



COVID-19 RESPONSE PLAN AND JOB HAZARD ANALYSIS

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BACKGROUND

Coronaviruses are a large group of viruses that cause diseases in animals and humans. They often circulate among animals and can sometimes evolve and infect people. In humans, the viruses can cause mild respiratory infections, like the common cold, but can lead to serious illnesses, like pneumonia.

The 2019 novel coronavirus (COVID-19, previously known as 2019-nCoV) emerged in a seafood and poultry market in Wuhan, China in December 2019. It likely spread from an unknown animal to humans. Human-to-human transmission occurs through close contact.

What are the symptoms? How can you tell the difference between the novel coronavirus and a cold or influenza (flu)?

The symptoms are similar, including fever, cough, and shortness of breath. Some patients with novel coronavirus have had gastrointestinal problems or diarrhea. To diagnose a potential case, healthcare professionals may use a COVID-19 diagnostic test and/or run tests to rule out flu and other infections.

Although there is no vaccine available to prevent COVID-19 at this time, it is important to ensure that you and your family's vaccinations are up to date, including flu and pneumococcal (pneumonia) vaccines. This will help reduce the pressure on the healthcare system by reducing vaccine-preventable diseases. Everyone age 6 months and older should be vaccinated against flu every year.

Who is most at risk?

Individuals at high-risk of severe illness from COVID-19 include the following:

- Older adults (age 65 years and older)
- People with chronic medical conditions like heart disease, diabetes, and lung disease, including moderate to severe asthma
- Those who live in a nursing home or long-term care facility
- People of any age with severe obesity (body mass index [BMI] >40)

Others who may be at high risk include those who are immunocompromised due to cancer treatment and other conditions. People of any age with severe obesity (body mass index [BMI] >40) or certain underlying medical conditions, particularly if not well controlled, such as those with renal failure or liver disease may also be at risk.

Pregnant women should be monitored since they are known to be at risk with severe viral illness; however, available data on COVID-19 has not shown increased risk.

View the [CDC website](#) for the most up-to-date information on those at higher risk of serious illness from COVID-19.

Are people contagious before they develop symptoms?

There is evidence that the novel coronavirus can be spread before an individual develops symptoms. This poses a problem because people who do not know they are infected may continue to go to work, school, and other public places. People who are sick and have symptoms are more likely to stay home, which means fewer opportunities for the virus to spread from one person to another. When asymptomatic transmission occurs, infection control experts and public health officials may need to take additional measures, such as social distancing, isolating patients, or using quarantines.

What should people do if they think they may have been infected?

Individuals who think they may have been exposed to coronavirus, either through travel to an affected area or close contact with someone who has a confirmed case, should call a healthcare professional if they have any of the symptoms.

It is important to call first, so that the clinic or hospital can prepare and prevent the spread of infection. To diagnose a potential case, healthcare professionals will run tests to rule out flu and other common infections.

What can individuals do to protect themselves?

Healthy habits can help prevent the spread of coronavirus and other respiratory viruses:

- Wash hands often with soap and water for at least 20 seconds
- Avoid touching your eyes, nose, and mouth
- Avoid close contact with people who are sick
- Stay home when you are sick
- Cover your coughs and sneezes
- Clean and disinfect common objects and surfaces

Check with the Centers for Disease Control and Prevention (CDC) for specific guidance for travelers.

There is currently no vaccine to prevent COVID-19 infection, but there are vaccines available to help prevent flu. Annual flu vaccination is recommended in the US for everyone age 6 months and older.

Do face-masks protect against COVID-19?

Wearing an uncertified respirator cloth face covering in public cannot fully prevent an infected individual from spreading the virus and may not protect an individual from getting infected. It is still important to stay home and avoid crowds, practice social distancing (stay at least 6 feet apart) when in public, and wash hands properly and frequently.

Recent studies have shown that individuals who are infected with COVID-19 may not show any symptoms, but can still spread the virus. In light of this new evidence, CDC now recommends wearing a cloth face covering when it is necessary to go out in public for essential errands such as getting groceries, medication, or other essential supplies.

Cloth face coverings can be made from household items. Surgical masks and N-95 respirators are in short supply and should be reserved for healthcare professionals and other first responders.

