

**COVID-19  
Emergency Temporary Standard (ETS)  
Healthcare  
29 CFR 1910.502**

**Employee Training Presentation**

# Overview of COVID-19 ETS (29 CFR 1910.502)

As part of OSHA's commitment to protect workers and deliver stronger worker safety protections, the agency has issued a COVID-19 Healthcare ETS that establishes new requirements to protect workers from exposure to COVID-19 in all settings, with some exceptions, where any employee provides healthcare or healthcare support services. The ETS requires employers to:

- ❑ Conduct a hazard assessment and implement a COVID-19 plan for each workplace. Engage employees in the development of the plan.
- ❑ Designate workplace safety coordinator(s), knowledgeable in infection control principles and practices, with authority to implement, monitor, and ensure compliance with the plan.
- ❑ Limit and monitor points of entry to settings where direct patient care is provided; screen and triage patients, clients, residents, delivery people and other visitors and non-employees entering the setting for symptoms of COVID-19; and implement patient management strategies.
- ❑ Develop and implement policies and procedures to adhere to Standard and Transmission-Based Precautions in accordance with Centers for Disease Control (CDC) guidelines.

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# Overview of COVID-19 ETS (29 CFR 1910.502)

- ❑ **Provide and ensure employees wear facemasks when indoors and when occupying a vehicle with other people for work purposes;** provide and ensure employees use respirators and other personal protective equipment (PPE) for exposure to people with suspected or confirmed COVID-19 and for aerosol-generating procedures (AGPs) (including eye protection) on a person with suspected or confirmed COVID-19; and provide respirators and other PPE in accordance with Standard and Transmission-Based Precautions. **Per Mon Health policy, eye protection shall be worn in all patient-facing areas.**
- ❑ Perform AGPs on persons with suspected or confirmed COVID-19 in an airborne infection isolation room, if available; limit employees present to only those essential; and clean and disinfect surfaces and equipment promptly after the procedure is completed.
- ❑ Keep employees at least 6 feet apart from others when indoors, unless not feasible for a specific activity (e.g., hands-on medical care).
- ❑ Install cleanable or disposable solid barriers at fixed work locations in non-patient care areas where employees are not separated from other people by at least 6 feet.
- ❑ Follow standard practices for cleaning and disinfection of surfaces and equipment in accordance with CDC guidelines in patient care areas, resident rooms, and for medical devices and equipment or in all other areas when a person who is COVID-19 positive has been in the workplace in the last 24 hours; in all other areas, clean high-touch surfaces and equipment at least once a day; and provide alcohol-based hand rub that is at least 60% alcohol or provide readily accessible handwashing facilities.

# Overview of COVID-19 ETS (29 CFR 1910.502)

- ❑ Ensure adequate ventilation in accordance with the ETS, if the employer owns or controls buildings or structures with an existing HVAC system(s) and/or existing AIIR(s).
- ❑ Screen employees before each workday and shift for COVID-19 symptoms; require each employee to promptly notify the employer when the employee is COVID-19 positive, has been told by a licensed healthcare provider that they are suspected to have COVID-19, or experiencing certain symptoms; and notify potentially exposed employees within 24 hours when a person who has been in the workplace is COVID-19 positive.
- ❑ Remove any employee who is COVID-19 positive or has been told by a licensed healthcare provider that they are suspected to have COVID-19, certain COVID-19 symptoms, or have had close contact with a person who is COVID-19 positive in the workplace; in some cases, provide pay and benefits to employees removed from the workplace.
- ❑ Provide paid time off for vaccinations and vaccine side effects.
- ❑ Train employees on workplace policies and procedures regarding COVID-19 in accordance with the ETS.
- ❑ If an employer has more than 10 employees on the effective date of this ETS, record all employee cases of COVID-19 on a COVID-19 log without regard to occupational exposure.
- ❑ Report work-related COVID-19 fatalities to OSHA within 8 hours of employer knowledge and in-patient hospitalizations within 24 hours of employer knowledge.

