



COVID19 Workplace Overview



Situation

Businesses and entities in Lucas County may remain open during Governor DeWine's Stay-at-Home order if they provide essential services to sustaining or protecting life. Under the Toledo-Lucas Health Commissioner's recommendations, these businesses and entities should take the following actions to ensure the safety of employees and customers.

Lucas County Workplace Guidance

Lucas County businesses and entities may remain open if they provide essential services to sustaining or protecting life. Under the Toledo-Lucas Health Commissioner's recommendations, these businesses and entities should take the following actions to ensure the safety of employees and customers.

☐ Screen staff reporting to work sites

Ask all staff these questions when they report for work for each shift:

1. Do you have symptoms of fever, cough, shortness of breath, sore throat or diarrhea?
2. Have you had close contact in the last 14 days with an individual diagnosed with COVID-19?
3. Have you traveled on an airplane internationally or domestically in the last 14 days?

If an employee answers YES to any of the screening questions:

Send the employee home immediately. The employee should self-isolate/self-quarantine at home for:

- If symptoms are present, a minimum of 7 days since symptoms first appear. Must also have 3 days without fevers and improvement in respiratory symptoms.
- 14 days if the employee had close contact with an individual diagnosed with COVID-19.
- 14 days following international or domestic travel.

Screening Guidance:

Create and implement an active screening plan that will work best for your facility. Determine where and how this screening will take place. You can use this form to record answers. We recommend that businesses record employee answers to the three screening questions although it is not absolutely necessary as long as the screening is occurring.

Items to consider: Stagger shift starting times so employees do not arrive at the same time. Have one person asking staff these questions directly. Or, staff could do a "self-check-in" by entering their information on a computer, tablet, or sheet of paper. Be sure to instruct employees on properly disinfecting equipment or writing utensils. Provide alcohol-based hand sanitizer at the screening station, if possible.

If a touchless/contactless thermometer is available, a temperature check is strongly recommended at the worksite. We understand it may be difficult to get a thermometer at this time. Employees can also take their temperature at home and report it to their employer.

If your facility is already following other appropriate or more-stringent infection control procedures (like CDC guidelines), please continue to use those procedures.

Note that the 14-day quarantine period does not apply to hospitals, healthcare facilities, EMS, other organizations that employ healthcare workers in the inpatient or

Lucas County Workplace Guidance
Revised 4-1-20



Lucas County Workplace Guidance

outpatient setting, all providers and support staff involved in patient care, and public health staffing actively involved in the COVID-19 response (local or state).

☐ **Develop and implement a social distancing plan**

Determine how you will maintain 6 feet of distance between people. This 6-foot distance applies to employees working in shared spaces, and to customers waiting for services inside or outside the business. Options include using signs, contact barriers, entrance limits, and specialized hours. You may also need to limit capacity inside facilities to provide for social distancing between customers and employees.

☐ **Post Public Health Recommendations**

Hang Public Health Recommendations at all facility entrances so that it is visible to all employees and customers. For questions, please visit <https://coronavirus.ohio.gov/> or www.cdc.gov/covid19, or contact the Toledo-Lucas County Health Department at (419) 213-4100 or visit <https://www.lucascountyhealth.com/coronavirusupdates>.

Lucas County Workplace Guidance

Coronavirus Disease (COVID-19) Workplace Health Screening

Company Name: _____

Employee Name: _____ Date: _____

Time In: _____

In the past 24 hours, have you experienced:

Subjective fever (felt feverish)	<input type="checkbox"/> Yes	<input type="checkbox"/> No
New or worsening cough	<input type="checkbox"/> Yes	<input type="checkbox"/> No
Shortness of breath	<input type="checkbox"/> Yes	<input type="checkbox"/> No
Sore throat	<input type="checkbox"/> Yes	<input type="checkbox"/> No
Diarrhea	<input type="checkbox"/> Yes	<input type="checkbox"/> No
Current Temperature:		

If you answer **“yes”** to any of the symptoms listed above, please do not go to into work. Self - isolate at home and contact your primary care physician’s office for direction.

- You should isolate at home for a minimum of 7 days since symptoms first appear.
- You must also have 3 days without fevers and improvement in respiratory symptoms.

In the past 14 days, have you:

Had close contact with an individual diagnosed with COVID-19?	<input type="checkbox"/> Yes	<input type="checkbox"/> No
Traveled via airplane internationally or domestically?	<input type="checkbox"/> Yes	<input type="checkbox"/> No

If you answer **“yes”** to either of these questions, please do not go into work. Self-quarantine at home for 14 days.

For questions, please visit <https://coronavirus.ohio.gov/> or www.cdc.gov/covid19 or contact the Toledo-Lucas County Health Department at (419) 213-4100 or visit <https://www.lucascountyhealth.com/coronavirusupdates>.

Lucas County Workplace Guidance

For essential businesses and organizations that continue to operate during the COVID-19 pandemic, the Toledo-Lucas County Health Department recommends:

- Screen everyone. Check employees for fever or other symptoms if they will enter facilities or buildings.
- Maintain 6 feet of distance between people.
- Emphasize frequent and proper hand washing. Make sure sinks are well supplied.
- Work remotely whenever possible.
- Do not share space or equipment. If this is not possible, have employees wash their hands before and after using shared equipment. Clean and sanitize equipment between uses.
- Any employee with cold symptoms or underlying health conditions should stay home or work remotely.

