

ACWA JPIA COVID-19 PANDEMIC FAQs

Occupational Safety & Health



Have Cal/OSHA training and safety meeting requirements been suspended during the pandemic?

No, training and safety meetings are still required. JPIA contacted Cal/OSHA and while they understand the need to limit traditional hands-on training during the pandemic, they also feel safety training is vital during this time. Therefore, it is recommended to utilize other training methods and opportunities, including video conferencing and online training. This is a good opportunity for bonded groups to conduct on-the-job training by reviewing Standard Operating Procedures and Job Safety Analysis. Be sure to complete rosters for the training. JPIA offers TargetSolutions online training to all members at no cost. Contact information is below, or reach out to your risk advisor to help you get started. The JPIA Training Frequency guide was recently updated and recommends training frequency, as well as identifies classes that can be taken online.

Information/Resources:

[Contact for TargetSolutions](#)

[ACWA JPIA - Training Frequency: Best Practice Guidance](#)

What are the disinfectant options for personal use and for cleaning surfaces?

For personal disinfection the CDC recommends hand washing with soap for 20 seconds as the best option. Second choice is to use hand sanitizer with at least 60 percent alcohol. Protective gloves are recommended where exposure to virus is likely and while cleaning surfaces. These items should be readily available to employees.

If surfaces are dirty, they should be cleaned using a detergent or soap and water prior to disinfection. CDC recommends regular disinfection of surfaces and after each use for tools and items shared among employees. Most common EPA-registered household disinfectants should be effective. Use according to the manufacturer's recommendations and pay attention to EPA's Contact Time recommendations, as they vary for each product and range from 1 to 10 minutes.

Additionally, diluted household bleach solutions can be used if appropriate for the surface. Follow manufacturer's instructions for application, ensuring a contact time of at least 1 minute. To prepare the bleach solution the CDC recommends mixing five tablespoons (1/3 cup) bleach per gallon of water.

Information/Resources:

[EPA disinfectants approved for use for COVID-19](#)

[CDC Facility Cleaning and Disinfection](#)

<https://www.acwajpia.com/covid-19-info/>

Are Water/Wastewater agencies required to follow Cal/OSHA's Aerosol Transmissible Diseases (ATD) Standard?

No, ATD is required only for medical related facilities and services, laboratories, public health services, police, correctional facilities, homeless shelters, drug treatment programs, or if informed by Cal/OSHA in writing. Cal/OSHA recommends employers not covered by the ATD Standard follow recommendations from the Centers for Disease Control and Prevention (CDC).

Information/Resources:

[CDC Interim Guidance for Businesses and Employers to Plan and Respond to COVID-19](#)
[Cal/OSHA Interim Guidelines for General Industry on 2019 Novel Coronavirus](#)

Has DOT Drug and Alcohol Testing been temporarily suspended?

DOT's guidance on regulated drug and alcohol testing during the COVID-19 states the following: "As a DOT-regulated employer, you must comply with applicable DOT training and testing requirements. However, DOT recognizes that compliance may not be possible in certain areas due to the unavailability of program resources." DOT also provides some guidance for employers where there is "potential public health risks" and states the following: "If you are unable to conduct DOT drug or alcohol training or testing due to COVID-19-related supply shortages, facility closures, State or locally imposed quarantine requirements, or other impediments, you are to continue to comply with existing applicable DOT Agency requirements to document why a test was not completed. If training or testing can be conducted later (e.g., supervisor reasonable suspicion training at the next available opportunity, random testing later in the selection period, follow-up testing later in the month), you are to do so in accordance with applicable modal regulations."

Information/Resources:

[DOT Guidance on Compliance with DOT Drug and Alcohol Testing Regulations](#)
[FMCSA COVID-19 Drug & Alcohol Testing Guidance](#)

Is there training for face coverings?

Districts should follow the CDC, as well as state and county health department recommendations for use of face coverings. In addition, below is a sample face covering use form to ensure employees understand the proper use and limitations.

Information/resources:

[California Department of Public Health – Face Covering Guidance](#)
[Use of Cloth Face Coverings to Help Slow the Spread of COVID-19](#)
[Face Covering COVID 19 Sample Use Form](#)

Are we still required to conduct Valley Fever training by May 1, 2020?