# COVID-19 Transmission

- ❑ COVID-19, or coronavirus disease 2019, is the respiratory disease caused by the virus SARS-CoV-2.
- ❑ The virus that causes COVID-19 spreads most commonly through person-to-person contact (within about 6 feet of each other), primarily through the inhalation of respiratory particles (droplets and aerosols) produced when an infected person exhales, talks, sings, shouts, coughs, or sneezes.
- ❑ An infected person can spread the virus before they show symptoms (pre-symptomatic) or without ever showing symptoms (asymptomatic).
- ❑ Less commonly, the virus spreads over longer distances when smaller droplets or particles linger in the air, particularly in indoor settings with inadequate ventilation.
- ❑ Another less common way the virus can spread is when someone touches a contaminated surface, and then touches their nose, mouth, or eyes.

# Hand Hygiene

- ❑ Regular handwashing is one of the best ways to remove germs, avoid getting sick, and prevent the spread of COVID-19 to others.
  
- ❑ To properly wash hands:
  - Wet hands with water
  - Apply enough soap to cover all hand surfaces
  - Rub hands together and scrub everywhere
  - Wash the front and back of your hands, in between your fingers, and under your nails
  - Rinse hands with water
  - Dry hands completely using a single-use towel or air dry
  
- ❑ Wash hands before eating; after blowing your nose, coughing, sneezing, being in a public place, using the bathroom, touching an animal, or handling waste; before and after caring for someone who is sick; and before, during, and after preparing food.
  
- ❑ Use an alcohol-based hand rub if soap and water are not available.
  
- ❑ See Hand Hygiene Policy.

# Respiratory Etiquette

- ❑ Practice good respiratory etiquette to reduce the risk of spreading COVID-19:
  - Cover your mouth and nose with a tissue when coughing or sneezing to prevent the spread of germs
  - Throw used tissues in the trash
  - If you don't have a tissue, cough or sneeze into your elbow, not your hands
  
- ❑ Remember to wash your hands immediately after blowing your nose, coughing, or sneezing.

# Signs and Symptoms of COVID-19

## ☐ COVID-19 symptoms can include:

- Cough
- Fever or chills
- New loss of taste or smell
- Sore throat
- Shortness of breath or difficulty breathing
- Congestion or runny nose
- Fatigue
- Nausea or vomiting
- Muscle or body aches
- Diarrhea
- Headache

## ☐ If you are sick:

- Notify your employer, stay at home, and isolate yourself from others.
- Contact your local healthcare provider and get tested if you have symptoms of COVID-19.
- Call 911 if you are experiencing trouble breathing, or pain/pressure in the chest.



# Risk Factors for Severe Illness

- Severe illness means that a person with COVID-19 may need hospitalization, intensive care, a ventilator to help them breathe, or they may even die.
  
- Risk factors\* for severe illness can include:
  - Older adults
  - Pregnant people
  - Cancer
  - Chronic kidney disease
  - Chronic lung diseases (e.g., COPD, asthma, etc.)
  - Dementia or other neurological conditions
  - Diabetes
  - Down syndrome
  - Heart conditions
  - HIV infection
  - Immunocompromised state
  - Liver disease
  - Overweight and obesity
  - Pregnancy
  - Sick cell disease
  - Smoking, current or former
  - Solid organ or blood stem cell transplant
  - Stroke or cerebrovascular disease
  - Substance use disorders

\*[www.cdc.gov/coronavirus/2019-ncov/need-extra-precautions/people-with-medical-conditions.html](https://www.cdc.gov/coronavirus/2019-ncov/need-extra-precautions/people-with-medical-conditions.html)

# When to Seek Medical Care

- ❑ Seek emergency medical care immediately if you or someone else is having:
  - Trouble breathing
  - Persistent pain or pressure in the chest
  - New confusion
  - Inability to wake or stay awake
  - Pale, gray, or blue-colored skin, lips, or nail beds, depending on skin tone
  
- ❑ These are not all possible symptoms. Call your medical provider for any other symptoms that are severe or concerning to you.

# COVID-19 Hazards in the Workplace

- ❑ Under the ETS, your employer must conduct a workplace-specific hazard assessment to identify potential workplace hazards related to COVID-19.
- ❑ The current hazard assessment is available from your COVID Safety Coordinators.

