery

Hi Natalie,

Please attribute the following to the Health Department:

The Department of Health vigorously reviewed all of Bio-Recovery's cleanup work, and determined it was successfully performed, and that there were no public health risks. The City was not aware of the past history of this individual. This matter is now under review, and Bio-Recovery will not receive any future work until this review is complete.

- The city hired Bio-Recovery because they had the requisite skills in blood and body fluid assessment and cleanup
- There was no RFP because this was an emergency purchase given the need to move swiftly once news of Dr. Spencer's Ebola diagnosis broke
- We have already shared Bio-Recovery's history of work with the city less than 10 jobs going back 6 years all of which were micropurchases (under \$20,000, ranging from \$650-

\$5000)

- Bio-Recovery is not doing any work for the city while this situation is reviewed.
- DOHMH worked w Bio-Recovery before the cleaning began, and checked the work after it was completed, and found the cleanup was successfully performed and executed.

Thanks

Megan Montalvo | Deputy Press Secretary NYC Department of Health and Mental Hygiene mmontalvo@health.nyc.gov | 347.396.4177



From: DiBlasio, Natalie [mailto:ndiblasio@usatoday.com] Sent: Tuesday, November 18, 2014 3:04 PM To: NYC Health Department Press Office Subject: USA TODAY; Bio-Recovery

Hi, my name is Natalie DiBlasio and I'm a reporter with USA TODAY working on a story about Bio-Recovery cleaning up after Ebola in New York City. I'm hoping to speak with someone about how companies are contracted in states of emergency and how it's different from the regular steps agencies take to contract companies. In particular I'm wondering if Bio-Recovery went through the same vetting process that other companies would have gone through before being hired to do the cleanup. If not, why not? And if so, was Sal Pane/Pain's history of being a felon/mortgage scammer an issue?

My deadline is today at 5:30 p.m. - if it needs to be pushed to accommodate your office – let me know and I will call my editor.

Thank you,

Natalie DiBlasio USA TODAY — Breaking News @ndiblasio 571-289-9946 1575 Eye Street NW Suite 350 Washington, DC 20005

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of the individual or entity to whom they are addressed. This footnote also confirms that this email message has been swept for the presence of computer viruses.

Jim- you'd need to submit a FOIL request for those docs. Thanks

From: Hoffer, Jim P. [mailto:Jim.P.Hoffer@abc.com] Sent: Friday, November 21, 2014 1:18 PM To: Jean Weinberg Subject: Re: WABC TV HOFFER

Thank you Jean for the quick response. How long do you estimate it will take to get the requested documents? Jim

Sent from my iPhone

On Nov 21, 2014, at 1:10 PM, "Jean Weinberg" <<u>iweinberg@health.nyc.gov</u>> wrote:

Hi Jim-

+City hired Bio-Recovery because they had the requisite skills in blood and body fluid assessment and cleanup

+There was no RFP because this was an emergency purchase given the need to move swiftly once news of Dr. Spencer's Ebola diagnosis broke

+Bio-Recovery is not doing any work for the City while this situation is reviewed. +DOHMH worked w Bio-Recovery before the cleaning began, and checked the work after it was completed, and found the cleanup was successfully performed and executed.

Also, if needed, you can attribute the below statement to the Health Department.

The Department of Health vigorously reviewed all of Bio-Recovery's cleanup work, and determined it was successfully performed with no public health risk. The City was not aware of the past history of this individual. This matter is under review, and Bio-Recovery will not receive any future work until this review is complete.

Thanks

From: Hoffer, Jim P. [mailto:Jim.P.Hoffer@abc.com] Sent: Friday, November 21, 2014 12:53 PM To: NYC Health Department Press Office Subject: WABC TV HOFFER

11/21/2014

I had a few questions about the hiring of Bio-Recovery for the cleanup of Dr. Spencer's apartment . Can you explain the process by which Bio-Recovery was chosen for the job? I know since time was crucial that DOH did not go through the normal bidding process, so what were the steps taken in this emergency case?

Also, can you please provide me with any contract, letters of agreement, and/or any paperwork associated with the hiring of Bio-Recovery.