What do I do when my employee shows up to work ill?

If an employee comes to work ill, or becomes ill while at work, they should be directed to go home immediately, even if their symptoms are mild. If they are having trouble breathing or cannot keep fluids down, have them contact their doctor right away. COVID-19 symptoms are very similar to the symptoms seen in a typical cold or flu. However, it is best to be cautious. Take care not to over-react in order to prevent panic among your team. Consider alternative work options like teleworking if your employee is well enough to do so.

What should I do if visitors or customers have symptoms of illness, such as coughing or sneezing?

You and your employees should follow social distancing guidance and maintain at least a 6-foot distance from anyone, especially those who are having symptoms. If your employee must be closer to the customer, advise them to minimize time spent with symptomatic customers to less than 10 minutes, if possible. Be sure to provide the public with tissues and trash receptacles. Have a no-touch hand sanitizer dispenser near customer entrances, if feasible.

One of our employees just tested positive for COVID-19. What should I do?

Instruct the employee to stay home and self-isolate. They should not return to work for at least 7 days after symptoms first started and 72 hours after fever has resolved without the use of fever-reducing medicines and symptoms have improved, whichever is longer. Offer telework assignments if the employee is well enough to work. **IMPORTANT: You must protect the confidentiality of your employee.** Legally, you cannot identify the employee by name. DO NOT disclose to other staff or third persons the name or other personal or health information of the employee who tested positive for COVID-19.

Thoroughly clean and disinfect equipment and other elements of the work environment of the employee along with frequently touched surfaces and objects such as doorknobs/push bars, elevator buttons, restroom doors, etc. Use EPA-approved disinfectants and use according to label instructions.

Lucas County Workplace Guidance

If the employee had been working while ill, identify co-workers and individuals that the employee may have come into contact with and advise them to self-quarantine at home for 14 days. A close contact is defined as those individuals who had been within 6 feet of the affected employee for greater than 10 minutes while the employee had symptoms.

One of our employee's family members has a "suspected" (but unconfirmed) case of COVID-19. What should we do?

Employees who have been close contacts to a suspect or known case of COVID-19 should be in self-quarantine at home for 14 days. If they develop symptoms while in quarantine, then they should follow the return to work guidelines noted above (7 days after symptoms started and 3 days after fevers have resolved and symptoms improved, whichever is longer).

One of our employees has a "suspected" (but unconfirmed) case of COVID-19. Should I send everyone home?

You would follow all the same steps outlined above for an employee who tested positive for COVID-19. Identify co-workers and individuals that the employee may have come into close contact with while ill and advise them to self-quarantine at home for 14 days. A close contact is defined as those individuals who had been within 6 feet of the affected employee for greater than 10 minutes while the employee had symptoms.

One of my employees has self-reported that they came into contact with someone believed to be positive for COVID-19. What should I do?

Review the nature of the exposure. If the contact occurred within 6 feet of the ill individual for more than 10 minutes, then the employee should self-quarantine at home for 14 days from the date of the contact. Offer telework if feasible.

One of our employees just found out that they were exposed to COVID-19 after interacting with a member of the public (or vendor, or contractor). What steps do I take?

Review the nature of the exposure. If the contact occurred within 6 feet of the ill individual for more than 10 minutes, then the employee should self-quarantine at home for 14 days from the date of the contact. Offer telework, if feasible. Check to see if other employees may also have had similar exposure to the ill individual. If so, they should self-quarantine at home for 14 days, as well.

When can my employee come back to work if they have been ill or had an exposure?

Employees who have been ill with symptoms of an upper respiratory illness [new onset of fever OR symptoms of possible COVID-19 (cough OR shortness of breath OR sore throat)] can return to work 7 days after symptoms started and 72 hours after fevers have resolved without the use of fever reducing medications and symptoms improved, whichever is longer.

Lucas County Workplace Guidance

Employees who have been close contacts to a suspect or known case of COVID-19 should self-quarantine at home for 14 days. If they develop symptoms while in quarantine, they should follow the return-to-work guidelines noted above (7 days after symptoms started and 3 days after fevers have resolved and symptoms improved, whichever is longer).

For the most up-to-date guidance for COVID-19, including detailed instructions on self-isolation and self-quarantine, visit the following sources of official information:

Lucas County: <https://www.lucascountyhealth.com/coronavirusupdates>

Ohio: <https://coronavirus.ohio.gov/>

National: www.cdc.gov/covid19

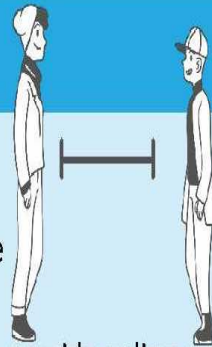
For additional questions, please contact the Health Department at 419-213-4100.

Lucas County Workplace Guidance

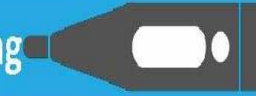
Directions for Isolation, Quarantine, Monitoring, and Social Distancing

Social Distancing

- Keep 6 feet of space between people as much as possible
- Avoid places at their busiest times
- Use online, drive-through or curbside services when possible
- Avoid getting together in large social groups
- If possible, businesses should have employee tele-commute, provide online options and limit in-person meetings
- Keep 6 feet of space between people as much as possible
- Avoid places at their busiest times



Self-Monitoring



- Practice social distancing.
- Take and record temperature twice a day, once in the morning and once in the evening.
- Report any fever to your doctor.
- Report any onset of respiratory illness to your doctor. These include:
 1. Cough
 2. Shortness of breath or difficulty breathing
 3. Chest pain
 4. Additionally, you could experience sore throat, muscle aches, chills, headache, abdominal pain, nausea, vomiting or diarrhea
- If you need medical care, call ahead to your doctor.
- Household members should practice social distancing.
- If you develop symptoms of illness you will move into Self-Isolation (see page 9).

