Staff Safe Practices?PPE

Update for COVID19

Guidelines for all Employers

- Develop and implement appropriate policies, in accordance with Federal, State, and local regulations and guidance, and informed by industry best practices, regarding:
  - Social distancing and protective equipment
  - Temperature checks
  - Sanitation
  - Use and disinfection of common and high-traffic areas
  - Business travel
  - Monitor workforce for indicative symptoms. Do not allow symptomatic people to physically return to work until cleared by a medical provider.

- Develop and implement policies and procedures for workforce contact tracing following employee COVID+ test.

Background

OSHA - the Occupational Safety and Health Act of 1970, created the Occupational Safety and Health Administration (OSHA) to ensure safe and healthful working conditions for working men and women by setting and enforcing standards and by providing training, outreach, education and assistance.

- OSHA is part of the United States Department of Labor
- The OSHA Act covers most private sector employers and their workers.
  - some public sector employers and workers in the 50 states and certain territories and jurisdictions under federal authority.
  - Some States have OSHA-approved workplace safety and health programs operated by individual states.
  - Six State Plans covering only state and local government workers.

Background -Continue

- States with OSHA-approved plan that cover private and state/local government workplaces.
  - AK,AZ,CA,HI,IA,IN,KY,MI,MD,MN,NC,NM,NV,OR,PR,SC,TN,UT,VA,VT,WA,WY

- States with OSHA-approved plan that covers state/local government workers only.
    - CT,IL,ME,NJ,NY,VI

OSHA's Bloodborne Pathogens standard (29 CFR 1910.1030)

- This standard places requirements on employers whose workers can be reasonably anticipated to contact blood or **other potentially infectious materials (OPIM)**, such as unfixed human tissues and certain body fluids.

Background -Continue

- The General Duty Clause, Section 5(a)(1) of the Occupational Safety and Health (OSH) Act of 1970, 29 USC 654(a)(1), which requires employers to furnish to each worker "employment and a place of employment, which are free from recognized hazards that are causing or are likely to cause death or serious physical harm."

    - OSHA's Personal Protective Equipment (PPE) standards (in general industry, 29 CFR 1910 Subpart I), which require using gloves, eye and face protection, and respiratory protection when job hazards warrant it.

    - When respirators are necessary to protect workers, employers must implement a comprehensive respiratory protection program in accordance with the Respiratory Protection standard (29 CFR 1910.134).
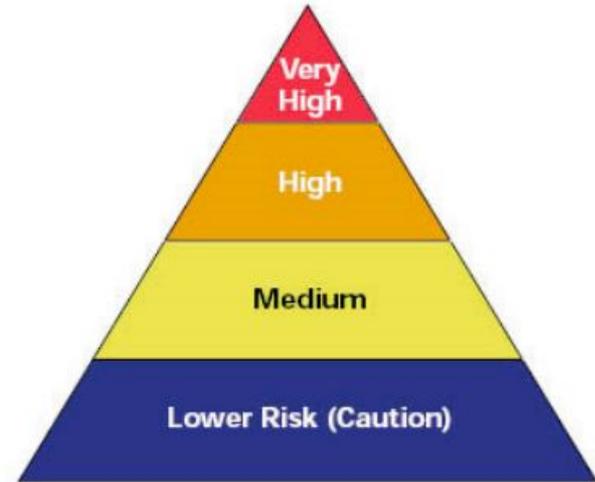
Background -Continue

- 29 CFR Subpart J – General Environmental Controls Sanitization Standard (29 CFR 1910.141).
- 29 CFR Subpart Z – Toxic and Hazardous Substances Hazardous Communications (29 CFR 1910.1200)

Worker Exposure to COVID19

Worker risk of occupational exposure to COVID-19, during an outbreak may vary from very high to high, medium, or lower (caution) risk. The level of risk depends on:

- Industry type

- Need for contact within 6 feet of people known to be, or suspected of being infected

- Requirement for repeated or extended contact with persons known to be, or suspected of being, infected.

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Occupational Risk Pyramid for COVID-19

- Very High
- High
- Medium
- Lower Risk (Caution)

OCCUPATIONAL SAFETY AND HEALTH ADMINISTRATION

- Very high exposure risk jobs are those with high potential for exposure to known or suspected sources of infection during specific medical, postmortem, or laboratory procedures.

- High exposure risk jobs are those with high potential for exposure to known or suspected sources of infection.

- Medium exposure risk jobs include those that require frequent and/or close contact with (i.e., within 6 feet of) people who may be infected but who are not known or suspected infected patients. Workers in this category may have contact with the general public.

- Lower exposure risk (caution) jobs are those that do not require contact with people known to be, or suspected of being, infected nor frequent close contact with (i.e., within 6 feet of) the general public.

Most workers will likely fall in the lower exposure risk (caution) or medium exposure risk levels.

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What to Do to Protect Workers

For workers who do not have frequent contact with the general public employers should implement good hygiene and infection control practices, including:

- Promote frequent and thorough hand washing
  - If Soap & Water not available hand rubs containing at least 60% alcohol.
- Encourage workers to stay home if they are sick.

- Encourage respiratory etiquette, including covering coughs and sneezes.

- Provide customers and the public with tissues and trash receptacles.

