Building Programs to Protect Workers from COVID-19 in the Workplace

April 2021
Information on COVID-19 is rapidly changing, sometimes daily. Refer to reliable sources such as CDC, OSHA, NIOSH, State Health Departments and peer reviewed science publications.
Goal and learning objectives

**Goal:** Increase health and safety awareness for workers to prevent potential exposure to COVID-19.

**Learning objectives:** After attending participants will be able to:

- Assess risk factors for work-related exposure to COVID-19.
- Define protective measures employers should implement applicable to their industry.
- Understand workers rights to a safe and healthy workplace.
- Review strategies for protecting mental health during the crisis.
CAUTION!

This awareness presentation by itself is not sufficient training for personnel who have potential for occupational exposure to SARS CoV-2.

In an operations level training workers must also be trained to their employer’s site-specific policies and procedures. Training must include practice putting on and taking off PPE, respirators, and decontamination procedures until competency and confidence can be demonstrated.
Critical infrastructure

Essential Critical Infrastructure Workers

- Communications
- Chemical
- Critical Manufacturing
- Commercial Facilities
- Dams
- Defense Industrial Base
- Emergency Services
- Energy
- Financial
- Government Facilities
- Information Technology
- Transportation Systems
- Healthcare & Public Health
- Food & Agriculture
- Nuclear Reactors, Materials & Waste
- Water
Who are “essential workers”?

Must continue to work during the COVID-19 outbreak. Cannot work at home.

- Delivery, Retail
- Postal, Communications
- Environmental and Janitorial Services
- Healthcare Institutions
- Public Health, Public Services
- Law Enforcement, Public Safety, First Responders
- Energy and Utilities
- Transportation
- Food and Agriculture
- Critical Manufacturing and Construction
- Defense
Ice breaker discussion

What are your concerns about COVID-19:

1. On-the-job?
2. At home?
3. In the community?
Employer and worker responsibilities

Employers and workers have responsibilities under the OSH Act.
• The Occupational Safety and Health Act requires that employers provide a safe and healthy workplace free of recognized hazards and follow OSHA standards.
• Workers should participate in the development and implementation of the employer’s safety and health policies and help ensure that they are appropriate and implemented.

Speak up! You have a right to file a complaint with OSHA, the state or local health department, the mayor, or the police!
Right to refuse unsafe worker

The National Labor Relations Act protects against employer retaliation for refusals of unsafe work. **Caution:** It can take years for the NLRB to settle a case. There are no guarantees that workers will be reinstated and/or be awarded back pay.

Key issues in work refusal include that the refusal is:

1. in good faith. It does not have to involve a “serious” hazard.
2. concerted — that is, it must involve more than one worker.
3. not in violation of a “no strike” clause in a union contract.

Employer retaliation: workers can file an unfair labor practice charge with NLRB.
What is SARS-CoV-2?

SARS-CoV-2 is the virus that causes coronavirus disease 2019 (COVID-19)

- SARS = severe acute respiratory distress syndrome
- Spreads easily person-to-person particularly through inhalation
- Little if any immunity in humans

Detailed information:
Spread of virus via tiny airborne particles requires 3 things

1. Source
2. Pathway
3. Recipient
Increased risk factors for exposure

- Those with elevated risk of exposure include:
  - Workers providing critical services and operations.
County level – click for current info

COVID-19 County Level Data
What can all workers do to protect themselves?

• Be informed and prepared.
• Wear a face covering or respirator.
• Practice social distancing (at least 6 feet).
• Wash your hands frequently.
• Use alcohol-based hand sanitizer.
• Avoid touching your eyes, nose, and mouth with unwashed hands.
• Stay home when you are sick.
• Cough or sneeze into a tissue or your elbow.
• Clean and disinfect frequently touched objects and surfaces such as cell phones.
Which is better: soap and water or hand sanitizer?

• Soap and water are more effective!
• Make sure sanitizer has at least 60% alcohol.
General principles – worker protection

• Improve indoor air ventilation and filtration.
• Increase physical distancing between people to six feet.
• Everyone should wear masks.
• Flexibility in where and when to work.
• Wash hands frequently.
• Practice good housekeeping.
• Increase cleaning and disinfecting generally and thoroughly after a confirmed COVID-19 exposure.
Five steps to proper handwashing

• **Wet** your hands with clean, running water (warm or cold), turn off the tap, and apply soap.