Lucas County Workplace Guidance

Self-Quarantine



- Under no circumstance should you go to work, school or public places. You should only consider leaving your home if you need medical attention.
 - Avoid using public transportation to get to your medical provider or emergency department. Do not use busses, Uber, Lyft, taxi cabs or rail lines.
 - Wear a mask over your nose and mouth if you must leave your house to seek medical care.
- Take and record temperature twice a day, once in the morning and once in the evening.
- Report any fever to your doctor.
- Report any onset of respiratory illness to your doctor. These include:
 1. Cough
 2. Shortness of breath or difficulty breathing
 3. Chest pain
 4. Additionally, you could experience sore throat, muscle aches, chills, headache, abdominal pain, nausea, vomiting or diarrhea
- If you need medical care, call ahead to your doctor.
- Minimize contact with others in your home when possible.

- Do not share items with your household members or pets such as dishes, drinking cups, silverware, towels or bedding. After using these items, they should be washed with soap and hot water.
- Cover your coughs and sneezes with a disposable tissue or the upper part of your sleeve. Dispose of tissues in a lined trash can. Wash your hand immediately afterward.
- Wash your hands frequently with soap and water for at least 20 seconds. This includes after using the restroom, coughing or sneezing, or when they are visibly dirty. If you do not have access to soap and water, use a hand sanitizer with 60% to 95% alcohol.
- Avoid touching your eyes, nose and mouth with unwashed hands.
- Clean your frequently used surfaces with a solution of ¼ cup bleach to a gallon of water or disinfectant sprays or wipes daily. This includes “high-touch” surfaces such as phones, tablets, keyboards, doorknobs, bathroom fixtures, toilets, counters, tabletops and bedside tables. Wear rubber gloves if necessary and make sure the area is properly ventilated.
- Household members should practice self-monitoring.

Lucas County Workplace Guidance

Self-Isolation



- **Under no circumstance should you go to work, school or public places.** You should only consider leaving your home if you need medical attention.
 - Avoid using public transportation to get to your medical provider or emergency department. Do not use busses, Uber, Lyft, taxi cabs or rail lines.
 - Wear a mask over your nose and mouth if you must leave your house to seek medical care.
- Avoid handling pets or other animals while you are sick.
- Cover your coughs and sneezes with a disposable tissue or the upper part of your sleeve. Dispose of tissues in a lined trash can. Wash your hands immediately afterward.
- Wash your hands frequently with soap and water for at least 20 seconds. This includes after using the restroom, coughing or sneezing, or when they are visibly dirty. If you do not have access to soap and water, use a hand sanitizer with 60% - 95% alcohol.
- Avoid touching your eyes, nose and mouth with unwashed hands.
- Clean your frequently used surfaces with a solution of ¼ cup bleach to a gallon of water or disinfectant sprays or wipes daily. This includes “high-touch” surfaces such as phones, tablets, keyboards, doorknobs, bathroom fixtures, toilets, counters, tabletops and bedside tables. Wear rubber gloves if necessary and make sure the area is properly ventilated.
- Clean any item or surface that may have blood, mucus, vomit, urine, stool or other body fluids on them.
- Make sure your home has good airflow, open windows if weather permits or use the air conditioner.

If you live with others:

- Separate yourself from other household members and pets whenever possible.
 - You should stay in a specific room and away from other household members.
 - Use a separate bathroom if possible.
 - If you must share a bathroom wipe down all surfaces after the patient uses it. Separate toothbrushes.
 - If you share a shower, do not share razors, washcloths or body sponges/poufs
 - If you must enter a shared space put a mask over your nose and mouth before leaving your room
- Do not share items with your household members or pets such as dishes, drinking cups, silverware, towels or bedding. After using these items, they should be washed with soap and hot water
- Household members should practice Self-quarantine (see page 8)

If you live alone:

- Do not open your door to anyone. If someone is dropping off groceries or other items for you, have them leave it at your doorstep and wait until they leave to open the door.
- Do not cook food for anyone other than yourself

When seeking care at a healthcare facility:

- Call ahead to get direction from your health care provider. They may ask you to meet them outside or usher you into a different entrance than the general public uses
- Avoid using public transportation to get to your medical provider or emergency department. Do not use busses, Uber, Lyft, taxi cabs or rail lines.
 - If you are unable to drive yourself and do not have a ride, call 9-1-1 for transport by ambulance
 - If someone is giving you a ride, wear a mask that covers your mouth and nose while you are in the vehicle with them
- If you are driving yourself, apply a mask that covers your mouth and nose before exiting your vehicle

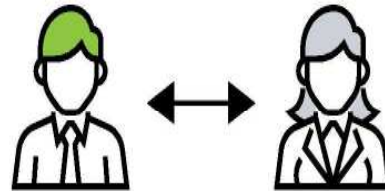


COVID-19 Confirmed Case Contact Directives

What to do

The Toledo Lucas County Health Department has confirmed through the Ohio Department of Health, a positive test of COVID-19.