Do we know how long coronavirus lives on surfaces?

Initial reports indicate that the COVID-19 virus can live for several hours to days in aerosols and on surfaces. It is important to clean and disinfect frequently touched surfaces each day.

What are the best cleaners to remove coronavirus germs?

It is important to clean and disinfect frequently touched surfaces on a regular basis. Detergent or soap and water can be used to clean surfaces. To disinfect, use diluted household bleach solutions, alcohol solutions with at least 70% alcohol, or common household disinfectants, which are effective in killing this virus and can be used safely.

Hand hygiene is most important because hands are the primary means of transmission for this virus. There are many things that we cannot control but we can wash hands and keep them away from our faces.

What is social distancing?

Deliberately increasing the physical space between people to avoid spreading illness. Staying at least 6 feet away from other people lessens your chances of catching or spreading COVID-19.

Is it safe to go to the dentist — or any other routine healthcare provider — in the near future?

The current recommendation is to postpone elective dental procedures and elective surgeries, to avoid putting an extra strain on the US healthcare system. In an emergency, call 911. If you have a specific issue that needs attention, talk with a healthcare professional that can provide advice. Routine visits should be postponed at this time.

Is it dangerous to be outdoors?

Going out for a walk is good exercise and psychologically beneficial. But, avoid contact with people who are sick, and maintain at least a 6-foot distance between others. If you are age 60 or over or have an underlying health condition such as heart disease, lung disease, or diabetes, be extra careful about being around others—either indoors or outdoors.

What needs to happen for the social separation (distancing) to eventually end?

Pay attention to public health authorities, follow the advice, and continue healthy habits like washing your hands and avoiding touching your face. In the State of Maryland, Virginia and DC Executive Orders have been handed down prohibiting gatherings and requiring people to remain 6 feet from each other. In some jurisdictions like Prince Georges County Maryland cloth mask are required when shopping in Big Box stores or riding public transportation. In addition the CDC has released recommendations for people to make and wear cloth mask. Local Health Authorities have also been given the right to shut down construction sites if COVID-19 recommendations and policies are not being followed.

Will warmer weather mean fewer cases of novel coronavirus?

COVID-19 is a new virus in humans, so it is too early to predict whether it will become seasonal. If it behaves like other respiratory viruses, including flu, it could abate as the weather gets warmer and become part of the usual cold and flu season. But scientists do not yet have enough information to know for certain. That's why ongoing research to develop vaccines and antiviral drugs that are effective against coronaviruses is so important.

Should people avoid products shipped from China?

The virus likely would not survive such a trip. Touching a surface may transmit Coronaviruses, but they are more likely to be transmitted through the air. People can protect themselves through proper hand washing.

Why did public health authorities declare an emergency, and what does that mean?

US Health Secretary Alex M. Azar II declared a public health emergency on January 31, 2020 to help public health officials across the country respond to the novel coronavirus.

The emergency declaration gives state and local health departments more flexibility to shift staff and resources to coronavirus response activities. CDC continues to work closely with state health departments on disease surveillance, contact tracing, and providing interim guidance for clinicians on identifying and treating coronavirus infections.

I heard that coronavirus is a pandemic. What does that mean?

The World Health Organization (WHO) on March 11, 2020 declared COVID-19 a pandemic. Scientists use that term to describe a new virus that emerges and spreads to multiple countries throughout the world. It means that the new virus is widespread and is spreading efficiently in those countries, but it does not tell us how severe the virus may be.

How do outbreaks normally end?

There are several ways that an outbreak can come to an end. The Severe Acute Respiratory Syndrome (SARS) outbreak was controlled through close coordination between public health officials and clinicians, who were able to diagnose cases, isolate infected patients, trace their contacts, and implement strong infection control policies. An outbreak can dwindle once the virus has infected most of the people who are susceptible to it, because it has fewer targets, as was the case with the Zika virus outbreaks in recent years. If COVID-19 behaves like other respiratory viruses, including flu, it could abate as the weather gets warmer and may become part of the annual cold and flu respiratory season.

HAZARD RECOGNITION

What is the risk to U.S. workers?