Yes, for those members that conduct construction type of activities and operate in an endemic area. They are still required to provide the training by May 1. In January the JPIA sent out a Splash Alert with all the details and resources. Alliant and JPIA have also created a Toolbox Safety Training to help districts meet this need.

Information/Resources:

[JPIA Valley Fever Splash Alert](#)

[Valley Fever Toolbox Safety Training](#)

Is there any type of support or training for shift workers?

For members who participate in an Employee Assistance Program, it is recommended to check with your provider about the services or training they may provide. Alliant and the JPIA have a Fatigue Toolbox Safety Training that provides awareness, tips, and techniques for issues that are common to shift workers.

Information/Resources:

[Preventing Fatigue \(shift workers\)](#)

Is there "suitable substitutes" for N95 masks that are "in short supply"?

On April 3 the Federal Drug Administration (FDA) authorized the use of "equivalent" filtering face piece respirators, commonly referred to as "masks" to the NIOSH approved N95. This included KN95 masks manufactured in China. According to 3M, the world's largest mask maker, many countries manufacture masks "equivalent" to the N95 mask, including China's KN95, and "can be expected to be very similar in function". On May 7th the FDA revised the use of KN95 for clarity and to address concerns about sub-standard products. A list of FDA approved KN95 manufacturers and models are available below. "Suitable substitutes" should only be used until N95 become readily available. If N95 or other types of respirators are required for assigned tasks or workplace assignments, the employer should establish or follow their written Respiratory Protection Program.

Information/Resources:

<https://multimedia.3m.com/mws/media/1791500O/comparison-ffp2-95-n95-filtering-facepiece-respirator-classes-tb.pdf>

[FDA's Authorized List of Imported, Non-NIOSH Approved Respirators Manufactured in China \(May 7, 2020\)](#)

Is a confirmed case of COVID-19 considered recordable on the Log 300, and do we need to notify Cal/OSHA?

This FAQ has been updated with the release of Cal/OSHA's revised Recording and Reporting Requirements for COVID-19 Cases (June 2, 2020).

If you are experiencing a potential COVID 19 case, contact JPIA immediately, as there are critical time constraints in regards to presumptions and rebuttals as outlined in Governor Newsome's executive order N-62-20.

Yes, California employers that are required to record work-related fatalities, injuries and illnesses must record a work-related COVID-19 fatality or illness like any other occupational illness. To be recordable, an illness must be work-related and result in one of the following:

- Death
- Days away from work
- Restricted work on transfer to another job
- Medical treatment beyond first aid
- Loss of consciousness
- A significant injury or illness diagnosed by a physician or other licensed health care professional

Pursuant to recent federal OSHA guidance, a COVID-19 case should generally be confirmed through testing to be recordable. However, due to testing shortages and a variety of other reasons, not all persons determined to have COVID-19 have been tested.

Thus, while Cal/OSHA considers a positive test for COVID-19 determinative of recordability, a positive test result is not necessary to trigger recording requirements. There may be other situations in which an employer must make a recordability determination even though testing did not occur or the results are not available to the employer, such as described above. Cal/OSHA recommends erring on the side of recordability.

Note that under the guidance issued by Cal/OSHA, "time away from work taken by a worker to self-isolate or be quarantined without having a confirmed COVID-19 illness is not considered time away from work for recording purposes."

OSHA is requiring employers to make work-relatedness determinations, and will review cases based on the following:

- 1) The reasonableness of the employer's investigation into work-relatedness.
 - a) To ask the employee how he believes he contracted the COVID-19 illness
 - b) While respecting employee privacy, discuss with the employee his work and out-of-work activities that may have led to the COVID-19 illness
 - c) Review the employee's work environment for potential SARS-CoV-2 exposure.

- 2) The evidence available to the employer.
 - a) The evidence that a COVID-19 illness was work-related should be considered based on the information reasonably available to the employer at the time it made its work-relatedness determination.

