

## COVID-19 Emergency Temporary Standard for Healthcare

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Daniel Lujan Ph.D - NM OSHA Consultant

**New Mexico Occupational Health and Safety Bureau** 



## **Overview of Topics**

- Topics:
  - Requirements for Healthcare (29 CFR 1910.502)
  - Mini Respiratory Protection Program (29 CFR 1910.504)

NOTE: OSHA has also updated its Guidance on Mitigating and Preventing the Spread of COVID-19 in the Workplace for all industries



### ETS?

## What is an ETS?



## **Emergency Temporary Standard**

#### ETS

- Determination that healthcare and healthcare support employees face a grave danger from COVID-19
- Ensure sufficient protection from COVID-19 hazard
- Inform employees of their rights against retaliation
- ETS effective dates
  - Published in Federal Register (June 21, 2021)
    - All provisions have been in effect since July 21, 2021



## Topic 1

## Scope/Organization of Subpart U



## **Subpart U Applies to Healthcare**

#### **Organization of Subpart U**

- Healthcare, 1910.502
- Mini Respiratory Protection Program, 1910.504



## **Requirements for Healthcare**



## Healthcare - 1910.502 (a) Scope and Application













## Healthcare - 1910.502 (a) (continued)

- Does not apply to:
  - Dispensing of prescriptions by pharmacists in retail settings
  - Non-hospital ambulatory care settings if non-employees are screened
  - Hospital ambulatory care settings if well-defined area, all workers fully vaccinated, non-employees are screened
  - Home healthcare settings if all workers <u>fully vaccinated</u>, <u>non-employees</u>
    <u>screened</u>
  - Telehealth services



## **Examples of Applicability of 1910.502**

## Example using clinic in a manufacturing facility:

- 1910.502 applies to the nurse's duties whether in the clinic or out on the plant floor
- 1910.502 does not apply to other employees in the manufacturing facility when the nurse is providing healthcare on the plant floor

#### <u>Example using a pharmacy embedded</u> <u>in a general merchandise store:</u>

- 1910.502 applies to the pharmacist/staff performing medical processes/procedures
- 1910.502 does not apply to dispensing of prescriptions or to the general merchandise part of the store



## 1910.502 (c) - COVID-19 Plan

- Specific for each workplace
- In writing if > 10 employees
- Conduct a workplace-specific hazard assessment Minimize Risk of Transmission
  - Vaccinated employees
  - Unvaccinated employees
- Seek the input of non-managerial employees and their representatives
- Monitor ongoing effectiveness and update it as needed



## 1910.502 (d) - Patient Screening and Management

- In settings where direct patient care is provided, the employer must:
  - Limit and monitor points of entry
  - Screen and triage all entrants
  - Implement other applicable patient management strategies in accordance with CDC's "COVID-19 Infection Prevention and Control Recommendations"

#### Examples include:

- Telehealth, where applicable
- Isolate patients in exam rooms
- Use distancing and barriers in waiting rooms



## 1910.502 (e) - Standard and Transmission-Based Precautions

CDC's "Guidelines for Isolation Precautions"

#### Examples include:

- Tight-fitting facemasks for patients
- Physical distancing
- Hand hygiene
- Ventilation
- Outdoor triage
- Isolation rooms



## 1910.502 (f) - Personal Protective Equipment (PPE)

- Facemasks
  - Facemasks must be FDA approved or authorized
  - Employers must provide sufficient quantities and ensure use
  - Cover nose and mouth when indoors and when occupying a vehicle with other people for work purposes
- Use of respirator when not required must comply with 1910.504



### 1910.502 (f) — PPE (continued)

#### Facemask exceptions:

- When an employee is alone in a room
- While an employee is eating and drinking if at least 6 feet away or barriers used
- When employees are wearing respiratory protection (Don't "double up")
- When it is important to see a person's mouth, In such situations, must ensure employee wears an alternative (e.g. face shield) if the conditions permit it.
- Due to a medical necessity, medical condition, or disability
- When use of a facemask presents a hazard to an employee of serious injury or death (e.g., interfering with the safe operation of equipment)



### 1910.502 (f) - PPE (continued)

- Respirators and other PPE for exposure to people with suspected or confirmed COVID-19
  - Respirators provided and used in accordance with § 1910.134
  - Gloves, an isolation gown or protective clothing, and eye protection provided and used in accordance with 1910 Subpart I
- Note: When limited supply of FFRs, employers may follow the CDC's "Strategies for Optimizing the Supply of N95 Respirators"

### 1910.502 (f) - PPE (continued)

- Respirators and other PPE based on Standard and Transmission-Based Precautions.
- Use of respirators when not required.
  - The employer <u>may provide</u> a respirator instead of a facemask if following 1910.504.
  - Employers <u>must permit</u> the employee to wear their own respirator instead of a facemask used in accordance with 1910.504.



