



# COVID-19 Workplace Requirements

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SUMMARY OF MIOSHA EMERGENCY RULES

AND

SPECIFIC RULES DEFINED IN SECTION 5 FOR HEALTH FACILITIES OR AGENCIES, INCLUDING OUTPATIENT HEALTH-CARE FACILITIES, CLINICS, PRIMARY CARE PHYSICIAN OFFICES, DENTAL OFFICES, AND VETERINARY CLINICS

# Important Note

MDHHS has issued COVID-19 Public Health Orders regarding requirements about face coverings for the public, gathering limitations, and other public health concerns.

Please visit [Michigan.gov/Coronavirus](https://Michigan.gov/Coronavirus) for information on these public health orders.

The requirements in this presentation are required by MIOSHA Emergency Rules for COVID-19.

# Overview

- ❑ Requirements for All Workplaces
  - ❑ Definitions
  - ❑ Exposure Determination
  - ❑ COVID-19 Preparedness & Response Plan
  - ❑ Basic Infection Control Measures
  - ❑ Health Surveillance
  - ❑ Workplace Controls
  - ❑ Person Protective Equipment
  - ❑ Employee Training
  - ❑ Recordkeeping
- ❑ “INDUSTRY” Requirements (or Resources)

# MIOSHA Emergency Rules for COVID-19

REQUIREMENTS  
FOR ALL  
WORKPLACES

# Definitions

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- **Close Contact**: someone who was within 6ft of an infected person for at least 15 minutes starting from 2 days before illness onset (or for asymptomatic persons, 2 days prior to specimen collection) until the time the person is isolated
- **COVID-19**: coronavirus disease 2019, a severe acute respiratory disease characterized by symptoms including fever, cough, fatigue, and shortness of breath which may progress to pneumonia, multi-organ failure, & death
- **Known Cases of COVID-19**: person who have been confirmed through diagnostic testing to have COVID-19
- **SARS-CoV-2**: severe acute respiratory syndrome coronavirus 2, the virus which is the causative agent of COVID-19
- **Suspected Cases of COVID-19**: persons who have symptoms of COVID-19 but have not been confirmed through diagnostic testing or person who have had close contact with a person who has been confirmed through diagnostic testing

# Exposure Determination

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- ❑ Evaluate routine & reasonably anticipated tasks/procedures to determine actual OR reasonably anticipated exposures to SARS-CoV-2
- ❑ Categorize tasks/procedures into the following risk categories:
  - ❑ Lower Exposure Risk
  - ❑ Medium Exposure Risk
  - ❑ High Exposure Risk
  - ❑ Very High Exposure Risk
- ❑ Use OSHA guidance for additional resources for exposure determination
  - ❑ [Guidance on Preparing Workplaces for COVID-19](#)
  - ❑ [COVID-19 Hazard Recognition](#)

**Occupational Risk Pyramid  
for COVID-19**



# Exposure Determination

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## □ Exposure Risk Categories

### ■ Lower Exposure Risk

- Tasks do not require contact with people known or suspected of being infected with SARS-CoV-2
- Tasks do not have frequent close contact with the public
- Workers have minimal occupational contact with coworkers & the public

### ■ Medium Exposure Risk

- Tasks require frequent OR close contact with people who may be infected with SARS-CoV-2, but who are NOT a known/suspected COVID-19 patient
- In areas with ongoing community transmission, workers that have contact with the public (schools, high-population-density work environments, high-volume retail settings)
- In areas without ongoing community transmission, workers that have frequent contact with travelers from areas with ongoing community transmission

# Exposure Determination

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## □ Exposure Risk Categories (cont.)

### ■ High Exposure Risk

- Tasks with high potential for exposure to known or suspected sources of COVID-19
- Worker could include: licensed health care professionals, medical first responders, nursing home employees, law enforcement, correctional officers, or mortuary workers

### ■ Very High Exposure Risk

- Tasks with high potential for exposure to known or suspected sources of COVID-19 during specific medical, postmortem, or laboratory procedures
- Workers could include:
  - Healthcare workers (doctors, nurses, dentists, paramedics, EMTs) performing aerosol-generating procedures on known/suspected COVID-19 patients
  - Healthcare or Laboratory workers collecting or handling specimens from known/suspected COVID-19 patients
  - Morgue workers performing autopsies on bodies of people who are known/suspected of having COVID-19 at the time of their death