Any questions about this request, please call me directly at 917-260-7684 or e-mail me.

Sincerely,

Jim Hoffer WABC TV Channel 7 Eyewitness News

Sent from the New York City Department of Health & Mental Hygiene. This email and any files transmitted with it may contain confidential information and are intended solely for the use of the individual or entity to whom they are addressed. This footnote also confirms that this email message has been swept for the presence of computer viruses.

From:	Hartocollis, Anemona
To:	Jean Weinberg
Subject:	ebola cost
Date:	Friday, December 05, 2014 3:21:56 PM

Jean: My editors have asked me to find out how much money New York City has spent treating Ebola, and to break it down by line item, for instance, HHC, Fire Department, Health Department, etc, and further if possible, by categories like, care of Dr. Spencer, cleanup of places he lived or visited, active monitoring, etc.

As a starting place, is there a memorandum that has been sent to the federal government to support the city's reimbursement request?

I'm assuming that when they asked me this, they were influenced by today's Bloomberg report, though it was not mentioned: http://www.bloomberg.com/news/2014-12-04/even-the-ebola-virus-may-be-cheaper-in-texas-

than-in-new-york.html

thanks anemona

Anemona Hartocollis | **The New York Times** 620 Eighth Avenue | New York, NY 10018 Office 212.556.1279 | Mobile 917.929.4091| Twitter @anemonanyc | Email <u>anemona@nytimes.com</u>



1863 Pond Rd. Suite 4 Ronkonkoma, NY 11779 Phone: (800) 556-0621 Fax: (888) 811-3912 info@biorecovery.com http://www.biorecovery.com

Property: 546 West 147th St 5th Floor Manhattan, NY 10031

Claim Number:		Policy Number:	Type of Loss:
Date of Loss: Date Inspected:		Date Received: Date Entered:	10/27/2014 4:29 PM
Estimate:	2014-12-05-1245		



1863 Pond Rd. Suite 4 Ronkonkoma, NY 11779 Phone: (800) 556-0621 Fax: (888) 811-3912 info@biorecovery.com http://www.biorecovery.com

2014-12-05-1245

2014-12-05-1245

DESCRIPTION	QTY	REMOVE	REPLACE	TAX	TOTAL
27. Assessment cost	1.00 EA	0.00	250.00	0.00	250.00
28. Hazardous Waste - Supervisory/Admin- per hour	12.00 HR	0.00	215.00	0.00	2,580.00
OSHA certified foreman.					
30. Hazardous Waste - Supervisory/Admin- per hour	12.00 HR	0.00	215.00	0.00	2,580.00
OSHA certified foreman					
31. Hazardous Waste - Supervisory/Admin- per hour	15.00 HR	0.00	215.00	0.00	3,225.00
OSHA certified foreman					
32. Hazardous Waste - Supervisory/Admin- per hour	12.00 HR	0.00	195.00	0.00	2,340.00
OSHA certified safety officer					
33. Hazardous Waste Technician - per hour	12.00 HR	0.00	195.00	0.00	2,340.00
34. Hazardous Waste Technician - per hour	15.00 HR	0.00	195.00	0.00	2,925.00
35. Hazardous Waste Technician - per hour	15.00 HR	0.00	195.00	0.00	2,925.00
36. Hazardous Waste Technician - per hour	15.00 HR	0.00	195.00	0.00	2,925.00
 Hazardous Waste CommunicationsTechnician - per hour 	8.00 HR	0.00	90.00	0.00	720.00
38. Add for personal protective equipment (hazardous cleanup)	26.00 EA	0.00	100.00	0.00	2,600.00
Level C (high)					
39. Add for personal protectiveequipment (hazardous cleanup) - levelA	2.00 UN	0.00	800.00	0.00	1,600.00
Level A					
40. Supply Air Respirator (SAR) - per day	2.00 DA	0.00	175.00	0.00	350.00
Level A					
41. Plastic bag - used for hazardous waste cleanup - Large	51.00 EA	0.00	3.54	0.00	180.54
42. Plastic container - hazardous waste cleanup - 40 gl	17.00 EA	0.00	125.12	0.00	2,127.04
43. Truck and tools - per day	1.00 EA	0.00	225.00	0.00	225.00
44. Equipment and cleaning agent	1.00 EA	0.00	990.00	0.00	990.00
014-12-05-1245				12/8/2014	Page: 2