# COVID-19 Plan

- ❑ Under the ETS, your employer must develop and implement a COVID-19 plan for each workplace; the plan must be written if there are more than 10 employees.
- ❑ Your employer must designate one or more workplace safety coordinators to implement and monitor the plan, and ensure compliance with all aspects of the COVID-19 plan.
- ❑ Your employer must seek the input and involvement of non-managerial employees and their representatives, if any, in the hazard assessment and the development and implementation of the plan.
- ❑ Your employer must monitor each workplace to ensure the ongoing effectiveness of the COVID-19 plan and update it as needed.
- ❑ Please see your COVID Safety Coordinator if you have any questions or input.

# COVID-19 Plan

- ❑ The COVID-19 plan must address the hazards identified by the hazard assessment and include policies and procedures to minimize the risk of transmission of COVID-19 for each employee.
  
- ❑ These policies and procedures include, but are not limited to:
  - Patient screening and management
  - Standard and Transmission-Based Precautions
  - Personal Protective Equipment (PPE)
  - Aerosol-generating procedures on a person with suspected or confirmed COVID-19
  - Physical distancing
  - Physical barriers
  - Cleaning and disinfection
  - Ventilation
  - Health screening and medical management
  - Vaccination
  - Training

# Patient Screening and Management

- ❑ In settings where direct patient care is provided, your employer must:
  - Limit and monitor points of entry to the setting
  - Screen and triage all clients, patients, residents, delivery people and other visitors, and other non-employees entering the setting
  - Implement other applicable patient management strategies in accordance with CDC's "COVID-19 Infection Prevention and Control Recommendations"

# Standard and Transmission-Based Precautions

- Your Employer must develop and implement policies and procedures that adhere to Standard and Transmission-Based Precautions in accordance with CDC's "Guidelines for Isolation Precautions."
- See Standard and Transmission Based Precautions Policy

# Facemasks

- Your employer must provide, and ensure employees wear, facemasks when indoors and when occupying a vehicle with other people for work purposes.
  
- Facemasks must be:
  - Cleared by the Food and Drug Administration (FDA), authorized by an FDA Emergency Use Authorization (EUA), or otherwise offered or distributed as described in an FDA enforcement policy
  - Worn by each employee over the nose and mouth
  - Changed at least once per day, whenever they are soiled or damaged, and more frequently as necessary (e.g., patient care reasons)



# Facemasks

- Facemasks are not required when:
  - Alone in a room
  - Eating or drinking (if 6 feet of physical distance or a physical barrier are maintained)
  - Wearing a respirator
  - It is necessary for mouth to be seen (e.g., communicating with an individual who is deaf or hard of hearing) and a clear, plastic facemask cannot be used [use an alternative (e.g., face shield) instead]
  - An employee cannot wear due to a medical necessity, medical condition, or disability [use face shield instead, if condition or disability permits it]. Accommodations may also need to be made for religious beliefs consistent with Title VII of the Civil Rights Act.
  - Wearing a facemask would present a hazard of serious injury or death (e.g., arc flash, heat stress, interfering with safe operation of equipment) [use an alternative (e.g., face shield) instead, if conditions permit, and resume wearing facemask when no longer engaged in this activity, 6 feet of physical distance is required to the extent feasible]
  
- Limitations of facemasks:
  - Facemasks are not substitutes for other policies and procedures to protect against COVID-19, and must be worn in addition to physical distancing and other precautions.
  - Facemasks can become soiled after each use and may be contaminated with bacteria and viruses, including the virus that causes COVID-19. This is why it is important to replace facemasks at least daily, and whenever they become damaged or soiled, and more frequently as necessary (e.g., patient care reasons).

# Respirators

- Respirators are a type of personal protective equipment (PPE) certified by the National Institute for Occupational Safety and Health (NIOSH) or authorized under an FDA EUA.
- Respirators protect against airborne hazards by:
  - Removing specific air contaminants from the surrounding air OR
  - Supplying breathable air from a safe source
- Face coverings, facemasks, and face shields are not respirators.
- Respirators can provide an additional level of comfort and protection for employees in circumstances that do not require a respirator to be used.
- Your employer may provide a respirator to employees instead of a required facemask, and, in such cases, must comply with the ETS mini respiratory protection program (29 CFR 1910.504).
- Your employer must permit employees to wear their own respirator instead of a required facemask and, in such cases, must comply with the ETS mini respiratory protection program (29 CFR 1910.504).