The risk from COVID-19 to Americans depends on characteristics of the virus, including how well it spreads between people; the severity of resulting illness; and the medical or other measures available to control the impact of the virus and the relative success of these measures. Fortunately construction remains at low to medium risk.

How does COVID-19 Spread?

Although the ongoing outbreak likely resulted originally from people who were exposed to infected animals, COVID-19, like other coronaviruses, can spread between people. Infected people can spread COVID-19 through their respiratory secretions, especially when they cough or sneeze. [According to the CDC](#), spread from person-to-person is most likely among close contacts (about 6 feet). Person-to-person spread is thought to occur mainly via respiratory droplets produced when an infected person coughs or sneezes, similar to how influenza and other respiratory pathogens spread. These droplets can land in the mouths or noses of people who are nearby or possibly be inhaled into the lungs. There is much more to learn about the transmissibility, severity, and other features associated with COVID-19, and investigations are ongoing.

Workers Who May Have Exposure Risk

Workers with increased exposure risk include those involved in:

- Healthcare (including pre-hospital and medical transport workers, healthcare providers, clinical laboratory personnel, and support staff).
- Death care (including coroners, medical examiners, and funeral directors).
- Airline operations.
- Waste management.
- Travel to areas where the virus is spreading.

IDENTIFYING SOURCES OF POTENTIAL EXPOSURE

OSHA [standards](#), including those for personal protective equipment (PPE, [29 CFR 1910.132](#)) and respiratory protection ([29 CFR 1910.134](#)), require employers to assess the hazards to which their workers may be exposed.

In assessing potential hazards, employers should consider whether or not their workers may encounter someone infected with COVID-19 in the course of their duties. Employers should also determine if workers could be exposed to environments (e.g., worksites) or materials (e.g., laboratory samples, waste) contaminated with the virus.

Depending on the work setting, employers may also rely on identification of sick individuals who have signs, symptoms, and/or a history of travel to COVID-19-affected areas that indicate potential infection with the virus, in order to help identify exposure risks for workers and implement appropriate control measures.

The [Control and Prevention](#) page provides guidance for controlling exposures among workers with risk.

Additional Information

For all workers, regardless of specific exposure risks, it is always a good practice to:

- Frequently wash your hands with soap and water for at least 20 seconds. When soap and running water are unavailable, use an alcohol-based hand rub with at least 60% alcohol. Always wash hands that are visibly soiled.
- Avoid touching your eyes, nose, or mouth with unwashed hands.
- Avoid close contact with people who are sick.

The U.S. Centers for Disease Control and Prevention has developed [interim guidance for businesses and employers](#) to plan for and respond to COVID-19. The interim guidance is intended to help prevent workplace exposures to acute respiratory illnesses, including COVID-19. The guidance also addresses considerations that may help employers prepare for more widespread, community outbreaks of COVID-19, in the event that this kind of transmission begins to occur. The guidance is intended for non-healthcare settings; healthcare workers and employers should consult guidance specific to them, below. Interim guidance for most U.S. workers and employers of workers unlikely to have occupational exposures to COVID-19

For most types of workers, the risk of infection with COVID-19 is similar to that of the general American public.

Employers and workers in operations where there is no specific exposure hazard should remain aware of the evolving outbreak situation. Changes in outbreak conditions may warrant additional precautions in some workplaces not currently highlighted in this guidance.

OSHA's infection prevention recommendations follow the hierarchy of controls, including using engineering and administrative controls and safe work practices to protect workers from exposure to COVID-19. Depending on work tasks and potential exposures, appropriate PPE for protecting workers from the virus may include gloves, gowns, masks, goggles or face shields, and/or respirators.

ENGINEERING CONTROLS

The novel coronavirus (officially called COVID-19) is believed to spread from person-to-person, primarily through respiratory droplets produced when an infected person coughs or sneezes. The virus is also believed to spread by people touching a surface or object and then touching one's mouth, nose, or possibly the eyes.