If you had **direct and prolonged contact** with a confirmed COVID-19 case, you should immediately quarantine at home for **14 days from the date of exposure**. Monitor your symptoms.



Direct contact

- less than 6 feet apart



Prolonged contact

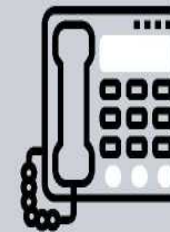
Minor or moderate symptoms can be treated with over the counter medications, plenty of fluids and rest, just as you would with severe flu. If symptoms worsen, you should seek medical attention.



Symptoms

- Dry cough
- Fever above 100.4°F
- Shortness of breath

Should you need to visit the emergency room, please call ahead for directions. Should your symptoms be severe enough to call 911, please alert the 911 operator you were in direct contact with a confirmed COVID-19 patient.



24/7 Nurse Informational Hotline

- 419-251-4000 (English only)
- 419-291-5355 (Multilingual)

Released 3-20-2020. **More information at lucascountyhealth.com/covid-19**



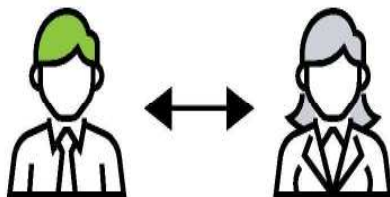
Caso confirmado de COVID-19

Instrucciones sobre el contacto

¿Qué debe hacer?

Mediante el Departamento de Salud de Ohio (Health Department), el Departamento de Salud del condado de Toledo-Lucas confirmó un resultado positivo en una prueba de detección de la COVID-19.

Si usted tuvo **contacto directo y prolongado** con un caso confirmado de COVID-19, debe ponerse en cuarentena de inmediato en su casa durante **14 días desde la fecha de la exposición**. Vigile sus síntomas.



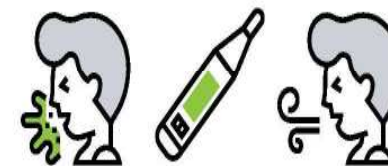
Contacto directo

- Menos de 6 pies de distancia



Contacto prolongado

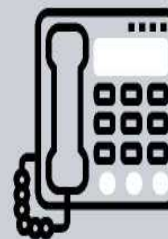
Los síntomas leves o moderados se pueden tratar con medicamentos de venta libre, mucho líquido y descanso, al igual que en el caso de una gripe grave. Si los síntomas empeoran, debe buscar atención médica.



Síntomas

- Tos seca
- Fiebre de 100.4° F / 38°C o más
- Dificultad para respirar

Si debe acudir a la sala de emergencias, llame antes de ir para recibir instrucciones. Si sus síntomas son tan graves que debe llamar al 911, adviértale al operador del 911 que estuvo en contacto directo con un paciente con COVID-19 confirmada.



Línea directa de información de enfermería disponible las 24 horas del día, los 7 días de la semana

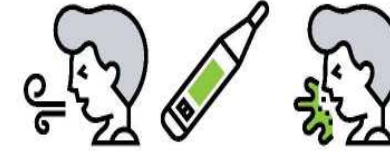
- 419-251-4000 (solo en inglés)
- 419-291-5355 (multilingüe)

Publicado el 3-20-2020. Más información en lucascountyhealth.com/covid-19.

حالة تأكد إصابتها بكوفيد-19 (COVID-19) توجيهات الاتصال



الاتصال المطول



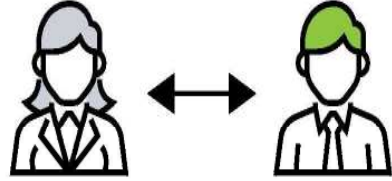
الأعراض

- سعال جاف
- حمى حرارتها أعلى من 100.4 درجة فهرنهايت (أو 38 درجة مئوية)
- ضيق في التنفس

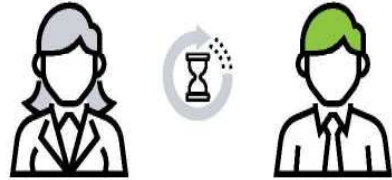
يمكن علاج الأعراض البسيطة أو المتوسطة باستخدام الأدوية التي لا تستلزم وصفة طبية والكثير من السوائل والراحة، تمامًا كما تفعل عند الإصابة بالأنفلونزا الشديدة. إذا ساءت الأعراض، فعليك أن تطلب الرعاية الطبية.

إذا كانت أعراضك شديدة بما يكفي للاتصال برقم 911، فيُرجى تنبيه عامل الهاتف 911 أنك كنت على اتصال مباشر بمرضى تأكد إصابته بفيروس كوفيد-19.

ما يجب فعله



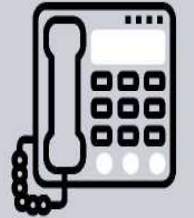
الاتصال المباشر
• لمسافة أقل من 6 أقدام



إذا كان لديك اتصال مباشر وطويل بحالة تأكد إصابتها بفيروس كوفيد-19، فيجب عليك الدخول بالحجر الصحي المنزلي على الفور لمدة 14 يومًا من تاريخ التعرض. راقب الأعراض التي تظهر عليك.