# Personal Respirators

*Respirators provided by employees.* Where employees provide and use their own respirators, the employer must provide each employee with the following notice: Respirators can be an effective method of protection against COVID–19 hazards when properly selected and worn. Respirator use is encouraged to provide an additional level of comfort and protection for workers even in circumstances that do not require a respirator to be used. However, if a respirator is used improperly or not kept clean, the respirator itself can become a hazard to the worker. All respirators must be NIOSH approved and be fit tested. If your employer allows you to provide and use your own respirator, you need to take certain precautions to be sure that the respirator itself does not present a hazard. You should do the following:

1. Read and follow all instructions provided by the manufacturer on use, maintenance, cleaning and care, and warnings regarding the respirator's limitations
2. Keep track of your respirator so that you do not mistakenly use someone else's respirator.
3. Do not wear your respirator where other workplace hazards (*e.g.*, chemical exposures) require use of a respirator. In such cases, your employer must provide you with a respirator that is used in accordance with OSHA's respiratory protection standard (29 CFR 1910.134). For more information about using a respirator, see OSHA's respiratory protection safety and health topics page (<https://www.osha.gov/respiratory-protection>)
4. See the Respiratory Protection Program.

## Respirators and other PPE

- Your employer must provide protective clothing and equipment (e.g., respirators, gloves, gowns, goggles, face shields) to each employee in accordance with Standard and Transmission-Based Precautions in healthcare settings in accordance with CDC's "Guidelines for Isolation Precautions" and ensure that the protective clothing and equipment is used in accordance with OSHA's PPE Standards (29 CFR 1910 subpart I).
- For employees with exposure to people with suspected or confirmed COVID-19, your employer must provide a respirator and other PPE, including gloves, an isolation gown or protective clothing, and eye protection, and ensure that respirators are used in accordance with the OSHA Respiratory Protection Standard (29 CFR 1910.134) and other PPE is used in accordance with OSHA's PPE Standards (29 CFR 1910 subpart I).
- Eye protection is required in all patient-facing areas, including screeners.

## Respirators and other PPE

- For aerosol-generating procedures performed on a person with suspected or confirmed COVID-19, your employer must provide a respirator as well as gloves, an isolation gown or protective clothing, and eye protection, and ensure that respirators are used in accordance with the OSHA Respiratory Protection Standard (29 CFR 1910.134) and other PPE is used in accordance with OSHA's PPE Standards (29 CFR 1910 subpart I).

# Face Shields

- Where a face shield is required to comply with the ETS or is otherwise required by your employer, your employer must ensure that face shields are cleaned at least daily and are not damaged.
- Face shields, typically made of clear plastics, must be certified to ANSI/ISEA Z87.1 or cover the wearer's eyes, nose, and mouth to protect from splashes, sprays, and spatter of body fluids, wrap around the sides of the face (i.e., temple-to-temple), and extend below the chin.
- Employees are permitted to supply their own face shields that meet the above definition within the ETS, but employers are not required to reimburse employees for those face shields.

# PPE Procedures

- Modifications to PPE Procedures:
- When using PPE for non-COVID-19 occupational hazards, procedures may need to be modified to prevent the transmission of COVID-19. This may include modifications to:
  - Donning
  - Doffing
  - Cleaning
  - Storage
  - Maintenance
  - Disposal
- Your employer must remain in compliance with all other applicable OSHA standards, for example including PPE (29 CFR 1910.132), Eye and Face Protection (29 CFR 1910.133), Respiratory Protection (29 CFR 1910.134), and Hand Protection (29 CFR 1910.138).

# Aerosol-Generating Procedures

- When an AGP is performed on a person with suspected or confirmed COVID-19, your employer must:
  - Provide a respirator and other PPE (see previous slides).
  - Limit the number of employees present during the procedure to only those essential for patient care and procedure support.
  - Ensure that the procedure is performed in an existing airborne infection isolation room (AIIR), if available.
  - Promptly clean and disinfect the surfaces and equipment in the room or area where the procedure was performed, after the procedure is completed.



# Physical Distancing

- Your employer must ensure that each employee is separated from all other people by at least 6 feet when indoors unless your employer can demonstrate that such physical distancing is not feasible for a specific activity (e.g., hands-on medical care).
- If it is not feasible for an employee to maintain a distance of at least 6 feet from all other people, the employee must remain as far apart from other people as possible.
- The physical distancing requirement does not apply to momentary exposure while people are in movement (e.g., passing in hallways or aisles).