- Assess the hazards to which workers may be exposed.
- Have employees fill out a COVID-19 questionnaire upon arrival to work
- Provide PPE (gloves and mask) in addition to Hard Hats and Safety Glasses
- Follow JHA (Job Hazard Analysis) for COVID-19
- Frequently wash your hands with soap and water for at least 20 seconds.
- Ensure that hand wash stations are available, with adequate water and soap or use an alcohol-based hand rub that contains at least 60% alcohol.
- Avoid touching your eyes, nose, or mouth with unwashed hands.
- Maintain 6 feet of social distancing in ALL work areas unless workers have appropriate Respiratory Protection
- Maintain Housekeeping on a regular basis

Stop the Spread of COVID-19

- *Stay home
- *Wear a face mask if you must go out for essential supplies
- *Practice social distancing (stay at least 6 feet apart)
- *If you need medical care, be sure to call first
- *Practice good personal health habits (#WashYourHands)
- *Avoid touching your face (eyes, nose, and mouth)
- *Cover your coughs and sneezes
- *Clean frequently touched surfaces and objects daily

www.nfid.org/coronaviruses

National Foundation for Infectious Diseases

IDENTIFY AND ISOLATE SUSPECTED CASES

In all workplaces where exposure to the COVID-19 may occur, prompt identification and isolation of potentially infectious individuals is a critical first step in protecting workers, visitors, and others at the worksite.

- Immediately isolate people suspected of having COVID-19 on your construction site.
- For example, move potentially infectious people to isolation rooms and close the
- doors.
- Take steps to limit spread of the person's infectious respiratory secretions, including by providing them a face-mask and asking them to wear it, if they can tolerate doing so. Note: A surgical mask on a patient or other sick person should not be confused with PPE for a worker; the mask acts to contain potentially infectious respiratory secretions at the source (i.e., the person's nose and mouth).
- Protect workers in close contact* with the sick person by using additional engineering and administrative control, safe work practices and PPE.
- The suspected person should be tested and quarantined for 14 days.
- It is RECOMMENDED that the construction site be shut down for at least 72 hours while a cleaning crew disinfects the site. (IF A CASE IS CONFIRMED and workers remain Asymptomatic)
- Please note that OSHA 1910.134 Respiratory Regulations are still in effect for construction workers. It has been announced by OSHA that discretion will be given to Compliance Officers.

**CDC defines "close contact" as being about six (6) feet (approximately two (2) meters) from an infected person or within the room or care area of an infected patient for a prolonged period while not wearing recommended PPE. Close contact also includes instances where there is direct contact with infectious secretions while not wearing recommended PPE. Close contact generally does not include brief interactions, such as walking past a person.*

COVID-19 TESTING

Not everyone needs to be tested for COVID-19. Here is some information that might help in making decisions about seeking care or testing.

- Most people have [mild illness](#) and are able to [recover at home](#).
- There is no treatment specifically approved for this virus.
- Testing results may be helpful to inform decision-making about whom you come in contact with.

How to get tested

If you have symptoms of COVID-19 and want to get tested, try calling your state or local health department or a medical provider. While supplies of these tests are increasing, it may still be difficult to find a place to get tested.

What to do after you are tested

If you test positive for COVID-19, see [If You Are Sick or Caring for Someone](#).

If you test negative for COVID-19, you probably were not infected at the time your specimen was collected. However, that does not mean you will not get sick. It is possible that you were very early in your infection at the time of your specimen collection and that you could test positive later, or you could be exposed later and then develop illness. In other words, a negative test result does not rule out getting sick later.

CDC expects that widespread transmission of COVID-19 in the United States will occur. In the coming months, most of the U.S. population will be exposed to this virus. You should continue to practice all the protective measures recommended to keep yourself and others free from illness. See [How to Protect Yourself](#).

If you are very sick get medical attention immediately

When to Seek Medical Attention

If you develop emergency warning signs for COVID-19 get medical attention immediately. Emergency warning signs include*:

- Trouble breathing
- Persistent pain or pressure in the chest
- New confusion or inability to arouse
- Bluish lips or face

*This list is not all-inclusive. Please consult your medical provider for any other symptoms that are severe or concerning.

ENVIRONMENTAL DECONTAMINATION

When someone touches a surface or object contaminated with the virus that causes COVID-19, and then touches their own eyes, nose, or mouth, they may expose themselves to the virus.