خط الاستعلامات الساخن الخاص بطاقم التمريض 24/7

- 419-251-4000 (اللغة الانجليزية فقط)
- 419-291-5355 (متعدد اللغات)



حُرر يوم 3-20-2020. لمزيد من المعلومات على الموقع lucascountyhealth.com/covid-19

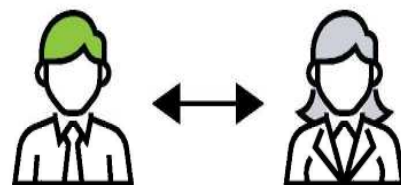


COVID-19 确诊病例 接触指示

指南

托莱多市卢卡斯郡卫生部门已通过俄亥俄州卫生部门确诊一例 COVID-19 检测呈阳性。

如果您**直接以及长时间接触** COVID-19 确诊病例，那么**自接触之日起应立即在家中隔离 14 天**。关注您的症状。



直接接触

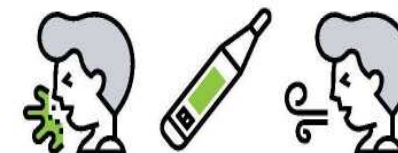
- 距离不足 6 英尺(2米)



您可以通过服用非处方药物、大量喝水和休息来治疗轻度或中度症状，就像治疗严重流感一样。如果症状恶化，您应该去看医生。

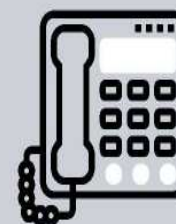
如果您需要去急诊室，请提前致电，以获得指示。如果您的症状严重到需要拨打 911，请告知 911 接线员您曾与一位确诊的 COVID-19 患者直接接触。

长时间接触



症状

- 干咳
- 发烧，体温超过 100.4°F(38°C)
- 呼吸急促



全天候护士信息热线

- 419-251-4000 (仅英语)
- 419-291-5355 (多语言)

2020 年 3 月 20 日发布。若要了解更多信息，请访问 lucascountyhealth.com/covid-19

Employer Positive COVID-19 Case Contact

- When a positive case is reported to the Health Department, an epidemiologist will contact the positive individual or their emergency contact to determine where the individual was while they were sick.
- If it is determined that the individual worked while they were ill, the epidemiologist will note the dates that the individual worked and obtain contact information for the employer.
- After the contact tracing is completed, the epidemiologist will contact the employer to inform them of the exposure.
- When the employer is reached, the epidemiologist will ask to speak to HR or Management. Once HR or Management is reached, the epidemiologist will identify the positive case and verify the date(s) the individual worked.
- Once the dates have been confirmed, the epidemiologist will provide the employer instruction for the identification of close contacts. A close contact is someone who spent greater than thirty (30) minutes within six (6) feet of the ill employee. Employers should identify any close contact that occurred up to **48 hours prior to the onset of symptoms** in the positive case.

The employer will be instructed to work with managers and shift leads to identify any close contacts. Once close contacts are identified, the employer must contact those employees to notify them of their exposure to COVID-19 and ask if they are currently experiencing symptoms.

- If the close contact reports they are healthy, the employer must inform the contact they will be excluded from work and instruct them to self-quarantine at home for 14 days from the date which they last worked with the case (most recent exposure). This could include the 48 hours prior to symptoms if the contact worked with the positive case prior to symptoms developing. Employers **should not** identify the positive individual.
- If the close contact reports they are ill/sick, the employer must inform the contact that they will be excluded from work and instruct them to self-isolate in their home for a minimum of seven (7) days and remain in self-isolation for three (3) full days **after** their last fever has resolved without use of medication.
- If any close contacts have further questions, they should be directed to the Mercy and ProMedica nurse COVID-19 hotlines:
 - 419-251-4000 (English Only)
 - 419-291-5355 (Multilingual)



Employer Contact Process



Revised 4/1/20

KEY:

Orange: Employer Actions
Blue: Health Dept. Actions
HD: Health Dept.
Epi: Epidemiologist

Individual Tests Positive for COVID-19

HD Epidemiologist conducts contact tracing, noting dates worked

After tracing, Epi will call Employer and ask for HR or Management

Epi will identify positive case and verify dates worked

Instructions will be provided to Employer for identification of close contacts

Employer identifies close contacts:

- Spent >30 min within 6ft of sick individual
- Contact with sick individual up to 48 hours prior to symptom onset

Contact Sick?

YES

NO

- Stay Home
- Self-isolate minimum 7 days
- Stay isolated until 72 hours after last fever clears (without medication)

If Symptoms Develop

- Exclude from work
- Self-quarantine at home for 14 days from last date of contact with positive case

Return to Work

Continue to Self-Monitor

COVID-19 Information and Checklist for Businesses/Employers

Protecting Against COVID-19

Enhanced Unemployment Aid

Ohio Governor Mike DeWine is ordering the relaxing of some unemployment compensation requirements and timelines for COVID-19 impacted workers who do not receive paid leave and for people who have been quarantined due to COVID-19. Visit unemployment.ohio.gov for additional information.

Support for Small Businesses and Non-Profit Organizations

Ohio has qualified for the Small Business Administration (SBA) Economic Injury Disaster Loan (EIDL) program.

- Small businesses, small agricultural cooperatives, small aquaculture businesses, and most non-profit organizations qualify.
- Small business owners and non-profit agencies impacted by the public health crisis can apply for low-interest loans of up to \$2 million with repayment terms of up to 30 years.
- Businesses and non-profits can apply online at SBA.gov/Disaster (quicker and recommended) or call 1-800-659-2955 to request an application in the mail.