• **Lather** your hands by rubbing them together with the soap. Lather the backs of your hands, between your fingers, and under your nails.

• **Scrub** your hands for at least 20 seconds. Need a timer? Hum the “Happy Birthday” song from beginning to end twice.

• **Rinse** your hands well under clean, running water.

• **Dry** your hands using a clean towel or air dry them.
Hand Washing Steps, Using the World Health Organization Technique

https://www.youtube.com/watch?v=lisgnbMfKvI
Key steps for employers in preparing for and managing epidemics in the workplace

• Preparing for the threat.
• Implementing preventive measures.
• Implementing the continuity of operations plan.
• Managing business recovery post-epidemic.
Key elements: COVID-19 workplace plan

• Management leadership and employee participation.
• Hazard identification and assessment.
• Hazard prevention and control.
• Education and training.
• System evaluation and improvement.
• Support for workers who are exposed.
• Mental health support for workers and their families.
Resuming work after a closure or slowdown
Small or large group discussion: what went right / what went wrong?

• Employers should:
  • Update their risk assessment.
  • Carry out adaptations to the layout of the workplace and the organization of work that will reduce exposure to COVID-19.
  • Consider resuming work in stages to allow adaptations to be carried out.
  • Inform workers about changes, new procedures, and provide training before they resume work.
• Pay special attention to workers who are at high risk and be prepared to protect the most vulnerable.
MODULE 1: ASSESSING THE RISK OF EXPOSURE TO SARS CoV-2
Transmission

COVID-19 is spread from person to person mainly through coughing, sneezing, talking, and breathing.

- **Droplet** - respiratory secretions from coughing or sneezing landing on mucosal surfaces (nose, mouth, and eyes).
- **Aerosol** - a solid particle or liquid droplet suspended in air.
- **Contact** - Touching something with SARS CoV-2 virus on it and then touching mouth, nose or eyes.
- **Other possible routes**: Through fecal matter.
Asymptomatic and presymptomatic transmission

30% or more of COVID-19 cases are

**asymptomatic:** infected but without symptoms. Can still infect others.

**Presymptomatic** infection is the period before symptoms occur, usually 2 to 5 days. Can still infect others.
How long does SARS-CoV-2 survive outside of the body?

- Viral aerosols can stay suspended in air for up to 3 hours depending on conditions in the space. Aerosols can also travel beyond six feet.
- Virus may persist on surfaces for a few hours or up to several days, depending on conditions and the type of surface.
- It is likely that it can be killed with simple disinfectant on the EPA registered list below.

https://www.epa.gov/pesticide-registration/list-n-disinfectants-use-against-sars-cov-2
Treatment and vaccines

- As of April 2021, three COVID-19 vaccines have FDA emergency use authorization, with more in the pipeline.
- There is no cure, but FDA has approved several drugs to help with treatment for COVID-19.
- Treatment is supportive.
- People who are mildly ill with COVID-19 should isolate at home during their illness.
Questions to determine key exposure factors in the workplace

• Do specific job duties require close, repeated or extended contact with people with known or suspected to have COVID-19?
• Do job tasks require close contact (less than 6 feet) with the public or with co-workers?
• Has the community spread of the virus increased the risk of workplace exposure?
Community/Workplace Connection

When a community outbreak occurs, any workplace or event location where people gather has a high potential for exposure.

Examples of work settings

- Schools
- Sports arenas and arts centers
- Social service offices
- Meat packing plant
- Retail food stores
- Correctional facilities
- Public transportation

Examples of job activities

- Classroom instruction
- Aiding clients
- Serving customers
High potential for exposure

High exposure risk occupations are those working with people with known or suspected COVID-19, especially while performing aerosol generating procedures.

