

Cal/OSHA Interim COVID-19 Guidelines



California's Division of Occupational Safety and Health (Cal/OSHA) notified California employers of its new interim guidelines for general industry employers on the 2019 Coronavirus Disease (COVID-19). Cal/OSHA also issued updated guidance for healthcare facilities about the efficient use of respirator supplies.

COVID-19, first identified in Wuhan City, China in December 2019, is an airborne infectious disease covered by Cal/OSHA's Aerosol Transmissible Diseases (ATD) standard.

The ATD Standard Requires Employers to Protect Workers at Healthcare Facilities & Other Services Operations:

- Hospitals and long-term health care facilities, as well as, in clinics, home health care, hospices, medical offices, medical outreach services, medical transport and emergency medical services, outpatient medical facilities, and skilled nursing facilities.
- Diagnostic laboratories, police services, and public health services that are reasonably anticipated to expose employees to an aerosol transmissible disease.
- Correctional facilities, drug treatment programs, and homeless shelters.
- Any other locations when Cal/OSHA informs employers in writing that they must comply with the ATD Standard.

To ensure there are adequate supplies of disposable N95 filtering facepiece respirators, Cal/OSHA instructed health care facilities to plan to stockpile respirators and conservatively utilize their supplies while protecting their employees from exposure.

Healthcare Facilities Take These Steps

- Using elastomeric half-mask, full-facepiece, and powered air-purifying respirators (PAPRs) that can be disinfected and re-used multiple times.
- Allowing extended use of a respirator where a health care worker keeps the same respirator on during encounters with several patients, if patients all have the same condition, without removing the respirator between patient encounters.
- Reusing a respirator where a health care worker uses the same respirator for multiple encounters with either the same or different patients but removes and safely stores the respirator after each encounter.
- Using certain N95 respirators—listed by the National Institute for Occupational Safety and Health as providing the expected level of protection to the user—past their expiration date.

Cal/OSHA urged employers not covered by the ATD standard to follow recommendations from the U.S. Centers for Disease Control and Prevention (CDC). CDC's Interim Guidance for Businesses and Employers advises all businesses and employers to encourage cough and sneeze etiquette, hand hygiene, and for sick employees to stay home. Employers also should provide routine cleaning services and disposable wipes so employees can wipe down commonly used surfaces.

CDC guidelines also recommend creating an infectious disease outbreak response plan to be followed in the event of an outbreak, Cal/OSHA reiterated. Response plans could include allowing flexible work arrangements, such a telecommuting or flexible work hours to increase physical distance among employees; using other methods of minimizing exposure among employees, or between employees and the public; and postponing or canceling large work-related meetings or events.

While the ATD standard only applies to certain employers, all employers in the state must comply with other workplace safety and health standards, including the injury and illness prevention program, personal protective equipment (PPE), and washing facilities standards, as well as the control of harmful exposures regulation.

State control of harmful exposures regulation requires employers to protect employees from inhalation exposures that can result in injury, illness, disease, impairment or loss of function. COVID-19 is considered a harmful exposure if there is an increased risk of infection at the workplace. Employers then must provide engineering controls, administrative controls, and respiratory protection, if necessary, to protect employees.

Healthcare Worker Protections

The ATD standard requires covered workplaces to establish and implement a written ATD exposure control plan and procedures; engineering and work practices controls; PPE; training; and medical services, including vaccination, infection determination, and treatment. Some employers also must meet laboratory operations requirements.

A Written ATD Exposure Control Plan Applicable to Protecting Workers from COVID-19 Requires:

- A description of the source control measures to be implemented at the worksite—such as a procedure, engineering control, device, or material that minimizes the spread of airborne particles from a possibly infected individual—and methods of informing people entering the worksite of the source control measures.
- Procedures to identify, temporarily isolate, and move suspected cases to airborne infection isolation rooms or areas—procedures that must include methods to limit employee exposure to patients when they are not in an airborne infection isolation room or area.
- Procedures to communicate with employees and other employers regarding the suspected or confirmed infectious disease status of persons to whom employees are exposed in the course of their duties.
- Procedures the employer will use to ensure that there is an adequate supply of PPE and other equipment necessary to minimize employee exposure to airborne infectious diseases, both in normal operations and foreseeable emergencies.
- Procedures, including work practices, decontamination facilities, and appropriate PPE for surge events, such as a large and rapid increase in the number of cases.
- Employers who have employees designated to provide services in surge conditions must have such procedures, and surge procedures may extend beyond direct patient care and include tasks such as laboratory studies and epidemiological investigations.
- Procedures to identify potential employee exposures, evaluate each exposure incident, determine the cause, determine which employees had a significant exposure, provide medical follow-up for exposed employees, and revise existing procedures to prevent future incidents.

Training Must Cover:

- The signs, symptoms, and modes of transmission of COVID-19
- Source control procedures
- Activities and tasks that may expose an employee to the Coronavirus
- Use and limitations of methods to prevent or reduce exposures
- Selection of PPE, its uses and limitations, and the types, proper use, location, removal, handling, cleaning, decontamination and disposal
- Proper use of respirators
- Available vaccines when they become available
- The employer's surge plan if applicable
- What to do if an exposure incident occurs

Additional Requirements:

- Employers must use engineering and work practices controls to minimize employee exposures. Examples of engineering controls include isolation rooms or areas, exhaust ventilation, air filtration, and air disinfection.
- Work practice controls include procedures for safely moving patients through
 - Operation or facility
 - Handwashing
 - PPE and PPE donning and doffing procedures
 - Use of anterooms, cleaning and disinfecting contaminated surfaces, PPE, articles and linens.

Learn More About Your Company's Legal Requirements Contact:

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