- Businesses that have already reached out to the Development Services Agency will be notified by email as soon as the application is available.
- SBA will review applications and determine eligibility.
 - The SBA and the applicant will close on the loan.
 - The normal timeline is 2-3 weeks from application to deposit, but SBA does not yet know what the timeline will be, given the scope of the current situation.
- Loan applicants should start compiling info the SBA will need when the application opens:
 - Most recent federal income tax return for the applicant business.
 - IRS form 4506-T.

Insurance Premiums Grace Period

The Ohio Department of Insurance is ordering all insurers in Ohio to allow employers to offer employees a grace period for insurance premiums.

- The grace period must provide the option of deferring premium payments interest free for up to 60 calendar days from the original premium due date.
- Health insurers must allow employers to continue covering employees even if the employees would otherwise become ineligible for insurance because of a decrease in work hours.

For more information, visit: coronavirus.ohio.gov

Workers' Compensation Payment Deferral

Employers will be permitted to defer insurance premium installment payments for March, April, and May until June 1. For information visit the Bureau of Workers' Compensation info.bwc.ohio.gov.

Hauling Permits

The Ohio Department of Transportation is modifying the permitting process for haulers carrying heavy loads of essential goods to waive a requirement for advanced permission. This will allow more haulers to exceed certain weight and size restrictions for loads of items such as food, non-alcoholic beverages, medical supplies, and cleaning products. For information, and to download the permit, visit transportation.ohio.gov.

Ohio Department of Health Director Amy Acton, M.D., MPH, strongly recommends that businesses and employers take the following actions.

- ☒ Allow as many employees as possible to work from home by implementing policies in areas such as teleworking and video conferencing.

If employees do report to workplaces:

- ☒ Actively encourage sick employees to stay home until they are free of fever (without the use of medication) for at least 72 hours (three full days) AND symptoms have improved for at least 72 hours AND at least seven days have passed since symptoms first began. Do not require a healthcare provider's note to validate the illness or return to work of employees sick with acute respiratory illness; healthcare provider offices and medical facilities may be extremely busy and not able to provide such documentation in a timely way.

- ☒ Ensure that your sick leave policies are up to date, flexible, and non-punitive to allow sick employees to stay home to care for themselves, children, or other family members. Consider encouraging employees to do a self-assessment each day to check if they have any COVID-19 symptoms (fever, cough, or shortness of breath).
- ☒ Separate employees who appear to have acute respiratory illness symptoms from other employees and send them home immediately. Restrict their access to the business until they have recovered.
- ☒ Reinforce key messages — stay home when sick, use cough and sneeze etiquette, and practice hand hygiene — to all employees, and place posters in areas where they are most likely to be seen. Provide protection supplies such as soap and water, hand sanitizer, tissues, and no-touch disposal receptacles for use by employees.
- ☒ Frequently perform enhanced environmental cleaning of commonly touched surfaces, such as workstations, countertops, railings, door handles, and doorknobs. Use the

For more information, visit: coronavirus.ohio.gov

Page 2 of 2

cleaning agents that are usually used in these areas and follow the directions on the label. Provide disposable wipes so that commonly used surfaces can be wiped down by employees before each use.

- ☒ Be prepared to change business practices if needed to maintain critical operations (e.g., identify alternative suppliers, prioritize customers, or temporarily suspend some of your operations).

For more information on COVID-19, please visit coronavirus.ohio.gov

For answers to your COVID-19 questions, call 1-833-4-ASK-ODH (1-833-427-5634).

If you or a loved one are experiencing anxiety related to the coronavirus pandemic, help is available. Call the Disaster Distress Helpline at 1-800-985-5990 (1-800-846-8517 TTY); connect with a trained counselor through the Ohio Crisis Text Line by texting the keyword "4HOPE" to 741 741; or call the Ohio Department of Mental Health and Addiction Services help line at 1-877-275-6364 to find resources in your community.

Additional resources:

CDC's Interim Guidance for Businesses and Employers: <https://www.cdc.gov/coronavirus/2019-ncov/community/guidance-business-response.html>.

COVID-19 Information for Businesses: <https://www.tpchd.org/healthy-people/diseases/covid-19-information-for-businesses>.

For more information, visit: coronavirus.ohio.gov

CORONAVIRUS DISEASE 2019 Ohio

Department
of Health

Protect yourself and others from
COVID-19 by taking these precautions.

PREVENTION

For additional information call 1-833-4-ASK-ODH or visit coronavirus.ohio.gov.



STAY HOME



PRACTICE
SOCIAL
DISTANCING



GET ADEQUATE SLEEP
AND EAT WELL-
BALANCED
MEALS



WASH HANDS OFTEN
WITH WATER AND SOAP
(20 SECONDS
OR LONGER)



DRY HANDS WITH
A CLEAN TOWEL
OR AIR DRY
YOUR HANDS



COVER YOUR MOUTH
WITH A TISSUE OR
SLEEVE WHEN
COUGHING OR SNEEZING



AVOID TOUCHING
YOUR EYES, NOSE,
OR MOUTH WITH
UNWASHED HANDS
OR AFTER
TOUCHING SURFACES



CLEAN AND DISINFECT
"HIGH-TOUCH"
SURFACES OFTEN



CALL BEFORE VISITING
YOUR DOCTOR



PRACTICE GOOD
HYGIENE HABITS

For more information, visit: coronavirus.ohio.gov

Cleaning And Disinfecting Your Facility

Everyday Steps, Steps When Someone is Sick, and Considerations for Employers

How to clean and disinfect

Wear disposable gloves to clean and disinfect.