1863 Pond Rd. Suite 4 Ronkonkoma, NY 11779 Phone: (800) 556-0621 Fax: (888) 811-3912 info@biorecovery.com http://www.biorecovery.com

CONTINUED - 2014-12-05-1245

DESCRIPTION	QTY	REMOVE	REPLACE	TAX	TOTAL
45. Dehumidifier (per 24 hour period) - Large - No monitoring	1.00 EA	0.00	200.00	0.00	200.00
46. Air mover axial fan (per 24 hour period) - No monitoring	3.00 EA	0.00	150.00	0.00	450.00
Below charges are from work performed	d on 10/29/2014.				
47. Hazardous Waste - Supervisory/Admin- per hour	4.00 HR	0.00	215.00	0.00	860.00
OSHA certified foreman.					
48. Hazardous Waste - Supervisory/Admin- per hour	4.00 HR	0.00	195.00	0.00	780.00
OSHA certified safety officer					
49. Hazardous Waste Technician - per hour	4.00 HR	0.00	195.00	0.00	780.00
50. Hazardous Waste Technician - per hour	4.00 HR	0.00	195.00	0.00	780.00
51. Add for personal protective equipment (hazardous cleanup)	5.00 EA	0.00	100.00	0.00	500.00
Level C (high)					
52. 10% Discount	1.00 EA	0.00	-3,523.25	0.00	-3,523.25
Total: 2014-12-05-1245				0.00	31,709.33
Line Item Totals: 2014-12-05-1245				0.00	31,709.33



1863 Pond Rd. Suite 4 Ronkonkoma, NY 11779 Phone: (800) 556-0621 Fax: (888) 811-3912 info@biorecovery.com http://www.biorecovery.com

Summary for Dwelling

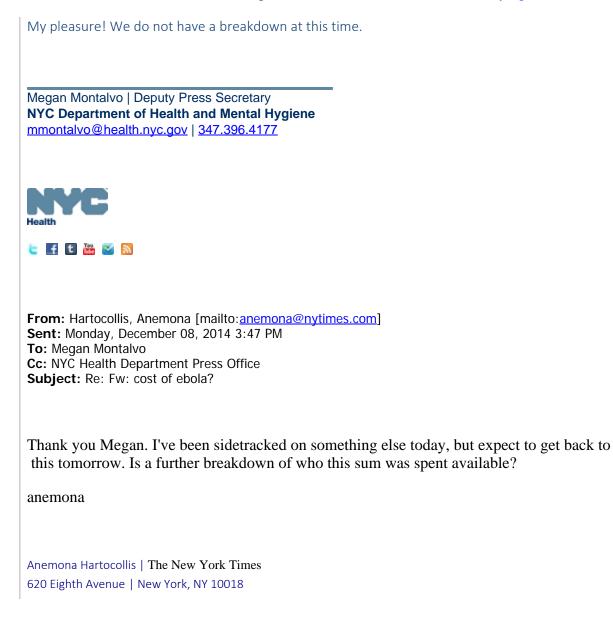
Line Item Total	31,709.33
Replacement Cost Value	\$31,709.33
Net Claim	\$31,709.33

From:	Hartocollis, Anemona
То:	<u>Megan Montalvo</u>
Subject:	Re: Fw: cost of ebola?
Date:	Monday, December 08, 2014 4:39:49 PM
Attachments:	image001.png

OK.

Anemona Hartocollis | **The New York Times** 620 Eighth Avenue | New York, NY 10018 Office 212.556.1279 | Mobile 917.929.4091| Twitter @anemonanyc | Email <u>anemona@nytimes.com</u>

On Mon, Dec 8, 2014 at 4:18 PM, Megan Montalvo <<u>mmontalvo@health.nyc.gov</u>> wrote:



On Mon, Dec 8, 2014 at 3:41 PM, Megan Montalvo <<u>mmontalvo@health.nyc.gov</u>> wrote:

Anemona,

Please attribute the following to the Health Department:

New York City's preparation and continued response to the Ebola epidemic has been a multiagency effort that has cost the City more than \$20 million to date. With the ongoing Ebola outbreak in West Africa, we expect our costs to rise, and we will seek additional federal assistance to help the City cover immediate and long-term expenses.