Examples of work settings
- Healthcare
- Laboratories
- Emergency medical services

Examples of job activities
- Care for COVID-19 patients
- Bronchoscopy and sputum induction
- Working with specimens in laboratories
- Transport to hospitals
- Some autopsy procedures
More high potential for exposure

Examples of work settings

- Other types of health care facilities, nursing homes, institutions
- Medical transport
- Correctional facilities
- Home health care
- Environmental clean-up of SARS CoV-2

Examples of occupations

- Healthcare worker
- Paramedic, EMT
- Laboratorian
- Law enforcement
- Institutional workers
High potential for exposure

Examples of work settings

• Food processing plants
• Farmworkers
• Public transportation
• Home visiting occupations
• Any crowded workplace
Low potential for exposure

Low potential for exposure occupations are those requiring no contact with people known to be infected nor frequent contact with the public.
NIEHS WTP COVID-19 Toolkit

https://tools.niehs.nih.gov/wetp/covid19worker/

- Best Practices in Training
- COVID-19 Prevention Fact Sheets
- Information on Vaccines
- Other Resources
Useful resources

1. Comprehensive list from Alliance, an OSHA Cooperative Program: CDC, NIOSH, FDA, OSHA and industry specific guidelines

2. American Industrial Hygiene Association, Back to Work Safely™
   https://www.backtowork SAFELY.org/

3. National Safety Council SAFER Guides for Employers
   https://www.nsc.org/work-safety/safety-topics/safe-actions-for-employee-returns-safer
What are the steps in assessing risk?

Risk assessment is an employer responsibility that should involve frontline workers, union reps, and supervisors.

• 1st Step: **Do you have a process in place already?**
  • Safety and Health or Labor/Management Committee
  • Task Force or Sub-Committee

• 2nd Step: **What method will you employ?**
  • Inspection, job hazard analysis, brainstorming (who, what when, how), other

• 3rd Step: **How will you document the assessment?**
Do you have a process that…

• Has clear decision makers?
• Includes all key stakeholders?
• Includes front line workers?
• Has clear lines of responsibility, accountability, and timelines?
Job Hazard Analysis

Identify risk → Assess risk → Control risk → Evaluate
How will you document the assessment?

- Take photos if feasible.
- Should be in writing.
- Should be widely available to all employees and organizational stakeholders.
- Should describe the time, place, and method of the assessment.

What is your communication plan with employees/public you serve?
MODULE 2: WORKPLACE EXPOSURE PREVENTION
Overview

• Improve indoor air ventilation, filtration
• Maintain at least 6 feet of physical distancing:
  • include use of barriers, signs
  • modifying work procedures that require close human interaction
• Other steps include increased cleaning and disinfection, use of PPE, respirators, face covering, and training.
Protecting workers

Start with the most effective method to protect workers.

Hierarchy of Controls

- Physically remove the hazard
- Replace the hazard
- Isolate people from the hazard
- Change the way people work
- Protect the worker with Personal Protective Equipment
Selection and implementation of safeguards

Using the results of the hazard analysis, determine the exposure potential. Then select control measures using the hierarchy of controls. Be sure to evaluate the controls and make adjustments as needed.
Basic hygiene and physical distancing

- Stay home when sick.
- Wear a face covering or respirator.
- Wash hands or use sanitizer frequently and after coughing, sneezing, blowing nose, and using the restroom.
- Avoid touching your nose, mouth, and eyes.
- Cover coughs and sneezes with tissues or do it in your sleeve.
- Dispose of tissues in no-touch bins.
- Avoid close contact with coworkers and customers (6 feet).
Hazard elimination methods

- Disinfectant and cleaning supplies are available to all employees.
- Disinfecting all payment portals, pens, and styluses after each use.
- Disinfecting all high-contact surfaces frequently.
- Hand sanitizer with at least 60% alcohol is available to all employees.

- Break rooms, bathrooms, and other common areas are disinfected on a schedule.
- Temperature and symptom checks.
What are examples of engineering controls for COVID-19?

- Desks or workstations are at least 6 feet apart.
- Barriers are in place to achieve social distancing.
- Increased general ventilation, filtration, use of portable air cleaners.
- Electronic pre-payment of goods and services.
Prioritization of engineering controls to improve indoor air quality

1. VENTILATE WITH OUTDOOR AIR
   - HVAC SYSTEM?
     - YES: Open system dampers
     - NO: Open windows

2. INCREASE FILTER EFFICIENCY
   - HVAC SYSTEM?
     - YES: Upgrade system filters to ≥MERV13
     - NO: Supplement with portable air cleaners

HVAC = heating, ventilation, and air conditioning
Ventilation and filtration are key to cleaning the air!