- 3) The evidence that a COVID-19 illness was contracted at work.
 - a) OSHA will take into account all reasonably available evidence to determine if employer complied with its recording obligation, including:
 - i. COVID-19 illnesses are likely work-related when several cases develop among workers who work closely together and there is no alternative explanation.
 - i. An employee's COVID-19 illness is likely work-related if it is contracted shortly after lengthy, close exposure to a particular customer or coworker who has a confirmed case of COVID-19 and there is no alternative explanation.
 - ii. An employee's COVID-19 illness is likely work-related if his job duties include having frequent, close exposure to the general public in a locality with ongoing community transmission and there is no alternative explanation.
 - iii. An employee's COVID-19 illness is likely not work-related if she is the only worker to contract COVID-19 in her vicinity and her job duties do not include having frequent contact with the general public, regardless of the rate of community spread.
 - i. An employee's COVID-19 illness is likely not work-related if he, outside the workplace, closely and frequently associates with someone (e.g., a family member, significant other, or close friend) who (1) has COVID-19; (2) is not a coworker, and (3) exposes the employee during the period in which the individual is likely infectious.
 - ii. OSHA will give due weight to any evidence of causation, pertaining to the employee illness, at issue provided by medical providers, public health authorities, or the employee herself.

Employers are required to notify Cal/OSHA within **8 hours** of any confirmed COVID-19

illnesses that are considered work-related and the employee has been hospitalized.

Information/Resources:

[Governor Newsome's Executive Order N-62-20](#)

[Cal-OSHA Recording and Reporting Requirements for COVID-19 Cases](#)

[OSHA Enforcement Guidance for Recording Cases of COVID-19 \(5-19-20\)](#)

[Cal/OSHA Report a Work-Related Accident – Employers webpage](#)

[Cal/OSHA Email Instructions to Report a Work-related Injury, Illness or Death](#)

As we move to the reopening phase, are there additional/updated Cal/OSHA requirements for employers on COVID-19?

Yes, Cal/OSHA issued Interim General Guidelines on Protecting Workers from COVID-19 on May 14, 2020. These guidelines are for all employers, especially those with public interaction and require the following:

- California employers are required to establish and implement an IIPP to protect employees from workplace hazards, including infectious diseases like COVID-19.
- Employers **are required** to determine if COVID-19 infection is a hazard in their workplace.
- If it is a workplace hazard, then employers **must implement infection control measures**, including applicable and relevant recommendations from the Centers for Disease Control and Prevention (CDC) including the following:
 - ◇ [Interim Guidance for Businesses and Employers to Plan and Respond to Coronavirus Disease 2019 \(COVID-19\)](#)
 - ◇ [Coronavirus Disease 2019 \(COVID-19\): How to Protect Yourself & Others](#)
- Employers are required to Establish Infection Prevention Measures, provide employee training, and PPE in accordance with Cal/OSHA's Interim General Guidelines on Protecting Workers from COVID-19.

Information/Resources:

[Cal-OSHA's Interim General Guidelines on Protecting Workers from COVID-19](#)

Fire season is approaching and there is still a PPE shortage due to COVID-19. Are we still required to meet Cal/OSHA's emergency standard §5141.1 Protection from Wildfire Smoke?

Yes, you are still required to meet the emergency standard until the permanent regulation is passed, likely in late fall 2020. However, in a recent meeting Cal-OSHA Standards Board did acknowledge that there is a definite PPE shortage due to COVID-19, and that such shortage may influence businesses ability to acquire N95 masks for this fire season. Cal/OSHA, will be testing KN95 masks to see which provide similar protection, and will publish a list so that businesses can comply with requirements; however, no timeline was given. It is important to prepare for this fire season with that shortage in mind and to document your inability to acquire N95s. Under the current standard, only employees that are exposed to an Air Quality Index (AQI) for PM2.5 of 151 or greater are required to wear respirators such as the N95. During these exposure levels, employers can also meet the standard by operating within the following exemptions to the rule:

- Enclosed buildings or structures in which the air is filtered by a mechanical ventilation system.
- Enclosed vehicles in which the air is filtered by a cabin air filter.
- The employer demonstrates that the concentration of PM2.5 in the air does not exceed a concentration that corresponds to a current AQI of 151 or greater.
- Employees exposed to a current AQI for PM2.5 of 151 or greater for a total of one hour or less during a shift.

Information/Resources:

[Cal-OSHA Standard: Protection from Wildfire Smoke](#)

This fact sheet is not intended to be exhaustive. The discussion and best practices suggested herein should not be regarded as legal advice. Readers should pursue legal counsel or contact their insurance providers to gain more exhaustive advice.