Best,

Megan

Sent from my BlackBerry 10 smartphone on the Verizon Wireless 4G LTE network.

From: Megan Montalvo < mmontalvo@health.nyc.gov >

Sent: Friday, December 5, 2014 3:30 PM

To: Hartocollis, Anemona; NYC Health Department Press Office

Cc: Jean Weinberg; Anemona Hartocollis

Subject: Re: cost of ebola?

Hi Anemona,

We'll look into this for you.

Sent from my BlackBerry 10 smartphone on the Verizon Wireless 4G LTE network.

From: Hartocollis, Anemona

Sent: Friday, December 5, 2014 3:29 PM

To: NYC Health Department Press Office

Cc: Jean Weinberg; Anemona Hartocollis

Subject: cost of ebola?

I need to know how much money New York City has spent treating Ebola, and to break it down by line item, for instance, HHC, Fire Department, Health Department, etc, and further if possible, by categories like, care of Dr. Spencer, cleanup of places he lived or visited, active monitoring, purchase of special equipment, salaries, overtime, etc.

Also, is there a memorandum that has been sent to the federal government to support the city's reimbursement request?

(Bloomberg says city has asked for \$21 million.)

http://www.bloomberg.com/news/2014-12-04/even-the-ebola-virus-may-be-cheaper-in-texas-than-in-new-york html

Deadline Monday.

Anemona Hartocollis | **The New York Times** 620 Eighth Avenue | New York, NY 10018 Office <u>212.556.1279</u> | Mobile <u>917.929.4091</u>| Twitter @anemonanyc | Email <u>anemona@nytimes.com</u>

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Maytal, thank you very much for your informative and timely response. I know how buys you have all been around this issue and I really appreciate your taking the time to respond. We are in the process of trying to generate some guidelines our staff could use to oversee an Ebola cleanup contractor and I would be happy to share that with you once we have it completed. Just let me know if you're interested.

Again, thank you for all of your help and I will touch base if we have any further questions.

Patrick Fosdahl, MS, REHS Environmental Health Branch - Air, Noise and Radiation Population Health Division San Francisco Department of Public Health 1390 Market Street, Ste 210 San Francisco, CA 94102 phone: 415-252-3904

From: Maytal Rand [mailto:mrand1@health.nyc.gov]
Sent: Wednesday, December 10, 2014 10:51 AM
To: Fosdahl, Patrick (DPH)
Cc: Andriana Azarias; Christopher D'Andrea; Amita Toprani; Andrew Faciano; Kathryn Lane
Subject: RE: Ebola Cleanup

Hi Patrick,

Your question was trickled down to me as we were onsite with the contractors for the cleanup. In response to your questions:

1. How much oversight did NYC have of the contractors doing the work? Was the cleanup contractor asked to follow some prescribed procedures or did they just follow their own internal SOPs?

We held a meeting with the contractors prior to deployment to the site to ensure that, while they could follow most of their procedures, we had the final say. The contractor had their own proposed SOPs for responding to the incident, but we were able to come to an agreement for the protocols based on CDC and State guidelines, including using an EPA approved disinfectants for the cleanup. We were onsite with the contractors from their arrival on the scene up until the last drum had been loaded and the contractors had departed. A member of our team was in constant communication with contractor team members, both in the space and regarding administrative issues. To the extent possible we had oversight of the scene, save certain issues that arose inside the cleanup area as we did not suit up to enter.

