

# PREPARING WORKPLACES FOR RE-ENTRY

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OSHA requires employers provide safe & healthful working conditions. With this mandate in mind, OSHA has the authority to create standards employers must follow and can issue advisory guidance, including for standards applicable to COVID-19 in the workplace. See <https://www.osha.gov/SLTC/covid-19/standards.html> and <https://www.osha.gov/Publications/OSHA4002.pdf>



Occupational safety and health professionals use a framework called the “hierarchy of controls” to select ways of controlling workplace hazards. In other words, the best way to control a hazard is to systematically remove it from the workplace, rather than relying on workers to reduce their exposure. During a COVID-19 outbreak, when it may not be possible to eliminate the hazard, the most effective protection measures are (listed from most effective to least effective): engineering controls, administrative controls, safe work practices (a type of administrative control), and PPE. There are advantages and disadvantages to each type of control measure when considering the ease of implementation, effectiveness, and cost. In most cases, a combination of control measures will be necessary to protect workers from exposure to SARS-CoV-2. (<https://www.osha.gov/Publications/OSHA3990.pdf>)

In addition to the types of workplace controls discussed below, CDC guidance for businesses provides employers and workers with recommended SARS-CoV-2 infection prevention strategies to implement in workplaces: [www.cdc.gov/coronavirus/2019-ncov/specific-groups/guidance-business-response.html](http://www.cdc.gov/coronavirus/2019-ncov/specific-groups/guidance-business-response.html).

## **ENGINEERING**

Engineering controls involve isolating employees from work-related hazards. In workplaces where they are appropriate, these types of controls reduce exposure to hazards without relying on worker behavior and can be the most cost-effective solution to implement. Engineering controls for SARS-CoV-2 include:

- Installing high-efficiency air filters.
- Increasing ventilation rates in the work environment.
- Installing physical barriers, such as clear plastic sneeze guards.
- Installing a drive-through window for customer service.
- Redesign workspaces to allow for social distancing.
- Specialized negative pressure ventilation in some settings, such as for aerosol generating procedures (e.g., airborne infection isolation rooms in healthcare settings and specialized autopsy suites in mortuary settings).

## ADMINISTRATIVE CONTROLS

Administrative controls require action by the worker or employer. Typically, administrative controls are changes in the work policy or procedures to reduce or minimize exposure to a hazard.

- Ensure that your sick leave policies are modified to be flexible enough they are consistent with any public health guidance and employees are aware of these modified policies.
- Be prepared to separate sick employees. The CDC recommends employees who appear to have acute respiratory illness symptoms (i.e., cough, shortness of breath) upon arrival to work, or become sick during the day, should be separated from other employees and sent home immediately. Sick employees should be told to cover their noses and mouths with a tissue when coughing or sneezing (or an elbow or shoulder if no tissue is available).
- Place posters in the workplace that: a) encourage staying at home when sick; b) explain the proper etiquette for coughing & sneezing; c) explain hand hygiene such as avoiding face touching and shaking hands; d) and explain how to wash hands; and e) how to use anti-bacterial gels.
- Practice sensible social distancing and maintain six feet between co-workers, where possible.
- Provide tissues & no-touch disposal receptacles for use by employees. Provide alcohol-based hand sanitizer with 70-95 percent alcohol. Ensure supplies maintained in multiple locations or in conference rooms.
- Maintain hand soap at wash stations and bathrooms.
- Perform routine environmental cleaning of all frequently touched surfaces - workstations, countertops, doorknobs, handles, buttons. When choosing cleaning chemicals, employers should consult information on Environmental Protection Agency (EPA)-approved disinfectant labels with claims against emerging viral pathogens. Products with EPA-approved emerging viral pathogens claims are expected to be effective against SARS-CoV-2 based on data for harder to kill viruses. Follow the manufacturer's instructions for use of all cleaning and disinfection products (e.g., concentration, application method and contact time, PPE).<sup>1,2</sup>

As your business explores ways to increase physical distancing at work, consider the following tools: a) cancel non-essential face-to-face meetings; b) cancel non-essential business travel; c) use conference calling options; and d) offer tele-work or flexible hour options.