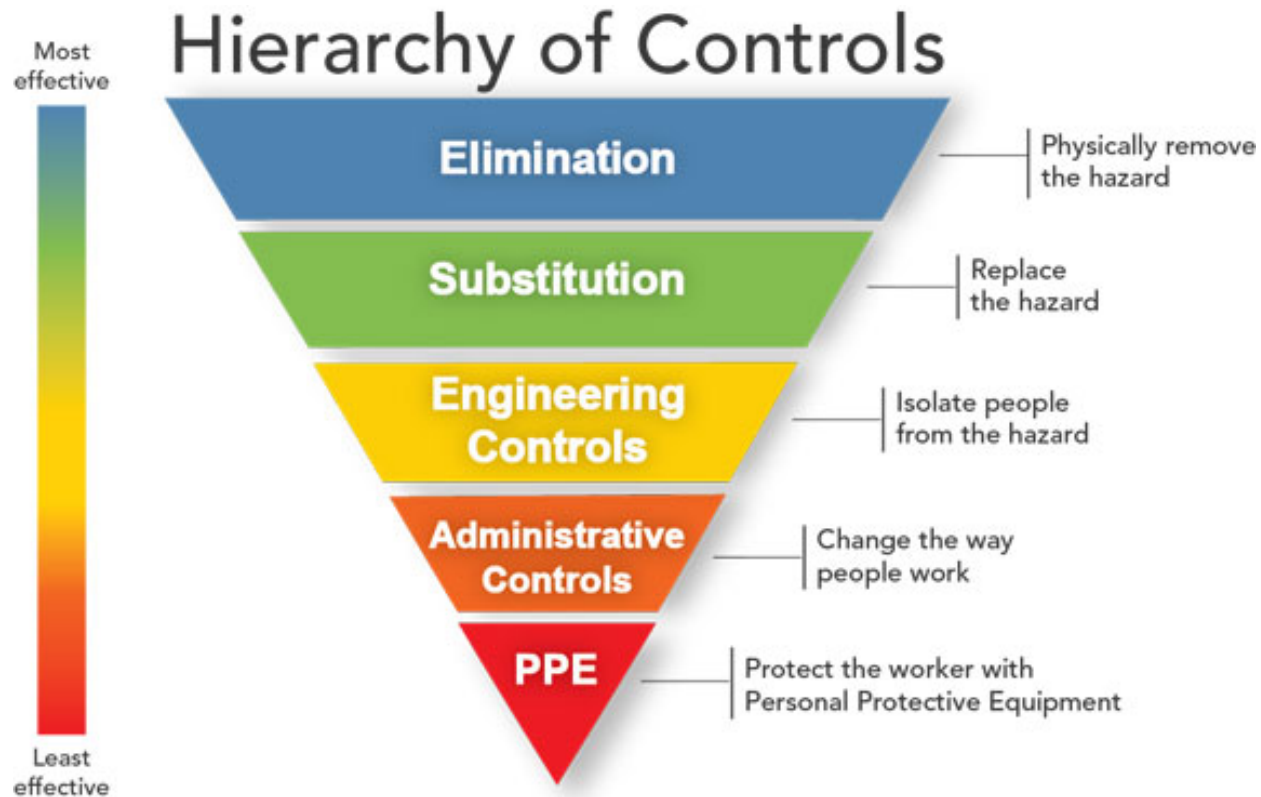


# COVID-19 Preparedness & Response Plan

[MIOSHA Sample COVID-19  
Preparedness & Response Plan for  
Low-Med Risk Employees](#)

- ❑ Develop & Implement a written COVID-19 Preparedness & Response plan
- Use current OSHA guidance for COVID-19 - [Guidance on Preparing Workplaces for COVID-19](#)
- Use current CDC COVID-19 guidance
- The preparedness & response plan **shall** include the employee exposure determination & **shall** detail measures to prevent employee exposure, including any:
  - Engineering Controls
  - Administrative Controls
  - Basic Infection Prevention Measures
  - Person Protective Equipment
  - Health Surveillance
  - Training
- The employer **shall** make the preparedness & response plan readily available to employees & their representatives (website, internal network, or hardcopy)