## 1910.502 (f) & (g) – Aerosol-generating Procedures on a Person with Suspected or Confirmed COVID-19

- Respirators provided and used in accordance with § 1910.134
- Gloves, an isolation gown or protective clothing, and eye protection provided and used in accordance with Subpart I
- Limit the number of employees present
- Perform the procedure in an aerosol infection isolation room (AIIR)
- After the procedure is completed, clean and disinfect the surfaces and equipment



## 1910.502 (h) - Physical Distancing

- Each employee is separated from all other people by at least 6 feet when indoors
- If not feasible for a specific activity (e.g., hands-on medical care), ensure that the employee is as far apart from all other people as is feasible



## 1910.502 (i) - Physical Barriers

- At each <u>fixed work location outside of direct patient care areas</u>
  where 6 feet of distance is not feasible
- Block face-to-face pathways between individuals
- Barrier may have a pass-through space at the bottom



## 1910.502 (j) - Cleaning and Disinfection

#### CDC Guides

- "COVID-19 Infection Prevention and Control Recommendations"
- "Guidelines for Environmental Infection Control"

#### More Frequent:

Patient care areas, resident rooms, and for medical devices and equipment

#### Once per Day:

General High-touch surfaces



## 1910.502 (k) - Ventilation

- Employer-owned or controlled buildings with <u>existing</u> HVAC systems
  - Follow manufacturer's instructions/specifications
  - Maximize outside air and air changes per hour, as appropriate
  - Use air filters with MERV ≥ 13, if compatible with system
  - Replace filters as necessary
  - Maintain clearance of outside air intakes



### 1910.502 (k) - Ventilation (continued)

- Airborne infection isolation rooms (AIIR)
  - Maintain and operate in accordance with design/construction criteria
- Note: Consider other measures to increase ventilation in CDC's "Ventilation Guidance"



## 1910.502 (I) - Health Screening and Medical Management

- Screening of employees
  - Before each workday and each shift
  - Self-monitoring or conducted in-person by employer
  - Any <u>required</u> screening COVID-19 tests at no cost to employees
- Employee notification to employer of COVID-19 illness or symptoms
  - Confirmed positive test, diagnosis
  - Suspected diagnosis (told by HCP)
  - Recent loss of taste and/or smell
  - Fever ≥ 100.4 °F and new unexplained cough with shortness of breath

# 1910.502 (I) - Health Screening and Medical Management (continued)

- Employer notification to employees of COVID-19 exposure
  - Triggered by any positive person in the workplace (except patients in worksites where services normally provided to COVID-19 patients)
  - Within 24 hours
  - Each employee not wearing respirator/other required PPE
    - Who had <u>close contact</u>: dates that contact occurred
    - Who worked in a portion of the workplace in which that person was present during potential transmission period: dates the person was in the workplace



# 1910.502 (I) - Health Screening and Medical Management (continued)

- Notification of <u>other employers</u> whose employees were not wearing respirators/other required PPE
  - Who had close contact
  - Who worked in a portion of the workplace in which the person was present during the potential transmission period

## 190.502 (I) - Medical Removal

- Persons meeting positive test/diagnosis criteria: immediately removed until they meet return to work criteria
- Persons meeting <u>suspected diagnosis/symptom criteria</u>: immediately removed until they meet return to work criteria <u>or</u> have a negative PCR test
- Persons with close contact must be removed immediately either:
  - For 14 days, or
  - Until they have a negative PCR test taken after at least 5 days, or
  - Exemption: if asymptomatic and fully vaccinated or recovered from COVID-19 in the past 3 months
- Working remotely or in isolation is acceptable alternative to removal

## 1910.502 (I) - Medical Removal Protection Benefits

- Employers with ≤ 10 employees exempt from removal pay
- Working remotely or in isolation: same pay and benefits
- Removed employees maintain regular pay and benefits:
  - Up to \$1400 per week
  - Employers with < 500 employees: in third week of removal, limited to only 2/3 of pay up to \$200 per day</li>
  - Payment reduced by compensation from any other source
- Return to work: same job status, rights, and benefits



## 1910.502 (m) - Vaccination

- The employer must support vaccination by providing reasonable time and paid leave
  - For vaccination
  - For any side effects experienced following vaccination
  - Healthcare workers in New Mexico now required 8/19/2020

### 1910.502 (n) - Training

- Each employee, in language and literacy level the employee understands
- Content
  - COVID-19: transmission, hygiene, ways to reduce risk of spread, signs and symptoms, risk factors for severe illness, when to seek medical care
  - Employer-specific policies and procedures on patient screening and management
  - Workplace tasks and situations that could result in infection
  - Workplace policies and procedures for preventing the spread

## 1910.502 (n) - Training (continued)

#### Content (continued)

- Policies and procedures for PPE
- Workplace policies and procedures for cleaning and disinfection
- Workplace policies and procedures for health screening and medical management
- Sick leave policies
- The identity of the safety coordinator(s) specified in the plan
- Details of the standard and how the employee can obtain copies as well as copies of employer-specific policies and procedures

## 1910.502 (n) - Training (continued – 2)

- Additional training
  - Changes in the workplace or employee's job
  - Changes in policies or procedures
  - Indications that the employee has not retained understanding or skill
- Training oversight or provision by a person knowledgeable in the subject matter related to employee's job duties
- Opportunity for interactive questions and answers