# Physical Barriers

- Barriers are required at each fixed work location outside of direct patient care areas where each employee is not separated from all other people by at least 6 feet of distance.
  
- Barriers must be:
  - Solid and made from impermeable materials
  - Cleanable or disposable
  - Sized (e.g., height and width) and located to block face-to-face pathways between individuals
  - Barriers may have a pass-through space at the bottom for objects and merchandise as long as it is not in front of any individual's breathing zone

# Cleaning and Disinfection

- In patient care areas, resident rooms, and for medical devices and equipment, your employer must follow standard practices for cleaning and disinfection of surfaces and equipment in accordance with CDC's "COVID-19 Infection Prevention and Control Recommendations" and CDC's "Guidelines for Environmental Infection Control," pp. 86–103, 147-149.
- In all other areas, the employer must:
  - Clean high-touch surfaces and equipment at least once a day, following manufacturers' instructions for application of cleaners
  - When the employer is aware that a person who is COVID-19 positive has been in the workplace within the last 24 hours, clean and disinfect, in accordance with CDC's "Cleaning and Disinfecting Guidance", any areas, materials, and equipment under the employer's control that have likely been contaminated by the person who is COVID-19 positive
- The employer must provide alcohol-based hand rub that is at least 60% alcohol or provide readily accessible hand washing facilities.

# Ventilation

- Employers who own or control buildings or structures with an existing heating, ventilation, and air conditioning (HVAC) system(s) must ensure that:
  - The HVAC system(s) is used in accordance with the HVAC manufacturer’s instructions and the design specifications of the HVAC system(s);
  - The amount of outside air circulated through its HVAC system(s) and the number of air changes per hour are maximized to the extent appropriate;
  - All air filters are rated Minimum Efficiency Reporting Value (MERV) 13 or higher, if compatible with the HVAC system(s). If MERV-13 or higher filters are not compatible with the HVAC system(s), employers must use filters with the highest compatible filtering efficiency for the HVAC system(s);
  - All air filters are maintained and replaced as necessary to ensure the proper function and performance of the HVAC system(s); and
  - All intake ports that provide outside air to the HVAC system(s) are cleaned, maintained, and cleared of any debris that may affect the function and performance of the HVAC system(s).
  
- Where the employer has an existing AIIR, the employer must maintain and operate it in accordance with its design and construction criteria.

# Health Screening and Medical Management

- Under the ETS, your employer must screen each employee before each workday and each shift for COVID-19 symptoms. If testing is required by your employer for screening purposes, it must be provided by your employer, at no charge to the employee.
- Employees must notify their employer when they:
  - Have tested positive for COVID-19 or been diagnosed with COVID-19 by a licensed healthcare provider;
  - Have been told by a licensed healthcare provider they are suspected to have COVID-19;
  - Are experiencing recent loss of taste and/or smell with no other explanation; or
  - Are experiencing a fever ( $\geq 100.4^{\circ}\text{F}$ ) and new unexplained cough associated with shortness of breath.
  - Are experiencing any other signs or symptoms of COVID-19.

# Health Screening and Medical Management

- When your employer is notified that a person who has been in the workplace(s) (including employees, clients, patients, residents, vendors, contractors, customers, delivery people and other visitors, or other non-employees) is COVID-19 positive, your employer must, within 24 hours:
  - Notify each employee who was not wearing a respirator and any other required PPE and has been in close contact with that person in the workplace (within 6 feet of that person for a cumulative total of 15 minutes or more over a 24-hour period during that person's potential period of transmission).
  - Notify all other employees who were not wearing a respirator and any other required PPE and worked in a well-defined portion of a workplace (e.g., a particular floor) in which that person was present during the potential transmission period.
  - The potential transmission period runs from 2 days before the person felt sick (or, for asymptomatic people, 2 days prior to test specimen collection) until the time the person is isolated.
- This notification is not triggered by the presence of a patient with confirmed COVID-19 in a workplace where services are normally provided to suspected or confirmed COVID-19 patients (e.g., emergency rooms, urgent care facilities, COVID-19 testing sites, COVID-19 wards in hospitals).