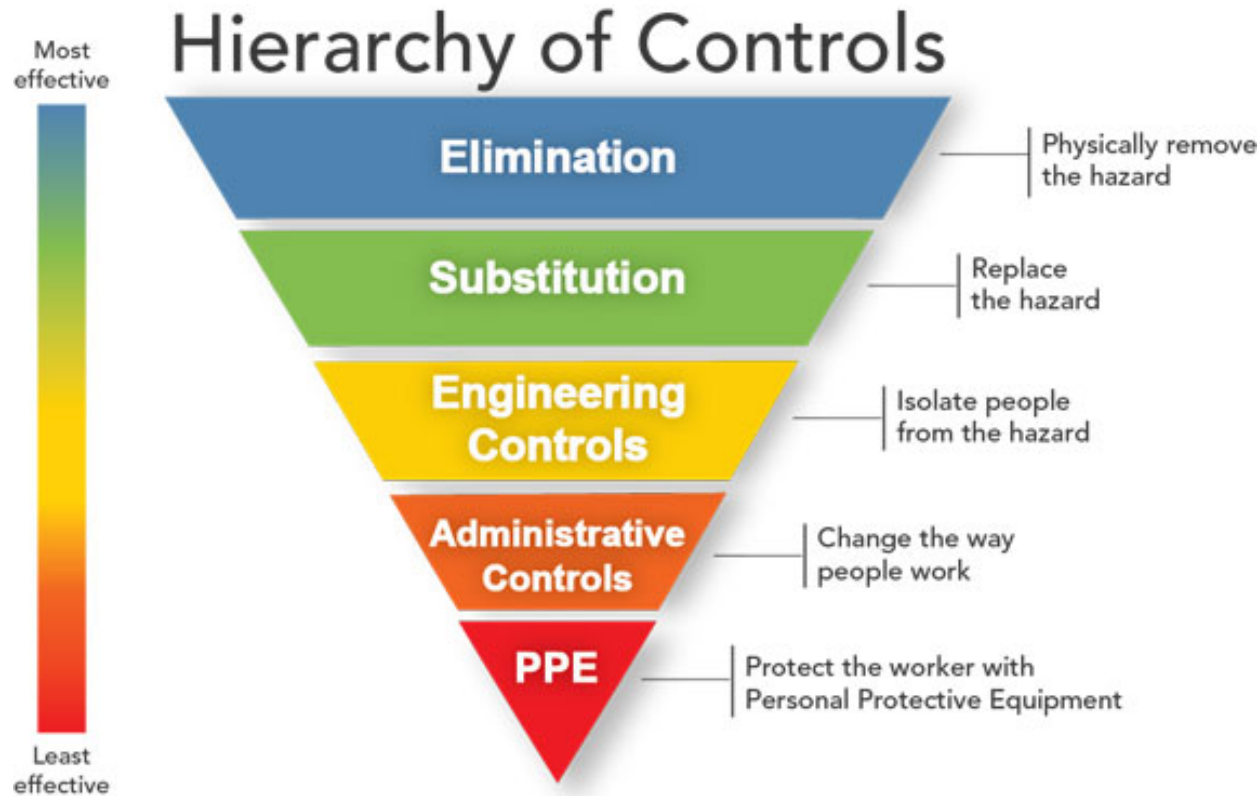
# COVID-19 Preparedness & Response Plan



## ■ Examples of Engineering Controls

- High-efficiency Air Filters
- Increased Ventilation Rates
- Physical Barriers – Clear plastic barriers, sneeze guard, plexiglass
- Installing a drive-thru window

# COVID-19 Preparedness & Response Plan



- Examples of Administrative Controls
  - Restrict non-essential business travel
  - Encourage hand washing and use of hand sanitizer through posters and training
  - Promote remote work
  - Implement rotational shift schedules to reduce the number on employees onsite at the same time
  - Stagger meal and break times
  - Use posters, signs, barriers, or floor markings to reduce congestion

# Basic Infection Prevention Measures

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- ❑ The employer **shall**:
  - ❑ Promote frequent & thorough handwashing, including by providing workers, customers, & worksite visitors a place to wash hands; Provide antiseptic hand sanitizer or alcohol-based hand towelettes containing 60% alcohol when soap & water are unavailable
  - ❑ Require workers who are sick to not report to work or work in an isolated location
  - ❑ Prohibit workers from using other workers' phones, desks, offices, or other work tools & equipment when possible
  - ❑ Create policy prohibit in-person work for employees to the extent that their work activities can feasibly be performed remotely