- Establish flexible work site/work hours policies and practices to increase physical distance among employees and between employees and others

- Discourage workers from using other workers' tools and equipment, when possible.

- Maintain regular housekeeping practices, including routine cleaning and disinfecting of surfaces.

Identification & Isolation of Sick People (Presumptive Positive)

- Identify Quickly
- Procedures for employees to report when they are sick or experiencing symptoms
    - Apply Face Mask to limit spread of respiratory secretions and disposable gloves
    - Notify Supervisor
    - As much as possible Maintain physical distancing & privacy.
- Isolate (in closed room) if not able to leave immediately
    - Restrict Access to Area
- Leave through designated exit
- Sanitize work space and surfaces, isolation area, and exit route.
    - Treat as bio-hazzard area, wear appropriate PPE

Employee Return to Work Criteria

An employee sent home can return to work when:

- He or she has had no fever for at least three (3) days without taking medication to reduce fever during that time; AND
- Any respiratory symptoms (cough and shortness of breath) have improved for at least three (3) days; AND
- At least seven (7) days have passed since the symptoms began.

An employee may return to work earlier if a doctor confirms the cause of an employee's fever or other symptoms is not COVID-19 and releases the employee to return to work in writing.

Health Screenings of Workers, allowed by EEOC all disability, age discrimination and other EEO laws continue to apply. Follow your Infectious Disease Control Policy

- Infectious Disease Action Level rises to the Emerging Threat
- Every employee will be screened, including having his or her temperature taken, when reporting to work.
- Employees report to the screening area upon arrival at work and prior to entering any other areas of the facility.
- Each employee will be screened privately by Infectious Disease Specialist (IDS) or Infectious Disease Action Manager using a touchless forehead/ temporal artery thermometer.
- The employee's temperature and results from the online respiratory symptom questions will be recorded and the record will be maintained as a private medical record.

Failed Screening are consider presumptive positive and same considerations apply as the reporting sick while at work.

- Identify
- Isolate
- Depart
- Sanitize

Follows same employee return to work standards as above.

HAZCOM

[Hazardous Communications Program](#) (HAZCOM) needs to be updated to include job duties, or functions that may move from one exposure risk level to another.by changes to operation plans in response to COVID19, these might include.

- Front Desk Operations, Swim Instructors, Swim Coaches, Pool Attendant and Janitorial Service

In assessing potential hazards employers should consider:

- If and when their workers may encounter someone infected with SARS-CoV-2 in the course of their duties.
- If workers could be exposed to environments (e.g., swim lessons) or materials (pool toys, training equipment, waste) contaminated with the virus.

Update to your HAZCOM policy may require update such as:

- Trainings
  - [COVID19 What you need to know](#) (From Starfish Aquatics Institute)
  - Training for any required PPE
- [Hazard Assessment Form](#)
  - Should have documented for all job titles
  - Update if job function changes (e.g. Conducting body temperature scans)
- Chemical Inventory Sheets
  - List of all chemicals that staff could be exposed
    - as part of daily job performance
  - Safety Data Sheet required for all Chemicals
    - List required PPE, if any

Sanitization Procedure - Follow CDC Cleaning and Disinfection for Community Facilities

- Routine Clean & Disinfect
  - Clean First with Soap & Water
  - Disinfect with EPA approved Disinfectant
    - Dwell Time
    - Wipe Off excess
- After Persons Suspected/Confirmed to Have COVID-19
  - Close off areas used by the person who is sick.
  - Open outside doors and windows to increase air circulation in the area.
  - Wait 24 hours before you clean or disinfect. If possible.
  - Clean and disinfect all areas used by the person who is sick, with same procedure as Routine Cleaning & Disinfect

Use & Disinfection of High Traffic Area

- Create plan to control flow through all high traffic area
  - Entrances & Exits
    - One Way In One Way Out
  - Restrooms
    - Limit number of people at any given time (one out = one in)
  - Locker Rooms
    - Eliminate Locker Use
    - Remove privacy curtains in changing rooms
  - Hand Sanitizer Station
    - Touchless if you can find them
- Limit Access to Employee Only Areas
  - Guard/Coach/Managers Room
    - Limit access to maintain physical spacing

Disinfection Schedules

- Create Cleaning & Disinfecting Routines for each area
  - Schedule Multiple Times per day based upon Community Gating
    - Phase 1 - Continuously
      - Provide Disinfectant Products for GUest or
      - Provide Building Attendant
    - Phase 2 - Frequently
      - Dedicated Building Attendants
      - Scheduled every clean every 1 -1.5 hours (Traffic Dependent)
    - Phase 3 - Often
      - Pool Attendants
      - Scheduled every 3 hours
  - Complete clean & disinfect at the end of every day
- Sign-Off by IDAM at end of each shift

Resources

[Occupational Safety and Health Administration COVID19 Standards](#)

[OSHA Guidance on Preparing Workplaces for COVID-19](#)

[Develop an Infectious Disease Preparedness and Response Plan](#) (CELTS Example)

[Sparrow Health System COVID-19 Screening Toolkit for Employers](#)

[IDS Workforce Screen Log](#) (CELTS Example)

[Hazardous Communications Program](#) (HAZCOM) (CELTS Example)

[Cleaning and Disinfection for Community Facilities](#)

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