# Health Screening and Medical Management

- Under the ETS, your employer must immediately remove employees from the workplace when the employee:
  - Is COVID-19 positive (confirmed positive test for, or has been diagnosed by a licensed healthcare provider with, COVID-19);
  - Has been told by a licensed healthcare provider that they are suspected to have COVID-19;
  - Is experiencing recent loss of taste and/or smell with no other explanation; or
  - Is experiencing both a fever of at least 100.4°F and new unexplained cough associated with shortness of breath.
- Moreover, if your employer is required by the ETS to notify an employee of close contact in the workplace to a person who is COVID-19 positive (see previous slide), your employer must immediately remove the employee from the workplace unless the employee:
  - Is not experiencing either recent loss of taste and/or smell with no other explanation or both fever ( $\geq 100.4^{\circ}$  F) and new unexplained cough associated with shortness of breath; AND
  - Either has been fully vaccinated against COVID-19 (i.e., 2 weeks or more following the final dose) or had COVID-19 and recovered within the past 3 months.
- Your employer must keep employees removed until they are eligible to return to work (see next slide)

# Medical Removal Protection Benefits

- Mon Health Medical Center has also implemented a policy for removing employees from the workplace in certain circumstances. See the COVID Plan for more information.



# Vaccination

- Mon Health Medical Center encourages employees to receive the COVID-19 vaccination as a part of a multi-layered infection control approach. Mon Health Medical Center will support COVID-19 vaccination for each employee by providing reasonable paid time to each employee to obtain vaccination and Paid Time Off for any side effects experienced following vaccination.
- All employees, contractors, volunteers, students, and vendors at all Mon Health locations will be required to receive the COVID-19 vaccine by an approved date. The new required COVID vaccination policy does allow limited exemptions for medical or religious reasons. Employees with approved exemptions will have in place agreed upon accommodations. COVID-19 boosters are available free of charge and recommended according to CDC guidelines.

# Additional Training & How to Obtain More Information

- Employees must receive additional training whenever:
  - Changes occur that affect the employee's risk of contracting COVID-19 at work (e.g., new job tasks, etc.)
  - Policies or procedures are changed
  - There is an indication that the employee has not retained the necessary understanding or skill
- Copies of the OSHA COVID-19 ETS Plan are available on MonNet.
- Employer Workplace Hazard Assessment is available from your COVID-19 Safety Coordinator.
- Other listed documents are available at <https://www.osha.gov/coronavirus/ETS>
  - The ETS (29 CFR 1910.502)
  - The Mini Respiratory Protection Program (29 CFR 1910.504)

# COVID-19 Plan Safety Coordinator(s)

The ETS requires the designation of a COVID-19 Plan Safety Coordinator, who must:

- Implement the COVID-19 plan
- Monitor the effectiveness of COVID-19 plan
- Be knowledgeable in infection control principles and practices as they apply to the workplace and employee job operations
- Ensure compliance with all aspects of the COVID-19 plan

COVID-19 Safety Coordinator(s)		
Name	Title/Facility Location	Contact Information (office location, phone, email address)
Janet Crigler	Infection Preventionist/Mon Health Medical Center	Quality Department 304-598-1455 <a href="mailto:CriglerJ@monhealthsys.org">CriglerJ@monhealthsys.org</a>
Jennifer Carr	System Employee Health Coordinator/Mon Health	Employee Health 304-285-2207 <a href="mailto:CarrJ@monhealthsys.org">CarrJ@monhealthsys.org</a>
Maxine Cantis	Risk Manager Environmental Safety/Mon Health	Risk Department 304-285-5174 <a href="mailto:CantisM@monhealthsys.org">CantisM@monhealthsys.org</a>
Romeo Tan	Director of Operations/Mon Health Medical Center	Administration 304-598-1451 <a href="mailto:TanR@monhealthsys.org">TanR@monhealthsys.org</a>

# More Information

[www.osha.gov/coronavirus](http://www.osha.gov/coronavirus)



**COVID-19**

**Emergency Temporary Standard (ETS)**

**Mini Respiratory Protection Program**

**29 CFR 1910.504**

## COVID-19 ETS (Subpart U)

- **1910.502 – Healthcare**

- Applies to settings where employees provide healthcare services or healthcare support services
- Sets requirements for the use of facemasks and respirators during the COVID-19 pandemic