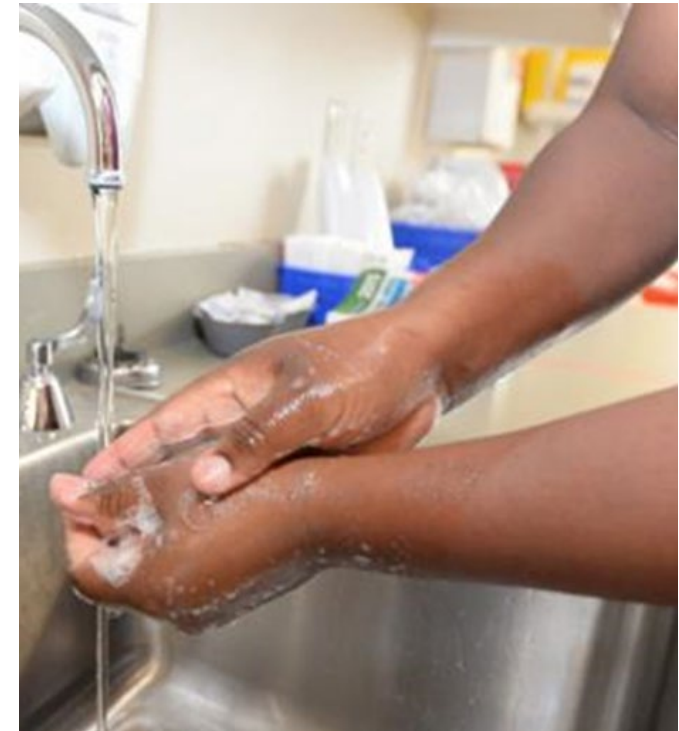


Photo: U.S. Department of Defense

# Basic Infection Prevention Measures (cont)

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- ❑ The employer **shall**:
  - ❑ Increase facility cleaning & disinfection to limit exposure to SARS-CoV-2; focus on:
    - High touch surfaces (e.g. door handles)
    - Parts, products, and shared equipment (e.g tools, machinery, and vehicles)
  - ❑ Use EPA approved disinfectants expected to be effective against SARS-CoV-2: [List N](#)
  - ❑ Follow manufacturer's instructions for cleaning & disinfection products (e.g. concentration, application method, contact time, and PPE)



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# Basic Infection Prevention Measures (cont.)

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## General Information

### ■ Cleaning

- The removal of germs, dirt, and impurities from surfaces. Removes, but does not kill germs
- Use soap & water

### ■ Disinfecting

- The use of chemicals to kill germs on surfaces. Does not necessarily remove germs from a surface

### ■ Common Disinfectants

- EPA List N: Disinfectants for Coronavirus
- Bleach Solution -  $\frac{1}{3}$  cup bleach per gallon water or 4 teaspoons bleach per quart water
- 70% alcohol solutions may also be used – wipes or liquid

# Health Surveillance

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- ❑ The employer **shall** conduct a daily entry self-screening protocol

For all employees and contractors entering the workplace

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graph TD; A[For all employees and contractors entering the workplace] --> B[At minimum, a questionnaire that includes questions about:]; B --> C[Temperature Screening (if possible)];
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At minimum, a questionnaire that includes questions about:

Symptoms of COVID-19

Contact with individuals known or suspected COVID-19

Temperature Screening (if possible)

# Health Surveillance (cont.)

- ❑ The employer **shall**:
  - ❑ Direct employers to promptly report any signs & symptoms of COVID-19 their experiencing to the employer before OR during the work shift
  - ❑ Physically isolate any employees know or suspected to have COVID-19 from the remainder of the workforce, using measure such as, but not limited to:
    - Not allowing known/suspected cases to report to work
    - Sending know/suspected cases away from the workplace
    - Assigning known/suspected cases to work alone at a remote location (e.g. their home), as their health allows





# Health Surveillance (cont.)

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- ❑ When an employer learns of an employee, visitor, or customer with a known case of COVID-19, the employer **shall**:
  - ❑ Immediately notify the local public health department AND
  - ❑ Within 24 hours of learning of the known case, notify any co-workers, contractors, or suppliers who may have come into contact with the person with a known case of COVID-19
- ❑ Employer **shall** allow employees with a known/suspected case of COVID-19 return to the workplace only after:
  - ❑ The individual is no longer infectious according to the latest guidelines from the CDC AND
  - ❑ The individual is released from any quarantine or isolation order by the local public health department
- ❖ CDC Guidance for [Return to Work for Persons with COVID-19 Not in Healthcare](#)
- ❖ CDC Guidance for [Return to Work for Healthcare Personnel with COVID-19](#)