## 1910.502 (o) - Anti-Retaliation

- Employers must
  - Inform employees of their right to protections
  - Not discharge or discriminate against any employee for exercising rights under the standard

## 1910.502 (p) - Requirements Implemented at No Cost to Employees

- Implementation of requirements is at no cost to employees
- Exception: employee self-monitoring for signs/symptoms of infection



## 1910.502 (q) - Recordkeeping

- Exemption: Employers with ≤ 10 employees
- Required records
  - All versions of COVID-19 plan
  - Log of COVID-19 positives (regardless of whether work-related)
    - Employee's name, contact information, occupation, location of work, date of last day at workplace, date of positive test or diagnosis, first date of symptoms if any
    - Recorded within 24 hours of the employer learning that the employee is COVID-19 positive



## 1910.502 (q) - Recordkeeping (continued)

- Available by end of next business day after a request
  - COVID-19 plan: to employees, personal representatives, authorized representatives
  - Individual COVID-19 log entry for a particular employee: to the employee,
    anyone having written authorized consent from employee
  - Redacted version of COVID-19 log with personally identifying information removed: to any employee, personal representatives, authorized representatives (NM OSHA does require some personal information sharing of positive cases)

## 1910.502 (r) - Reporting COVID-19 Fatalities and Hospitalizations to OSHA

- Work-related COVID-19 fatalities within 8 hours of learning of the fatality
- Work-related in-patient hospitalizations within 24 hours of learning of the hospitalization

## **1910.502 (s) – Compliance Dates**

- ETS effective immediately upon publication in FR (June 21, 2021)
- Comply with all requirements except paragraphs (i), (k), and (n) of this section by 14 days after publication in FR. (July 6, 2021)
- (ii) Employers must comply with paragraphs (i), (k), and (n) of this section by 30 days after publication in FR. (**July 21, 2021**)

## Topic 3

## **Mini Respiratory Protection Program**



## 1910.504 - Mini Respiratory Protection Program

- Applies only to respirator use in accordance with 1910.502(f)
  (4): <u>Use of respirators when not required</u>
  - When the <u>employer provides</u> a respirator to the employee instead of a facemask as required by (f)(1)
  - When an <u>employee provides</u> their own respirator instead of a facemask required by (f)(1)



# **Key Elements of Mini Respiratory Program vs. Respiratory Protection Standard**

Key Program Element	Mini RPP (1910.504)	Normal RPP (1910.134)
Medical Evaluation	No	Yes
Fit Testing	No	Yes
Written Program	No	Yes
User Seal Checks	Yes	Yes
Training	Yes	Yes

## Applicability – Mini Respirator Protection Program vs. Respiratory Protection Standard

Healthcare	.504	.134
1910.502(f)(2) – for exposure with suspected/confirmed COVID-19	No	Yes
1910.502(f)(3) – for AGP¹ on person with suspected/confirmed COVID-19	No	Yes
1910.502(f)(4) – in place of facemask when respirator is not required	Yes	No
1910.502(f)(5) – for Standard and Transmission/Based Precautions/good biosafety practices	No	Yes

<sup>1</sup>AGP = aerosol-generating procedure

## 1910.504 (c) - Responsibilities of Employers When Workers Provide Their Own Respirators

 Provide workers with notice in 1910.504(c) – informs them to take precautions to be sure the respirator itself does not present a hazard



## 1910.504 (d) - Training Responsibilities of Employers When They Provide Respirators to Workers

- Provide specific training, e.g.,
  - How to inspect/put on/remove/use a respirator
  - Limitations and capabilities of the respirator
  - How to store/maintain/inspect a respirator
  - How to conduct a user seal check
  - How to recognize medical signs/symptoms and what to do
- Training must be in appropriate language and literacy level



## 1910.504 (d) - Other Responsibilities of Employers When They Provide Respirators to Workers

- Ensure that user seal checks are conducted for tight-fitting respirators and that any problems discovered are corrected
- Ensure that if respirators are reused, they are reused properly
- Ensure the discontinuation of respirator when employee or supervisor reports medical signs or symptoms related to ability to wear a respirator.

#### **Connect with OSHA**

- OSHA COVID-19 Website: <a href="https://www.osha.gov/coronavirus/">https://www.osha.gov/coronavirus/</a>
- <u>Subscribe to QuickTakes</u>: OSHA's online newsletter provides the latest news about enforcement actions, rulemaking, outreach activities, compliance assistance, and training and educational resources.
  <a href="https://www.osha.gov/quicktakes/">https://www.osha.gov/quicktakes/</a>
- <u>Call OSHA</u> to report emergencies, unsafe working conditions, safety and health violations, to file a complaint, or to ask safety and health questions. <u>New Mexico OSHA: 505-476-8700 or Toll Free: 877-610-6742</u>
- Current NM PHOs: <a href="https://cv.nmhealth.org/public-health-orders-and-executive-orders/">https://cv.nmhealth.org/public-health-orders-and-executive-orders/</a>
- NM OSHA Website: https://www.env.nm.gov/occupational\_health\_safety/
- My contact information: Daniel A. Lujan, Daniel.Lujan@state.nm.us, 505-690-1075