- **1910.504 – Mini Respiratory Protection Program (“mini RPP”)**

- Applies when employees use respirators where only facemasks are required by OSHA
- In contrast, OSHA’s normal Respiratory Protection Standard (1910.134) applies whenever respirators are required by OSHA

## Applicability of Mini RPP vs. Normal RPP

COVID-19 ETS PROVISION	MINI RPP (1910.504)	NORMAL RPP (1910.134)
1910.502(f)(2) – for exposure to person with suspected/confirmed COVID-19		✓
1910.502(f)(3) – for AGP <sup>1</sup> on person with suspected/confirmed COVID-19		✓
1910.502(f)(4) – in place of facemask when respirator is not required	✓	
1910.502(f)(5) – for Standard and Transmission-Based Precautions		✓

<sup>1</sup> AGP = aerosol-generating procedure (as defined by 1910.502)

## Why Is the Mini RPP Necessary?

- Wearing a respirator can in itself present a hazard, such as:
  - Causing difficulty breathing when you have certain underlying medical conditions
  - Causing a facial rash if the respirator has not been properly cleaned or stored
- The Mini RPP is designed to improve worker protections with a streamlined set of requirements for the safe use of respirators that are easier and faster to implement than the more comprehensive respiratory protection program elements required by OSHA's normal Respiratory Protection Standard.



# Key Differences Between Mini RPP & Normal RPP

KEY PROGRAM ELEMENT <sup>1</sup>	MINI RPP <sup>2</sup> (1910.504)	NORMAL RPP (1910.134)
Medical Evaluation		✓
Fit Testing		✓
Written Program		✓
User Seal Checks	✓	✓
Training	✓	✓

<sup>1</sup> This is not a comprehensive list of required program elements

<sup>2</sup> These are key requirements pertaining to employer-provided respirators (as opposed to worker-provided respirators)

# Basic Information for the Safe Use of Respirators

- Respirators can be an effective method of protection against COVID-19 hazards when properly selected and worn. Respirator use is encouraged to provide an additional level of comfort and protection for workers even in circumstances that do not require a respirator to be used. However, if a respirator is used improperly or not kept clean, the respirator itself can become a hazard to the worker.
- You need to take certain precautions to be sure that the respirator itself does not present a hazard. You should do the following:

(1) Read and follow all instructions provided by the manufacturer on use, maintenance, cleaning and care, and **warnings regarding the respirator's limitations**.

(2) Keep track of your respirator so that you do not mistakenly use someone else's respirator.

(3) Do not wear your respirator where other workplace hazards (e.g., chemical exposures) require use of a respirator. In such cases, your employer must provide you with a respirator that is used in accordance with OSHA's Respiratory Protection Standard (1910.134).

# Types of Respiratory Protection

## Filtering Facepiece Respirators (FFRs):

- Series:
  - N – **N**ot resistant to oil
  - R – somewhat **R**esistant to oil
  - P – strongly resistant (oil **P**roof)
- Filter efficiency:
  - 95% - filter out at least 95% of airborne particles
  - 99% - filter out at least 99% of airborne particles
  - 100% - filter out at least 99.97% of airborne particles
- Examples include "N95" FFRs and "P99" FFRs



# Types of Respiratory Protection (cont'd)

## – Elastomeric Respirators:

- Two types:
  - **Half-mask** – offer the same level of protection as FFRs
  - **Full facepiece** – offer a higher level of protection than FFRs
- Equipped with replaceable filters, cartridges, or canisters
  - Filters are good for one year.
  - Replace if visibly soiled and cannot be cleaned.



## – Powered air-purifying respirators (PAPRs) or Controlled air-purifying respirators (CAPRs):

- Offer a higher level of protection than FFRs
- Use HEPA filters, which are as efficient as P100 filters



CUFF

SHROUD

# Fit Testing

- A fit test evaluates the fit of a tight-fitting respirator to an individual's face
  - It verifies that you have found a make, model, and size of respirator that fits to your face
    - Much like finding a style and size of shoe that fits your foot properly
  - Fit testing is required under the normal RPP
- Fit testing is not required under the mini RPP
  - Without a fit test, there is less control over whether employees are receiving the full, expected level of protection that a respirator is capable of providing. Therefore, a user seal check is required each time you put on your respirator.