# Workplace Controls

- ❑ The employer **shall** designate one or more worksite COVID-19 safety coordinator
  - ❑ COVID-19 Safety Coordinator
    - Must Implement, monitor, & report on the COVID-19 control strategies required for the worksite
    - Must remain on-site at all times when employees are present on site
    - An on-site employee may be designated to perform the COVID-19 safety coordinator role
- ❑ The employer **shall** place posters in the languages common in the employee population that encourage staying away from work when sick, cough & sneeze etiquette, and proper hand hygiene practices



Fit face covering over mouth and nose



Stay at least 6 feet (about 2 arms' length) from other people.



## Workplace Controls (cont.)

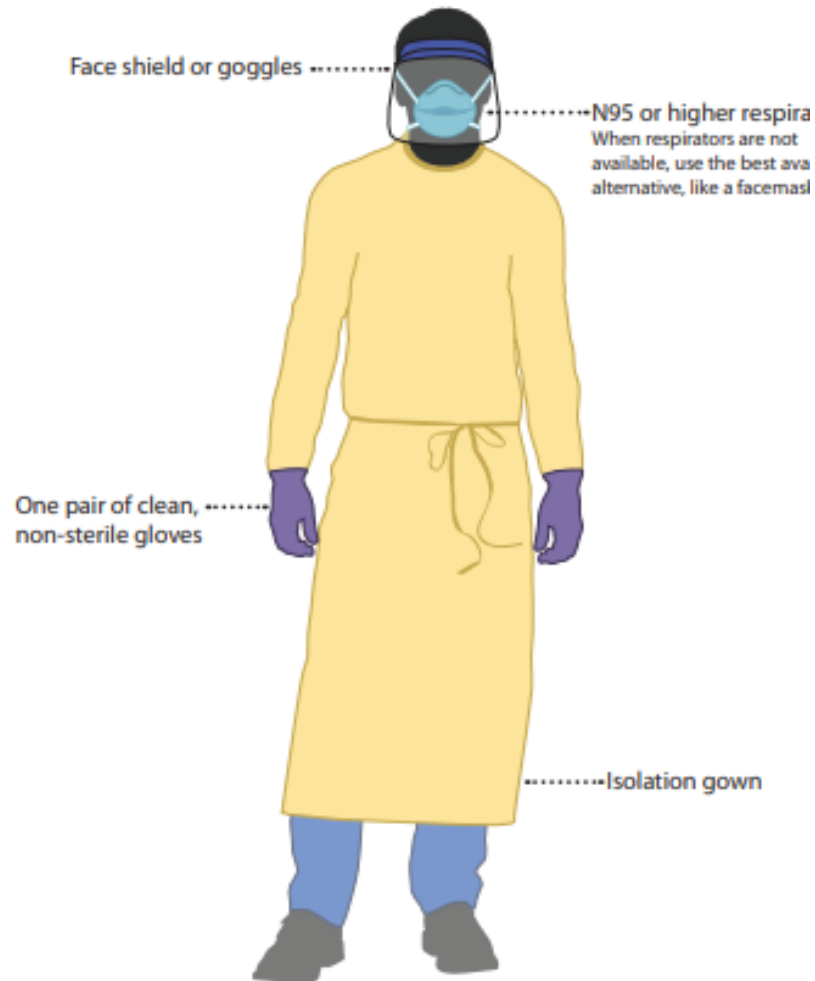
❑ The employer **shall**:

- ❑ Keep everyone on the worksite at least 6ft from one another and reduce congestion
  - ❖ Use ground markings, signs and physical barriers as appropriate to ensure social distancing and reduce congestions
- ❑ Provide non-medical grade face coverings to their employees
- ❑ Require face coverings when employees cannot consistently maintain 6ft of separation from others
- ❑ Consider face shields (in addition to face coverings) when employees are unable to consistently maintain 3ft of separation from others
- ❑ Require face coverings in shared spaces, including during in-person meetings and in restrooms and hallways