- Does your worksite have a mechanical heating, ventilation, and air conditioning (HVAC) system:
  - How much air is recirculated?
  - What percentage of outside air comes into the building?

Providing 5-6 air changes per hour (ACH) is recommended as it will replace about 99% of the volume of air in an indoor space with fresh filtered or outdoor air every 45 – 60 minutes.

Check: Typical ceiling air supply diffuser. Make sure air is flowing out of it by holding a tissue up to it. The exhaust / return diffuser should cause a tissue to stick to it, if it is working properly.
What is the MERV rating of a filter?

MERV = minimum efficiency reporting value.

Experts recommend using a filter with a MERV rating of 13 or higher for control of COVID-19, if the building systems can handle it.
Use of portable air cleaners

• Use portable air cleaners when ventilation systems cannot be improved.
• They draw air into the unit through a filter that collects particles, then exhaust cleaned air back into the room.

Portable air cleaners can filter out virus from air in spaces that don’t have mechanical ventilation systems.
Use of ultraviolet light (UV)

• UVGI – ultraviolet germicidal irradiation

• Upper-room UV air disinfection is safe and effective for air disinfection when properly installed and maintained. An expert consultant is essential.

• UV-C from 200 to 280 nanometers inactivates viruses, bacteria, mold, and fungi.

UVGI fixtures in a classroom setting, (Photo courtesy of UV Resources, https://uvresources.com)

**Warning:** UV can cause permanent eye damage and skin cancer if not properly installed and maintained.
Engineering controls for high exposure potential jobs in healthcare and laboratories

- Examples include:
  - Negative pressure isolation rooms
  - Biological safety cabinets HEPA filtration
  - UV irradiation systems
Administrative controls to reduce exposure

- Written exposure control program.
- The number of customers allowed entrance is limited.
- Change hours of operation.
- Switch to take out/delivery only.
- Discontinue non-essential travel.

- Limiting the number of staff present for high potential exposure tasks.
- Training.
Additional administrative controls

Soft barriers include use of tables, ropes, signs, and floor markings to maintain social distancing.
Adjust employer policies to reduce exposures

- Use temperature/symptom checks before coming to work.
- Use email, phone, teleconferences instead of face-to-face contact.
Identify choke points

- Identify choke points where workers are forced to stand together, such as hallways, hoists and elevators, break areas, and buses, and control them so social distancing is maintained.
Communicate the safety plan

Conduct Safety Stand-Down/toolbox talk/tailgate training on job sites to explain the protective measures in place for all workers.
Employers should review CDC recommendations and adjust sick leave policies as needed

• Ensure policies are flexible, consistent with public health guidance.
• Notify all employees.
• Permit employees to stay home to care for a sick family member or care for children.
• Give advances on future sick leave and allow employees to donate sick leave to each other.
CDC recommended sick leave continued…

- Employers who do not offer sick leave to employees should draft non-punitive “emergency sick leave” policies.
- Tell workers who are ill to stay home without fear of reprisals or loss of pay or benefits.
- Return to work: employers should not require a negative COVID-19 test result or a health care provider’s note for employees who are sick/quarantined.
OSHA PPE standard

• Where applicable, the OSHA PPE standard requires employers to:
  • Conduct an assessment for PPE
  • Provide PPE at no cost, appropriate to the hazard
  • Train employees on how to don (put on) and doff (take off) PPE
  • Train workers to maintain, store, and replace PPE
  • Provide medical evaluation and fit testing

PPE for jobs with high potential exposure

- Face shields
- Goggles
- Gloves
- Gowns
- Respirators
  - At least N95
  - Full or half face elastomeric or PAPR for greater protection
Respirators

Respirators are needed when there is a potential for aerosol transmission.

An N95 respirator is the minimum level of protection to prevent inhaling coronavirus.
Respirators (continued)

- Advantages of reusable respirators:
  - Durability
  - Stand up to repeated cleaning and disinfection
  - Maintain fit over time
  - Cost savings
- Powered air-purifying respirator (PAPR)
- Half or full-face elastomeric respirators
Respirators (continued)

Surgical masks are not respirators!

• Surgical masks do not:
  • Fit tightly against the skin to form a seal
  • Filter tiny particles, such as viruses or bacteria that are in the air
CDC revised guidelines for PPE for healthcare and high-risk workers

• In early March 2020 CDC revised its guidelines to allow for use of surgical masks when N95s are not available due to the worldwide shortage of N95 disposable respirators.