# User Seal Checks

- A user seal check determines whether a tight-fitting respirator has properly sealed to your face once it has been put on
- A user seal check must be conducted each time you put a respirator on
- Two types of user seal checks:
  - **Positive pressure user seal check** - the respirator user exhales
  - **Negative pressure user seal check** - the respirator user inhales

# Positive Pressure User Seal Checks

## To conduct a positive pressure user seal check for a FFR:

1. Once you have conducted proper hand hygiene and properly donned the respirator, place your hands over the facepiece, covering as much surface area as possible.
2. Exhale gently into the facepiece.
3. The face fit is considered satisfactory if a slight positive pressure is being built up inside the facepiece without any evidence of outward leakage of air at the seal. Examples of evidence that it is leaking could be:
  - The feeling of air movement on your face along the seal of the facepiece
  - Fogging of your glasses
  - A lack of pressure being built up inside the facepiece.

\*\* If the FFR has an exhalation valve, then performing a positive pressure check may not be possible unless the user can cover the exhalation valve. In such cases, a negative pressure check must be performed.

# Negative Pressure User Seal Checks

## To conduct a negative pressure user seal check:

1. Once you have conducted proper hand hygiene and properly donned the respirator, cover the filter surface with your hands as much as possible and then inhale.
2. The facepiece should collapse on the wearer's face and should not feel air passing between the face and facepiece.



# How to Put On/Remove a FFR & How to Conduct a User Seal Check for a FFR

English: [www.youtube.com/watch?v=oU4stQgCtV8](http://www.youtube.com/watch?v=oU4stQgCtV8)

Spanish: [www.youtube.com/watch?v=A28xg7Oepxw](http://www.youtube.com/watch?v=A28xg7Oepxw)

# Discontinuing the Use of Respirators

- Medical evaluation, to determine if an employee is medically fit to use a respirator, is required under the normal RPP but not under the mini RPP.
  
- Mini RPP Requirements:
  - Any employee who has previously had a medical evaluation and was determined not to be medically fit to wear a respirator must not be provided with a respirator unless they are re-evaluated and medically cleared to use a respirator.
  
  - Employees must discontinue respirator use when either the employee or a supervisor reports medical signs or symptoms that are related to ability to use a respirator.
    - Shortness of breath, coughing, wheezing, chest pain, or any other symptoms related to lung problems or cardiovascular symptoms

# Cleaning, Maintenance, and Storage

- Disposable respirators may be used per the shift and then disposed of.
- CAPR lens cuffs (shields) may be used per the shift and then disposed of.
- Reusable CAPR parts shall be stored in a designated clean supply area after being wiped down with disinfectant wipes.
- See the policies below for more info:
  - Respiratory Protection Program
  - Use of CAPR, PAPR, N95, Elastomeric Half Mask
  - Respiratory Exposure Policy

# Reusing Filtering Facepiece Respirators (FFRs)

- The reuse of single-use FFRs is discouraged.
- This is ONLY permissible during emergency use when authorized by the organization.
- If reused, a FFR must only be reused by the employee it was provided to
- A FFR can only be reused when:
  - a. The respirator is not visibly soiled or damaged;
  - b. The respirator has been stored in a breathable storage container (e.g., paper bag) for at least 5 calendar days between use and has been kept away from water or moisture;
  - c. The employee does a visual check in adequate lighting for damage to the respirator's fabric or seal;
  - d. The employee successfully completes a user seal check;
  - e. The employee uses proper hand hygiene before putting the respirator on and conducting the user seal check; and
  - f. The respirator has not been worn more than 5 days total.

# Reusing Elastomerics or PAPRs/CAPRs

- Elastomeric respirators and PAPRs/CAPRs are designed to be cleaned & reused
  
- Elastomeric respirators and PAPRs/CAPRs can only be reused when:
  - a. The respirator is not damaged;
  - b. The respirator is cleaned and disinfected as often as necessary to be maintained in a sanitary condition; and
  - c. A change schedule is implemented for cartridges, canisters, or filters.

**Any questions?**

# More Information

[www.osha.gov/coronavirus](http://www.osha.gov/coronavirus)

[www.osha.gov/respiratory-protection](http://www.osha.gov/respiratory-protection)

(OSHA's respiratory protection safety and health topics page)