- 2. Who determined how clean was clean and how was this decided?
- The contractors entered the area of concern to conduct an initial assessment to verify the scope of work before any clean up procedures began. The contractors photo-documented the area and reported back to us outside the warm zone. Once the scope was agreed upon, cleanup activities began. The contractors were in constant communication with our staff as issues and/or questions arose. Largely, the contractors followed our guidelines based on CDC and State recommendations. We accompanied the contractor upon completion to perform a clearance inspection of the affected space. The space was cleared by visual observation (e.g. were suspect items disposed of, no signs of body fluids)
- Did you encounter any liability issues around the cleanup activities and the removal and possible destruction of private property?
 Yes, unfortunately, due to the nature of the disinfectant used (i.e., dilute bleach solution), there were some personal items that had to be discarded beyond the initial scope as they suffered some chemical damage.
- 4. Are there any recommendations or things you learned during this cleanup that you would do differently for the next cleanup? Yes. While we have not yet worked out all of the details, we plan on entering the apartment or area of concern to perform an assessment. If we do not encounter body fluids in a space there will be no further action taken by the City. Public information issues are being worked out as well for the tenants, building personnel, and media. Easily, the largest hurdle we encountered, that we are still working through, revolves around waste management issues. Where the waste can be stored until transport, who can transport it and how, and where the final resting place for the waste will be (assuming that we will be separating the waste streams that we can designate and classify onsite), are still being hashed out. We have a standing plan for the moment should it be needed, but we are working on a more ideal solution.

I hope that helps with some of your initial questions. We would be happy to set up a call if you have any additional questions or want further details.

All the best,

Maytal

Maytal Rand, MPH Office of Emergency Planning and Operations Division of Environmental Health 125 Worth Street, Rm. 630 New York, NY 10013 Office: (646) 632-6079



From: Andriana Azarias Sent: Wednesday, December 10, 2014 12:06 PM To: Maytal Rand Subject: Re: Ebola Cleanup

Hi Maytal, Would you mind checking in with either Chris or Amita over this request from SF DPH over waste cleanup. Let me know if you think you might be able to gather the answers to the questions below and be able to get back to him? I am really swamped right now, I reached out to Chris and Amita over following up with him but didn't hear back from them. Thanks for any help you can give.

From: Kathryn Lane Sent: Monday, December 08, 2014 2:58 PM To: Fosdahl, Patrick (DPH) Cc: Andriana Azarias Subject: RE: Ebola Cleanup

Hi Patrick,

I'm copying Andriana Azarias, our senior policy advisor, who was much more involved in the Ebola environmental response. She should be able to either help answer your questions or refer you to the right person.

Thanks for reaching out and good luck with the guidelines!

Best, Katie

Katie Lane, MPH Bureau of Environmental Surveillance and Policy NYC Department of Health and Mental Hygiene <u>klane1@health.nyc.gov</u> (646) 632-6533

From: Fosdahl, Patrick (DPH) [mailto:Patrick.Fosdahl@sfdph.org] Sent: Monday, December 08, 2014 2:42 PM To: Kathryn Lane Subject: Ebola Cleanup

Katie, I work with Richard Lee, Director Environmental Health, here in San Francisco. Richard participated in the "Big Cities" conference call last week and he suggested I touch base with you regarding some questions related to cleanup following an Ebola incident. We are in the process of

drafting some guidelines for overseeing an Ebola Cleanup Contractor and it would be helpful to get some input from an agency which was actually involved in an Ebola cleanup operation. I know your group must be receiving a ton of inquiries so I will try to keep my questions short. I am not sure if you're the best person to answers these so please feel free to pass it on if there is a better contact.

- 1. How much oversight did NYC have of the contractors doing the work? Was the cleanup contractor asked to follow some prescribed procedures or did they just follow their own internal SOPs?
- 2. Who determined how clean was clean and how was this decided?
- 3. Did you encounter any liability issues around the cleanup activities and the removal and possible destruction of private property?
- 4. Are there any recommendations or things you learned during this cleanup that you would do differently for the next cleanup?

I know how busy you must be but I would appreciate any input you could provide. Thank you -

Patrick Fosdahl, MS, REHS Environmental Health Branch - Air, Noise and Radiation Population Health Division San Francisco Department of Public Health 1390 Market Street, Ste 210 San Francisco, CA 94102 phone: 415-252-3904

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