# Personal Protective Equipment (PPE)

- The employer **shall**:
- Provide employees with types of PPE, including respirators as necessary, for protection from SARS-CoV-2 appropriate to the exposure risk associated with the job
- Ensure PPE is:
  - Properly worn
  - Used consistently
  - Regularly inspected, maintained, and/or replaced (as necessary)
  - Properly removed, cleaned, and stored or disposed of to avoid contamination to self, others, or the work environment

Preferred PPE – Use N95 or Higher Respirator



# Personal Protective Equipment (cont.)

In establishments that provide medical treatment or house know/suspected cases of COVID-19, the employer **shall** ensure that employees in frequent or prolonged close contact with such cases are provided with and wear, **at a minimum**:

- N-95 respirator
- Goggles or face shield AND
- Gown

# Face Coverings vs Respirators

## COVID-19 FACEMASKS VS. RESPIRATORS



**Cloth or Paper Face Mask**



**Surgical Face Mask**



**Filtering Facepiece Respirator (e.g. N95)**

	Cloth or Paper Face Mask	Surgical Face Mask	Filtering Facepiece Respirator (e.g. N95)
<b>Testing &amp; Approval</b>	Not tested or approved, but recommended by the CDC	Cleared by the U.S. Food and Drug Administration per 21 CFR 878.4040	Evaluated, tested and approved by NIOSH per 42 CFR Part 84
<b>Intended Use &amp; Purpose</b>	To prevent transmission of the virus between people in close proximity	A fluid resistant barrier designed to protect the wearer from large droplets, splashes or sprays of bodily or other hazardous fluids.	Reduces the wearer's exposure to small particle aerosols and large droplets

## COVID-19 VOLUNTARY VS. REQUIRED RESPIRATOR USE



The employer determines the necessary PPE required for the job task(s). The employer is responsible for payment, replacement, maintenance, cleaning, laundering and disposal of PPE. Training should be provided to employees regarding proper use, limitations, care and maintenance of PPE. Where respirators are provided, the following table outlines additional requirements:

### Guidelines for Employees Using Respiratory Protection

	Filtering Facepiece Respirator (e.g. N95)	
	Required	Voluntary
<b>Fit Testing</b>	Yes	No
<b>Medical Evaluation</b>	Yes	No
<b>Facial Hair Prohibited</b>	Yes	No
<b>Appendix D Provided</b>	No	Yes
<b>Training per 1910.134(k)</b>	Yes	No
<b>Cleaning, Storage &amp; Maintenance of Respirator</b>	Yes	Yes

- Know the difference between cloth face coverings and respirators
- NIOSH Certified Respirators require compliance to the Respiratory Protection Program
- [Facemasks vs Respirators Factsheet](#)
- [Voluntary vs Required Respirator Use Factsheet](#)

# What are Air-Purifying Respirators?

Air-purifying respirators (APRs) work by removing gases, vapors, aerosols (droplets and solid particles), or a combination of contaminants from the air through the use of filters, cartridges, or canisters. These respirators do not supply oxygen and therefore cannot be used in an atmosphere that is oxygen-deficient or immediately dangerous to life or health. The appropriate respirator for a particular situation will depend on the environmental contaminant(s).

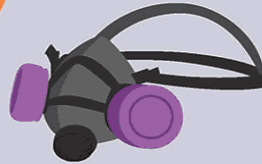
## Filtering Facepiece Respirator (FFR)



- Disposable
- Covers the nose and mouth
- Filters out particles such as dust, mist, and fumes
- Select from N, R, P series and 95, 99, 100 efficiency level
- Does NOT provide protection against gases and vapors
- Fit testing required

## Elastomeric Half Facepiece Respirator

- Reusable facepiece and replaceable cartridges or filters
- Can be used to protect against gases, vapors, or particles, if equipped with the appropriate cartridge or filter
- Covers the nose and mouth
- Fit testing required



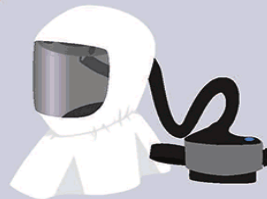
## Elastomeric Full Facepiece Respirator

- Reusable facepiece and replaceable canisters, cartridges, or filters
- Can be used to protect against gases, vapors, or particles, if equipped with the appropriate cartridge, canister, or filter
- Provides eye protection
- More effective face seal than FFRs or elastomeric half-facepiece respirators
- Fit testing required