• There has been widespread concern that use of loose-fitting surgical masks will lead to infection of healthcare and other high-risk workers.

• Use of an **N95 respirator** for protection from short-range aerosols when working near a person suspected or known to have COVID-19 **should be the minimum** level of protection.
Strategies for optimizing supplies of N95s
No longer valid, as of 4/9/21

- CDC and OSHA are temporarily allowing for:
  - Limited reuse of disposable N95s
  - Use of expired N95s
  - Suspension of fit testing

- KN95 in the photo below, made in China
- Equivalent filtration certification
- Comes in 1 size only, flimsy ear loops, and can’t properly fit test

![Image of KN95 mask](image-url)
Respiratory protection standard

Respiratory programs must comply with all elements of OSHA Standard 29 CFR 1910.134

- Written program
- Select respirator to match hazard
- Medically fit to wear
- Fit testing
- Ensure proper use of respirators
- Respirator maintenance
- Labeling/color coding filters
- Employee training
- Program evaluation
- Recordkeeping
Donning the disposable respirator

1 strap above and 1 strap below ears
Do not cross

Fits over nose and under chin

Pinch bar to shape of nose

Respirator should collapse as you breathe in and not let air in from the sides.
What about CDC’s recommendation to wear cloth masks in public settings?

- They are not PPE
- Small particles may go right through cloth increasing risk of infection. There is no seal to the face.
- Factors like moisture on the cloth may concentrate droplets.
- A concern is that people will touch their face more often to adjust mask, or that they will have a false sense of security with one on.
Cal OSHA Aerosol Transmissible Disease (ATD) Standard

http://www.dir.ca.gov/Title8/5199.html

- Enforceable in California, it applies to many types of health care settings, police services, correctional facilities, drug rehab centers, homeless shelters, and other settings.
- Requires different types of engineering controls, work practices and administrative controls, and PPE depending on the level of potential exposure.
- It is a useful reference for all states, employers, and workers.
Gloves

- Can be a reminder to avoid touching your face!
- Assume they are contaminated; dispose of properly.
- Wash hands right after removing
- Non-latex is better because latex can trigger asthma and allergies
Healthcare settings

• Refer to the CDC and state health department guidelines for protection of healthcare workers.
• In the current and past outbreaks, healthcare workers have had a high rate of infection.
• It is important to implement procedures, equipment, and training to prevent infection.
• The CDC website includes guidelines for infection control, EMS, home care, clinical care, evaluating persons under investigation, and more.
Healthcare facility identification and isolation

The most important steps to prevent spread of COVID-19

- Procedures for rapid identification and isolation of suspect COVID-19 cases.
- Community and hospital procedures to ensure symptomatic people are not in public places, waiting rooms, reception areas, emergency departments, or other common areas.
  - Collect a travel history for patients presenting with fever, cough, or shortness of breath.
  - Immediately isolate – using standard, contact and airborne precautions for suspect or confirmed cases.
Hospital negative air isolation room

- 12 air changes per hour.
- 100% of contaminated air vented directly to the outside.
- HEPA filter captures virus particles.
- Air flows into, not out of the room.
NIOSH ventilated headboard

- Draws exhaled air from a patient into a HEPA filter.
- Used to capture contaminated air at its source.
Are these safeguards adequate?
Are these safeguards adequate?
Are these safeguards adequate?
Are these safeguards adequate?
Are these safeguards adequate?
Are these safeguards adequate?
Are these safeguards adequate?
Is this safeguard adequate?
Example: zero contact auto full service

**HOW ZERO CONTACT SERVICE WORKS**

1. Book an appointment online, by phone, or at one of our stores.
   - MON. 10 AM
   - MON. 12 PM
   - MON. 2 PM
   - MON. 4 PM

2. Park and call the store when you arrive.

3. Give the associate a description of your vehicle.
   - MAKE
   - MODEL
   - TRIM

4. A designated associate will come out to greet you, maintaining appropriate distance.

5. A gloved technician will utilize standard vehicle protective measures, such as steering wheel covers, seat covers, and floor mats, and moves vehicle into the work area.