Clean

- **Clean surfaces using soap and water.** Practice routine cleaning of frequently touched surfaces.



High touch surfaces include:

Tables, doorknobs, light switches, countertops, handles, desks, phones, keyboards, toilets, faucets, sinks, etc.



Disinfect

- Clean the area or item with soap and water or another detergent if it is dirty. Then, use a household disinfectant.
- **Recommend use of EPA-registered household disinfectant.** **Follow the instructions on the label** to ensure safe and effective use of the product.

Many products recommend:

- Keeping surface wet for a period of time (see product label)
- Precautions such as wearing gloves and making sure you have good ventilation during use of the product.

- **Diluted household bleach solutions may also be used** if appropriate for the surface. Check to ensure the product is not past its expiration date. Unexpired household bleach will be effective against coronaviruses when properly diluted.

Follow manufacturer's instructions for application and proper ventilation. Never mix household bleach with ammonia or any other cleanser.

Leave solution on the surface for **at least 1 minute**

To make a bleach solution, mix:

- 5 tablespoons (1/3rd cup) bleach per gallon of water
- OR
- 4 teaspoons bleach per quart of water
- **Alcohol solutions with at least 70% alcohol.**

Soft surfaces

For soft surfaces such as **carpeted floor, rugs, and drapes**

- **Clean the surface using soap and water** or with cleaners appropriate for use on these surfaces.



CS316248A 04/01/2020

cdc.gov/coronavirus

- **Laundry items** (if possible) according to the manufacturer's instructions. Use the warmest appropriate water setting and dry items completely.

OR

- **Disinfect with an EPA-registered household disinfectant.** [These disinfectants](#) meet EPA's criteria for use against COVID-19.

Electronics

- For electronics, such as **tablets, touch screens, keyboards, remote controls, and ATM machines**
- Consider putting a **wipeable** cover on electronics.
- **Follow manufacturer's instruction** for cleaning and disinfecting.
 - If no guidance, **use alcohol-based wipes or sprays containing at least 70% alcohol.** Dry surface thoroughly.



Laundry

For clothing, towels, linens and other items

- **Wear disposable gloves.**
- **Wash hands with soap and water** as soon as you remove the gloves.
- **Do not shake** dirty laundry.
- Launder items according to the manufacturer's instructions. Use the **warmest appropriate water setting** and dry items completely.
- Dirty laundry from a sick person **can be washed with other people's items.**
- Clean and **disinfect clothes hampers** according to guidance above for surfaces.



Cleaning and disinfecting your building or facility if someone is sick

- **Close off areas** used by the sick person.
- **Open outside doors and windows** to increase air circulation in the area. **Wait 24 hours** before you clean or disinfect. If 24 hours is not feasible, wait as long as possible.
- Clean and disinfect **all areas used by the sick person**, such as offices, bathrooms, common areas, shared electronic equipment like tablets, touch screens, keyboards, remote controls, and ATM machines.
- If **more than 7 days** since the sick person visited or used the facility, additional cleaning and disinfection is not necessary.
 - Continue routine cleaning and disinfection.



When cleaning

- **Wear disposable gloves and gowns for all tasks in the cleaning process, including handling trash.**
 - Additional personal protective equipment (PPE) might be required based on the cleaning/disinfectant products being used and whether there is a risk of splash.
 - Gloves and gowns should be removed carefully to avoid contamination of the wearer and the surrounding area.
- **Wash your hands often** with soap and water for 20 seconds.
 - Always wash immediately after removing gloves and after contact with a sick person.



- Hand sanitizer: If soap and water are not available and hands are not visibly dirty, an alcohol-based hand sanitizer that contains at least 60% alcohol may be used. However, if hands are visibly dirty, always wash hands with soap and water.
- **Additional key times to wash hands** include:
 - After blowing one's nose, coughing, or sneezing.
 - After using the restroom.
 - Before eating or preparing food.
 - After contact with animals or pets.
 - Before and after providing routine care for another person who needs assistance (e.g., a child).

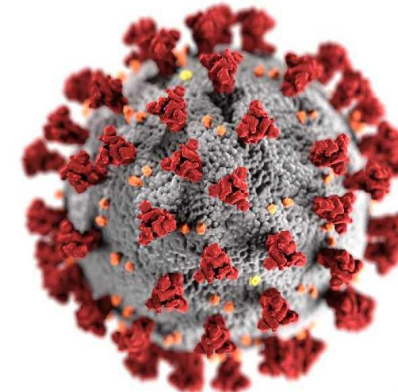
Additional Considerations for Employers



- **Educate workers** performing cleaning, laundry, and trash pick-up to recognize the symptoms of COVID-19.
- Provide instructions **on what to do if they develop symptoms within 14 days** after their last possible exposure to the virus.
- Develop **policies for worker protection and provide training** to all cleaning staff on site prior to providing cleaning tasks.
 - Training should include when to use PPE, what PPE is necessary, how to properly don (put on), use, and doff (take off) PPE, and how to properly dispose of PPE.
- Ensure workers are **trained on the hazards of the cleaning chemicals** used in the workplace in accordance with OSHA's Hazard Communication standard ([29 CFR 1910.1200](#)).
- **Comply** with OSHA's standards on Bloodborne Pathogens ([29 CFR 1910.1030](#)), including proper disposal of regulated waste, and PPE ([29 CFR 1910.132](#)).