## Powered Air-Purifying Respirator (PAPR)

- Reusable components and replaceable filters or cartridges
- Can be used to protect against gases, vapors, or particles, if equipped with the appropriate cartridge, canister, or filter
- Battery-powered with blower that pulls air through attached filters or cartridges
- Provides eye protection
- Low breathing resistance
- Loose-fitting PAPR does NOT require fit testing and can be used with facial hair
- Tight-fitting PAPR requires fit testing



# Respirator Information

- MIOSHA [Part 451 Respiratory Protection](#) Key Program Elements
  - NIOSH Certified Respirators
  - Written Program – [MIOSHA Sample Program](#)
  - Medical Evaluation
  - Fit Testing
- Voluntary use respirators require a respiratory protection program
  - The respirator worn will prescribe which program elements are required for voluntary use
  - Use resources to evaluate program requirements - [OSHA Small Entity Compliance Guide to Respiratory Protection](#)
- Stay updated to temporary enforcement guidance given by [OSHA Enforcement Memos for COVID-19](#)

# Employee Training

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- Employer **shall** provide:
  - Training to employees on SARS-CoV-2 and COVID-19
  - Communication and training on COVID-19 infection control practices in the primary languages common in the employee population
  - Updated training if:
    - There are changes to its COVID-19 preparedness & response plan OR
    - New information becomes available about the transmission of SARS- CoV-2
- Training **shall** cover:
  - Workplace infection control practices
  - Proper use of PPE
  - Steps employees must follow to employer of COVID-19 symptoms or a suspected or confirmed case of COVID-19
  - How to report unsafe working conditions



## Recordkeeping

- Employers **must** maintain a record of the following:
  - Training; maintain all COVID-19 employee training
  - Screening Protocols; maintain a record of screening for each employee or visitor entering the workplace
  - Records of Required Notifications; maintain record of notifications associated to confirmed cases of COVID-19 in the workplace (see Rule 6 for health surveillance)
- Employers **must** maintain records for one year from time of generation



# Industry Specific Requirements & Resources

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## HEALTH CARE

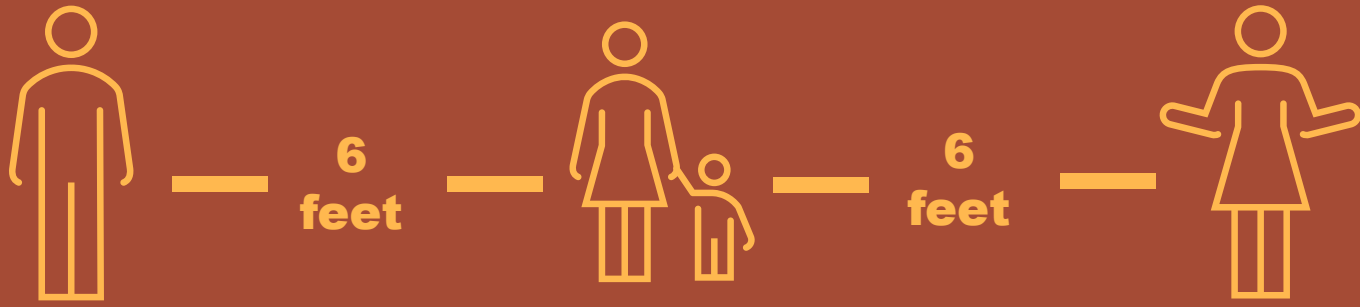
HEALTH FACILITIES OR AGENCIES, INCLUDING OUTPATIENT HEALTH-CARE FACILITIES, CLINICS, PRIMARY CARE PHYSICIAN OFFICES, DENTAL OFFICES, AND VETERINARY CLINICS



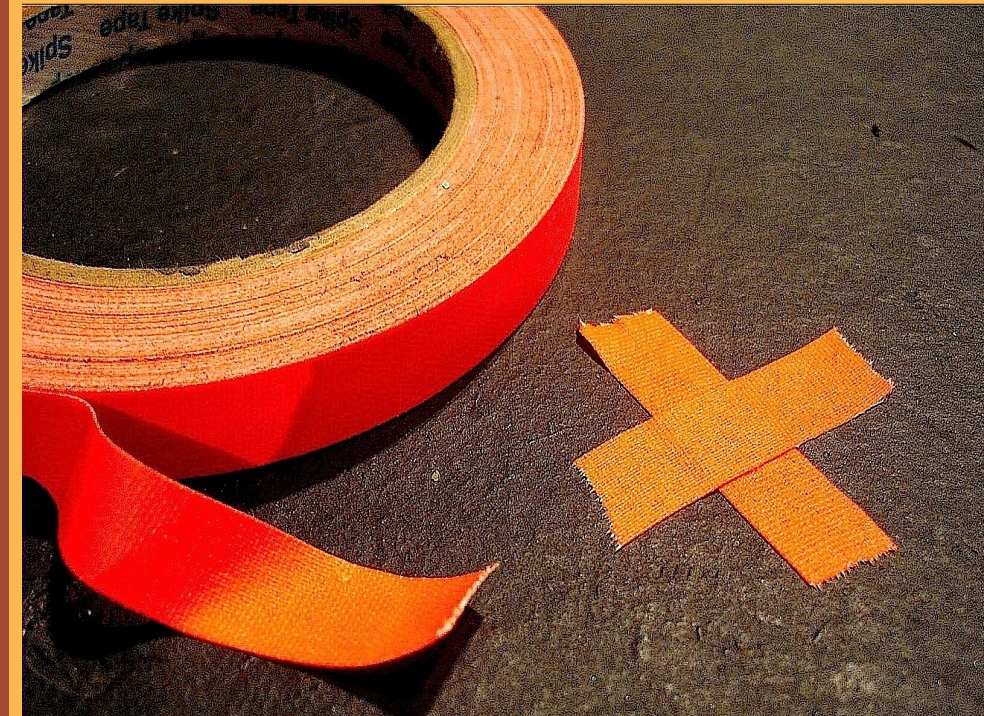
Post signs at entrance(s)  
instructing patients to  
wear a face covering  
when inside.

*(except as necessary for  
identification or to facilitate  
an examination or procedure)*





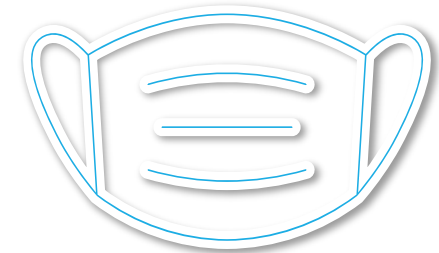
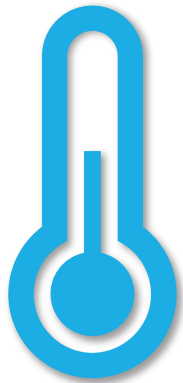
Limit waiting area occupancy to the number of individuals who can be present while staying six feet away from one another ask patients, if possible, to wait in cars for their appointment to be called



Mark or arrange waiting rooms to enable six feet of social distancing (e.g., by placing X's on the ground and/or removing seats in the waiting room)

# Patient Entry and Waiting Continued...

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**Conduct a common screening protocol  
for all patients**

**(Including temperature check & questions  
about COVID-19 symptoms)**

**Place hand sanitizer and face  
coverings at patient entrance(s)**

# Face Coverings

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Require patients to wear a face covering when in the facility, except as necessary for identification or to facilitate an examination or procedure





Install physical barriers at sign-in, temperature screening, or other service points that normally require personal interaction (e.g., plexiglass, cardboard, tables).

# Healthcare Specific Resources

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- [OSHA Guidance for Healthcare Workers and Employers](#)
- [EPA-registered disinfectants](#)
- [CDC Outpatient and Ambulatory Care Settings](#)
- [CDC Healthcare Systems Providing Non-COVID-19 Clinical Care](#)
- [CDC Infection Prevention for Patients with COVID-19](#)
- [OSHA Dentistry Workers and Employers](#)
- [CDC Guidance for Dental Settings](#)
- [American Veterinary Medical Association COVID-19 Page](#)



# Contact MIOSHA

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Michigan Occupational Safety and Health Administration (MIOSHA)

530 W. Allegan Street, P.O. Box 30643

Lansing, Michigan 48909-8143

If you need further information regarding COVID-19

Call 855-SAFEC19 (855-723-3219).

To request consultation, education and training services, call 517-284-7720

or visit our website at:

[www.michigan.gov/miosha](http://www.michigan.gov/miosha)