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<sup>1</sup> On April 5, 2021, the Centers for Disease Control and Prevention (CDC) [issued updated guidance on surface cleaning and disinfecting as it relates to COVID-19 transmission](#). With [increasing evidence illustrating that the risk of surface \(fomite\) transmission of COVID-19 is low \(less than 1 in 10,000\)](#), the CDC now advises that surface disinfection is only recommended in indoor-setting schools and homes where there has been a suspected or confirmed case of COVID-19 within the last 24 hours. When no persons confirmed or suspected to have COVID-19 are known to have occupied a shared space, a once daily cleaning with products containing soap or detergent is sufficient to reduce germs and contaminants and remove viruses on surfaces.

<sup>2</sup> The CDC's updated guidance (April 5, 2021) states, in instances where an increased risk of COVID-19 transmission is present in shared spaces (i.e. high levels of community transmission, low rate of mask usage, infrequent hand hygiene, high-risk individuals present) the updated CDC guidance recommends cleaning more frequently or disinfecting in combination with cleaning. Further, the updated guidance suggests if there has been a sick person or a positive case of COVID-19 in a facility within the last 24 hours, the space should be cleaned and disinfected to further reduce the risk of virus transmission.

## PPE

PPE may also be needed to reduce the risk of certain exposures. While correctly using PPE can help reduce the risk of some exposures, it should not take the place of other prevention strategies. Examples of PPE include: gloves, goggles, face shields, face masks, and respiratory protection, when appropriate.

- Provide disposable wipes so commonly used surfaces (doorknobs, keyboards, remote controls, desks, microwaves, water coolers) can be wiped down by employees before and after each use.
- Discourage workers from using other workers' phones, desks, offices, or other work tools and equipment, when possible.
- Maintain regular housekeeping practices, including routine cleaning and disinfecting of surfaces, equipment, and other elements of the work environment.
- Providing workers with up-to-date education and training on COVID-19 risk factors and protective behaviors (e.g., cough etiquette and care of PPE).
- Training and fit test workers who need to use protecting clothing and equipment how to put it on, use/wear it, and take it off correctly, including in the context of their current and potential duties. Training material should be easy to understand and available in the appropriate language and literacy level for all workers.

While there is no specific OSHA standard covering SARS-CoV-2 exposure, some OSHA requirements may apply to preventing occupational exposure to SARS-CoV-2. Among the most relevant are:

- OSHA's Personal Protective Equipment (PPE) standards (in general industry, 29 CFR 1910 Subpart I), which require using gloves, eye and face protection, and respiratory protection. See: [www.osha.gov/laws-regs/regulations/standardnumber/1910#1910\\_Subpart\\_I](http://www.osha.gov/laws-regs/regulations/standardnumber/1910#1910_Subpart_I). When respirators are necessary to protect workers or where employers require respirator use, employers must implement a comprehensive respiratory protection program in accordance with the Respiratory Protection standard (29 CFR 1910.134). See: [www.osha.gov/laws-regs/regulations/standardnumber/1910/1910.134](http://www.osha.gov/laws-regs/regulations/standardnumber/1910/1910.134).
- The General Duty Clause, Section 5(a)(1) of the Occupational Safety and Health (OSH) Act of 1970, 29 USC 654(a)(1), which requires employers to furnish to each worker "employment and a place of employment, which are free from recognized hazards that are causing or are likely to cause death or serious physical harm." See: [www.osha.gov/laws-regs/oshact/completeoshact](http://www.osha.gov/laws-regs/oshact/completeoshact).
- OSHA's Bloodborne Pathogens standard (29 CFR 1910.1030) applies to occupational exposure to human blood and other potentially infectious materials that typically do not include respiratory secretions that may transmit SARS-CoV-2. However, the provisions of the standard offer a framework that may help control some sources of the virus, including exposures to body fluids (e.g., respiratory secretions) not covered by the standard. See: [www.osha.gov/laws-regs/regulations/standardnumber/1910/1910.1030](http://www.osha.gov/laws-regs/regulations/standardnumber/1910/1910.1030).

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