Because the transmissibility of COVID-19 from contaminated environmental surfaces and objects is not fully understood, employers should carefully evaluate whether or not work areas occupied by people suspected to have virus may have been contaminated and whether or not they need to be decontaminated in response.

Workers who conduct cleaning tasks must be protected from exposure to blood, certain body fluids, and other potentially infectious materials covered by OSHA's Bloodborne Pathogens standard ([29 CFR 1910.1030](#)) and from hazardous chemicals used in these tasks. In these cases, the PPE ([29 CFR 1910 Subpart I](#)) and Hazard Communication ([29 CFR 1910.1200](#)) standards may also apply. Do not use compressed air or water sprays to clean potentially contaminated surfaces, as these techniques may aerosolize infectious material.

RESPIRATORY PROTECTION

The CDC recommends using cloth mask to protect people from COVID-19 however the best form of protection in terms of respirator use at the basic level is a NIOSH Certified N95 Respirator. Some refer to it as a dusk mask; however if the mask has NIOSH N95 stamped on it is determined by OSHA to be a particulate face-piece, in other words a respirator.



If using a respirator in the work place OSHA still requires Employers to follow 1910.134 Respiratory Protection Standards which include a Medical Evaluation and Fit test. This is important as to determine if the worker is fully protected from the hazard. In terms of non-mandatory use as in if there is no hazard that requires a respirator but employees still desire to wear a respirator, then the employer must show OSHA 1910.134 Appendix D to the employee/s.

OSHA NEW RESPIRATORY MEMORANDUM:

OSHA requires workers to reassess processes where respiratory protection isn't the most feasible protection. Alternative respirators that provide equal or better protection are allowed. IF construction workers cannot obtain mask at this time OSHA is now allowing expired respirators to be used and reused if the employer has exhausted all means. In addition those means must be documented.

OSHA is also relaxing the requirement for NIOSH respirators. Workers are now allowed to use other certified respirators except the People's Republic of China unless that company has a NIOSH certification. If no NIOSH respirators cannot be obtained a regular dust mask can be used.

APPENDIX D TO SEC. 1910.134 (MANDATORY)

INFORMATION FOR EMPLOYEES USING RESPIRATORS WHEN NOT REQUIRED UNDER THE STANDARD

You should do the following:

1. Read and heed all instructions provided by the manufacturer on use, maintenance, cleaning and care, and warnings regarding the respirators limitations.
2. Choose respirators certified for use to protect against the contaminant of concern. NIOSH, the National Institute for Occupational Safety and Health of the U.S. Department of Health and Human Services, certifies respirators. A label or statement of certification should appear on the respirator or respirator packaging. It will tell you what the respirator is designed for and how much it will protect you.
3. Do not wear your respirator into atmospheres containing contaminants for which your respirator is not designed to protect against. For example, a respirator designed to filter dust particles will not protect you against gases, vapors, or very small solid particles of fumes or smoke.
4. Keep track of your respirator so that you do not mistakenly use someone else's respirator.

WORKER TRAINING

Train all workers with reasonably anticipated occupational exposure to COVID-19 (as described in this document) about the sources of exposure to the virus, the hazards associated with that exposure, and appropriate workplace protocols in place to prevent or reduce the likelihood of exposure. Training should include information about how to isolate individuals with suspected or confirmed COVID-19 or other infectious diseases, and how to report possible cases. Training must be offered during scheduled work times and at no cost to the employee.

Workers required to use PPE must be trained. This training includes when to use PPE; what PPE is necessary; how to properly don (put on), use, and doff (take off) PPE; how to properly dispose of or disinfect, inspect for damage, and maintain PPE; and the limitations of PPE. Applicable standards include the PPE (29 CFR 1910.132), Eye and Face Protection (29 CFR 1910.133), Hand Protection (29 CFR 1910.138), and Respiratory Protection (29 CFR 1910.134) standards. The OSHA website offers a variety of training videos on respiratory protection.

When the potential exists for exposure to human blood, certain body fluids, or other potentially infectious materials, workers must receive training required by the Bloodborne Pathogens (BBP) standard (29 CFR 1910.1030), including information about how to recognize tasks that may involve exposure and the methods, such as engineering controls, work practices, and PPE, to reduce exposure.