For facilities that house people overnight:

- Follow CDC's guidance for [colleges and universities](#). Work with state and local health officials to determine the best way to isolate people who are sick and if temporary housing is needed.
- For guidance on cleaning and disinfecting a sick person's bedroom/bathroom, review CDC's guidance on [disinfecting your home if someone is sick](#).





Guidance on Preparing Workplaces for COVID-19



Occupational Safety and Health Act of 1970

"To assure safe and healthful working conditions for working men and women; by authorizing enforcement of the standards developed under the Act; by assisting and encouraging the States in their efforts to assure safe and healthful working conditions; by providing for research, information, education, and training in the field of occupational safety and health."

This guidance is not a standard or regulation, and it creates no new legal obligations. It contains recommendations as well as descriptions of mandatory safety and health standards. The recommendations are advisory in nature, informational in content, and are intended to assist employers in providing a safe and healthful workplace. The Occupational Safety and Health Act requires employers to comply with safety and health standards and regulations promulgated by OSHA or by a state with an OSHA-approved state plan. In addition, the Act's General Duty Clause, Section 5(a)(1), requires employers to provide their employees with a workplace free from recognized hazards likely to cause death or serious physical harm.

Material contained in this publication is in the public domain and may be reproduced, fully or partially, without permission. Source credit is requested but not required.

This information will be made available to sensory-impaired individuals upon request. Voice phone: (202) 693-1999; teletypewriter (TTY) number: 1-877-889-5627.

Guidance on Preparing Workplaces for COVID-19

U.S. Department of Labor
Occupational Safety and Health Administration

OSHA 3990-03 2020



U.S. Department of Labor

OSHA 3990-03 2020

Contents

Introduction

About COVID-19

How a COVID-19 Outbreak Could Affect Workplaces

Steps All Employers Can Take to Reduce Workers’ Risk of Exposure to SARS-CoV-2

Classifying Worker Exposure to SARS-CoV-2.

Jobs Classified at Lower Exposure Risk (Caution): What to Do to Protect Workers

Jobs Classified at Medium Exposure Risk: What to Do to Protect Workers

Jobs Classified at High or Very High Exposure Risk: What to Do to Protect Workers

Workers Living Abroad or Travelling Internationally

For More Information

OSHA Assistance, Services, and Programs

OSHA Regional Offices

How to Contact OSHA

Introduction

Coronavirus Disease 2019 (COVID-19) is a respiratory disease caused by the SARS-CoV-2 virus. It has spread from China to many other countries around the world, including the United States. Depending on the severity of COVID-19’s international impacts, outbreak conditions—including those rising to the level of a pandemic—can affect all aspects of daily life, including travel, trade, tourism, food supplies, and financial markets.

To reduce the impact of COVID-19 outbreak conditions on businesses, workers, customers, and the public, it is important for all employers to plan now for COVID-19. For employers who have already planned for influenza pandemics, planning for COVID-19 may involve updating plans to address the specific exposure risks, sources of exposure, routes of transmission, and other unique characteristics of SARS-CoV-2 (i.e., compared to pandemic influenza viruses). Employers who have not prepared for pandemic events should prepare themselves and their workers as far in advance as possible of potentially worsening outbreak conditions. Lack of continuity planning can result in a cascade of failures as employers attempt to address challenges of COVID-19 with insufficient resources and workers who might not be adequately trained for jobs they may have to perform under pandemic conditions.

The Occupational Safety and Health Administration (OSHA) developed this COVID-19 planning guidance based on traditional infection prevention and industrial hygiene practices. It focuses on the need for employers to implement engineering, administrative, and work practice controls and personal protective equipment (PPE), as well as considerations for doing so.

This guidance is intended for planning purposes. Employers and workers should use this planning guidance to help identify risk levels in workplace settings and to determine any appropriate control measures to implement. Additional guidance may be needed as COVID-19 outbreak conditions change, including as new information about the virus, its transmission, and impacts, becomes available.

The U.S. Department of Health and Human Services’ Centers for Disease Control and Prevention (CDC) provides the latest information about COVID-19 and the global outbreak: www.cdc.gov/coronavirus/2019-ncov.

The OSHA COVID-19 webpage offers information specifically for workers and employers: www.osha.gov/covid-19.

This guidance is advisory in nature and informational in content. It is not a standard or a regulation, and it neither creates new legal obligations nor alters existing obligations created by OSHA standards or the *Occupational Safety and Health Act* (OSH Act). Pursuant to the OSH Act, employers must comply with safety and health standards and regulations issued and enforced either by OSHA or by an OSHA-approved State Plan. In addition, the OSH Act’s General Duty Clause, [Section 5\(a\)\(1\)](#), requires employers to provide their employees with a workplace free from recognized hazards likely to cause death or serious physical harm. OSHA-approved State Plans may have standards, regulations and enforcement policies that are different from, but at least as effective as, OSHA’s. Check with your [State Plan](#), as applicable, for more information.

About COVID-19

Symptoms of COVID-19

Infection with SARS-CoV-2, the virus that causes COVID-19, can cause illness ranging from mild to severe and, in some cases, can be fatal. Symptoms typically include fever, cough, and shortness of breath. Some people infected with the virus have reported experiencing other non-respiratory symptoms. