Essential and Returning Workers Training Tool

Protecting Workers from COVID-19 in the Workplace

APRIL 2020
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 essential 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
- Government Facilities
- Financial
- Healthcare & Public Health
- Information Technology
- Transporations Systems
- Water
- Food & Agriculture
- Nuclear Reactors, Materials & Waste
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
### Rates of physical proximity, disease exposure, and face-to-face interactions, 15 representative occupations, 2018

<table>
<thead>
<tr>
<th>Occupation</th>
<th>Employment</th>
<th>Share frequently in close proximity to others</th>
<th>Share frequently exposed to disease</th>
<th>Share with frequent face-to-face interactions</th>
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</thead>
<tbody>
<tr>
<td>Registered Nurses</td>
<td>2,951,960</td>
<td>89.1%</td>
<td>93.1%</td>
<td>98.4%</td>
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<tr>
<td>Cashiers (Grocery Stores Only)*</td>
<td>910,400</td>
<td>86.3%</td>
<td>27.6%</td>
<td>79.1%</td>
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<tr>
<td>Home Health Aides</td>
<td>797,670</td>
<td>85.2%</td>
<td>64.3%</td>
<td>73.6%</td>
</tr>
<tr>
<td>Packers and Packagers, Hand</td>
<td>663,970</td>
<td>72.0%</td>
<td>4.5%</td>
<td>84.6%</td>
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<tr>
<td>Police and Sheriff's Patrol Officers</td>
<td>661,330</td>
<td>77.5%</td>
<td>58.8%</td>
<td>93.3%</td>
</tr>
<tr>
<td>Plumbers, Pipefitters, and Steamfitters</td>
<td>438,070</td>
<td>74.3%</td>
<td>27.4%</td>
<td>86.2%</td>
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<tr>
<td>Postal Service Mail Carriers</td>
<td>342,410</td>
<td>34.9%</td>
<td>5.3%</td>
<td>83.6%</td>
</tr>
</tbody>
</table>

**NOTE:** Shares of workers with “frequent” physical proximity, disease exposure, and face-to-face interactions are based on underlying worker survey data. Workers rate whether they experienced these relevant work contexts all the time or most of the time.

*NOTE: Since cashiers are employed in many different industries, we have focused on those in grocery stores and related establishments only.

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 the 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 it 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 when someone sneezes

• Little if any immunity in humans

Increased risk factors

• Those with elevated risk of exposure include:
  • Close contacts of persons with COVID-19.
  • Healthcare workers caring for patients with COVID-19.
  • Workers providing critical services and operations.
US distribution map – click for current info

What can all essential workers do to protect themselves?

- Be informed and prepared.
- 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.
- Be prepared if your child’s school, daycare facility, or your worksite is temporarily closed.
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

- Increase physical distancing between people to six feet.
- Everyone should wear masks.
- Flexibility in where and when to work.
- Wash hands frequently.
- Do not share equipment.
- 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

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

• 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, and possibly 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.
How long does SARS-CoV-2 survive outside of the body?

• It is not clear yet how long the coronavirus can live on surfaces, but it seems to behave like other coronaviruses.

• 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](https://www.epa.gov/pesticide-registration/list-n-disinfectants-use-against-sars-cov-2)
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 store
• Correctional facilities
• Public transportation services

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
- Drug treatment centers
- Homeless shelters
- Home health care
- Environmental clean-up of SARS CoV-2

Examples of occupations
- Healthcare worker
- Paramedic, EMT
- Laboratorian
- Law enforcement
- Institutional workers
Medium Potential for exposure

Examples of work settings
• Retail stores
• Public transportation
• Home visiting occupations
• Postal and warehouse workers
• Public services

Examples of job activities
• Stocking shelves
• Checking out customers
• Emergency home repairs
• Handling mail and goods
• Processing public benefits
Low potential for exposure

Low potential for exposure occupations are those that do not require contact with people known to be infected nor frequent contact with the public.
Guidelines from OSHA and CDC/NIOSH

CDC:
1. Businesses & Employers
2. Healthcare
3. EMS
4. Correctional and Detention Facilities
5. Law Enforcement
6. OSHA
7. Food Safety FDA
8. Airlines

Best practices:
1. Nebraska Medicine
2. EMS Infectious Disease Playbook
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

• Maintain at least 6 feet for social 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, and training.
Protecting workers

Start with the most effective method to protect workers.

Hierarchy of Controls

- **Elimination**: Physically remove the hazard
- **Substitution**: Replace the hazard
- **Engineering Controls**: Isolate people from the hazard
- **Administrative Controls**: Change the way people work
- **PPE**: Protect the worker with Personal Protective Equipment
Selection and implementation of safeguards
Basic hygiene and social distancing

• Stay home when sick.
• 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).
• Avoid shaking hands/wash hands after physical contact with others.
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.
Engineering controls

• Ventilation
• Drive through service
• Plastic shields and other barriers
• Sneeze guards
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
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.
- Electronic pre-payment of goods and services.
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.
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.
In construction, 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.

• Employers **should not** require a positive COVID-19 test result or a health care provider’s note for employees who are sick/quarantined.

• Tell workers who are ill to stay home without fear of reprisals or loss of pay or benefits.
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/eye protection
- 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

- 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

![KN95 Mask](image)
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

NIOSH with N95 or P100

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
• Most small particles 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.
When to use respirators or masks

Coding:
A. Yes / Green
B. Acceptable / Light green
C. Neutral / Grey
D. Probably not / Gold
E. No / Red

The chart shows a framework for advising "Mask" use to protect the user. The chart is designed to help individuals determine the appropriate level of protection based on the hazard level and the specific needs of the situation. The specific recommendations vary by availability and evolving data. The notations in the chart should not be considered to be recommendations for any specific person or setting. *Tight = designed to fit tightly against face (P. Harber, 2020)
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 ensure that procedures, equipment, and training 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 droplet 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 a.m.
   - Mon. 12 p.m.
   - Mon. 2 p.m.
   - Mon. 4 p.m.

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 exposed workers without symptoms may continue working:
  • Employers should perform temperature and symptom checks, disinfect and clean affected surfaces and equipment, trace contacts of the exposed worker, and send a sick worker home for home isolation.
  • Workers should wear masks, keep social distance, report symptoms, and stay home if they get sick.
  • There is concern that this approach does not address the potential for asymptomatic carriers to infect co-workers and the public.
Alternative: apply CDC’s general home isolation guidelines to worker exposures

• 14 days of home-isolation for exposed workers.
• Employer to isolate surfaces and equipment until thorough cleaning and disinfection are performed.
• Work with public health department to trace contacts.
• Evaluate effectiveness of preventive measures.
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 decontamination

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

EPA List: [https://www.epa.gov/pesticide-registration/list-n-disinfectants-use-against-sars-cov-2](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 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 vis a 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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<tr>
<th>EPA Registration Number</th>
<th>Active Ingredient/s</th>
<th>Product Name</th>
<th>Company</th>
<th>Follow the disinfection directions and preparation for the following virus</th>
<th>Contact Time (in minutes)</th>
<th>Formulation Type</th>
<th>Emerging Viral Pathogen Claim?</th>
<th>Date Added to List N</th>
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<td>Tristel Solutions LTD</td>
<td>Adenovirus; Feline calicivirus; Poliovirus</td>
<td>0.5</td>
<td>RTU</td>
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<td>675-55</td>
<td>Citric acid</td>
<td>Lysol Bathroom Cleaner</td>
<td>Reckitt Benckiser LLC</td>
<td>Poliovirus</td>
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<td>4091-22</td>
<td>Quaternary ammonium; Citric acid</td>
<td>Raptor 5</td>
<td>W.M. Barr &amp; Company Inc</td>
<td>Rhinovirus</td>
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<td>3573-54</td>
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<td>Comet Disinfecting Bathroom Cleaner</td>
<td>The Proctor &amp; Gamble Company</td>
<td>Feline calicivirus; norovirus</td>
<td>10</td>
<td>Dilutable</td>
<td>No</td>
<td>03/26/2020</td>
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</table>
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
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)
YouTube tutorials teach coping skills such as meditation

https://youtu.be/o-kMJBWk9E0
AFSCME factsheets by industry sector

https://afscmestaff.org/health-safety/fact-sheets/

1. Workplace Preparedness
2. Cleaning and Decontamination
3. Law Enforcement
4. Corrections
5. Social Assistance
6. Long-Term Care
7. PPE for Healthcare

Available in English and Spanish!
CLOSING ACTIVITY
Begin an action plan

<table>
<thead>
<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
- JCAHO  Joint Commission on Accreditation of Healthcare Organizations
- 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 (HHSN273201500075U) from the National Institute of Environmental Health Sciences Worker Training Program (WTP).

WTP has trained more than two 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).