6. Once work is finished, all contact points are cleaned.

7. An associate will call you to review work and collect payment. As an additional precaution, the preferred method of payment is credit card.
Santa Clara social distancing protocols

- The updated Order adds some clarifying language around essential business and activities, as well as some new directives.

Click for the required form to document compliance

Preparedness training and drills

• Training should cover all elements of COVID-19 safety plan.
• Must be hands-on and frequent.
• Should not be primarily computer based or lecture.
• Must include an opportunity to drill the actual process of donning and doffing PPE and respirators
• Should include a trained observer and cover site specific decontamination procedures.
What about exposures at work?

- CDC recommends that employers should notify workers who are exposed at work:
  - Exposed workers should quarantine for 14 days.
  - Exposures are defined as 15 minutes over a 24-hour period of close contact (within 6 feet) of a person suspected or confirmed to have COVID-19, regardless of mask wearing.
  - Employers should perform temperature and symptom checks, disinfect and clean affected surfaces and equipment, report and work with the public health department to notify and trace contacts.
What if a worker tests positive?

- Close off areas used by the sick person.
- Implement a 14-day self-quarantine, provide information on self-monitoring, and to watch for symptoms that warrant going to the emergency department.
- Provide financial and emotional support.
- Follow CDC and local guidelines for cleaning and disinfecting.

MODULE 3: CLEANING & DISINFECTION
Cleaning and disinfection

- Employers should develop site specific procedures.
- May consult with health departments or use a consultant specializing in environmental cleanup.
- Use an EPA registered disinfectant effective against SARS CoV-2.
- Consider worker and occupant protection against adverse effects of the disinfectant.

EPA List: https://www.epa.gov/pesticide-registration/list-n-disinfectants-use-against-sars-cov-2
CDC cleaning guidelines (non-healthcare)

- **Cleaning**: removal of dirt, including germs, from surfaces. Cleaning alone does not kill germs.
- **Disinfecting**: works by using chemicals, for example EPA-registered disinfectants, to kill germs on surfaces.
- There are separate guidelines for facilities that house people overnight and for healthcare.
Contact time for disinfection is important!

- The EPA list and product labels include contact time.
- Contact time is the time the product must remain wet to kill the virus.
- Observe that the area is visibly wet for the entire contact time.
- Check expiration dates!
Tips and traps

- Products are designed for specific purposes.
- Surfaces matter. What works on fabric may not work on stainless steel.
- Some disinfectants work on bacteria but not viruses and vice versa.
- Many products must be diluted.
- Some products are sprayed, which makes it more likely users will inhale the vapors.
Health effects of disinfectants may include….

- Skin rashes or dermatitis.
- Irritation of the nose, eyes, mouth.
- Occupational asthma:
  - Sodium hypochlorite (bleach)
  - Quaternary ammonium
  - Glutaraldehyde

Remember to not mix products. That can be deadly!
Safer chemicals are available
Use the search function on the EPA site

List N was last updated on March 26, 2020.

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OSHA Hazard Communication standard

The hazard communication standard, 29 CFR 1910.1200, establishes a worker’s right to know about chemicals in the workplace.

Employers are required to provide:

- A list of all hazardous chemicals in the workplace
- Labels on containers
- Chemical information (safety data sheets)
- Training
- A written program and worker access to information

These rights may be relevant to the cleaning and disinfecting chemicals.
Portable containers

- Portable containers must be labeled
- Exception: portable containers do not have to be labeled if only the worker who transfers the chemical uses it during that shift
When you use disinfectants:

• **Clean the area** first to remove dirt and dust or you can use detergent or soap.

• **Open windows** or use other ways to **increase ventilation**.

• **Avoid spraying** and if you spray, put it on a sponge or rag so less goes into the air.
When you use these disinfectants:

- Follow **instructions on the product label** exactly, including for diluting and for the “contact time”, how long the surface needs to stay wet.
- Make sure all containers are labeled.
- Use **gloves (nitrile, non-latex)** and eye protection and check label to see what PPE is recommended.
What are the high contact work surfaces?
MODULE 4: RESILIENCE: PROTECTING MENTAL HEALTH
Study results during COVID-19 pandemic

During late June, 40% of U.S. adults reported struggling with mental health or substance use. 

- Anxiety/Depression Symptoms: 31%
- Trauma/Stressor-Related Disorder Symptoms: 26%
- Started or increased substance use: 13%
- Seriously considered suicide: 11%

*Based on a survey of U.S. adults aged ≥18 years during June 24-30, 2020
†In the 30 days prior to survey

For stress and coping strategies: bit.ly/dailylifecoping

CDC.GOV  bit.ly/MMWR81320
What zone are you in today?
Mental health and stress

Consider the following steps:

• **Use your smart phone** to stay connected to family and friends. Shift from texting to voice or video calling to feel more connected.

• **Keep comfortable.** Do more of the things you enjoy doing at home.

• **Practice stress relief** whenever you feel anxiety building – do some deep breathing, exercise, read, dig in the garden, whatever works for you.

• **Avoid unhealthy behavior** such as excess drinking – that will just increase your anxiety afterwards.

• **Keep looking forward.** Make some plans for six months down the road.
Self-Care and Stress Management

• Actions individual workers can take to increase resiliency
  • Healthy habits.
  • Connecting with others, giving and receiving social support
Reaching out to co-workers

• You may ask co-workers how they are doing.
• Engage in active listening where you give the person you are talking to your full attention.
• Choose the right time and place and do not pressure anyone to talk when they are not ready.
Check out NIEHS Disaster Worker Resiliency Training

• 4-Hour interactive training course
• Prepares workers to recognize and address psychological stress and trauma associated with work.
• Designed to help participants avoid the most severe negative impacts of psychological stress and trauma.
4 Factsheets are available

2. Connecting with Others: Giving and Receiving Social Support
3. Information for Families: When a Family Member Is Traumatized at Work
4. Caring for Yourself in the Face of Difficult Work
Workers’ families can also be exposed
SAMHSA App resource

The Substance Abuse and Mental Health Services Administration (SAMHSA) Disaster App:

• Access resources and a directory of behavioral health service providers.
• Download information on phones in cases of limited Internet connectivity.
• Send information to colleagues.
• [http://store.samhsa.gov/product/samhsa-disaster](http://store.samhsa.gov/product/samhsa-disaster)
CLOSING ACTIVITY
### Begin an action plan

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<tr>
<th>Action item</th>
<th>Responsible person</th>
<th>Action steps</th>
<th>Date to be completed</th>
<th>Notes</th>
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- Actions can be at the individual or organizational level.
- Key is to have a process, accountability, and a feasible workplan.
Acronyms

- CDC  Centers for Disease Control and Prevention
- EPA  U.S. Environmental Protection Agency
- HEPA High-efficiency particulate air
- HHS  U.S. Department of Health and Human Services
- LRN  Laboratory Response Network
- NIOSH National Institute for Occupational Safety and Health
- OSH Act Occupational Safety and Health Act of 1970
- OSHA Occupational Safety and Health Administration
- PAPR Powered air-purifying respirator
- PPE  Personal protective equipment
- SNS  Strategic National Stockpile
- WHO  World Health Organization
In conclusion

• Thank you for attending today’s program. We hope you benefit from an increased awareness of the methods that can be used to protect yourself and your co-workers from the COVID-19 virus. Please share these materials with co-workers, supervisors, and organizational leaders.
For more information

• Centers for Disease Control and Prevention (CDC)  
  http://www.cdc.gov

• Occupational Safety and Health Administration (OSHA)  
  http://www.osha.gov

• World Health Organization (WHO)  
  http://www.who.int/en/

• National Institute for Occupational Safety and Health (NIOSH)  
  http://www.cdc.gov/NIOSH/

• NIEHS Worker Training Program  
  https://tools.niehs.nih.gov/wetp/index.cfm?id=2554
Why this training tool was created

This training tool was created by the NIEHS National Clearinghouse for Worker Safety and Health Training under a contract (75N96020F00102) from the National Institute of Environmental Health Sciences Worker Training Program (WTP).

WTP has trained more than four million emergency responders and hazardous waste workers since 1987 to do their jobs safely. WTP is a part of the Department of Health and Human Services, which is a cooperating agency under the Worker Safety and Health Support Annex of the National Response Plan. As part of the coordinated effort, the National Clearinghouse worked with NIEHS, WTP to create this orientation briefing for those who may be exposed to COVID-19 (coronavirus).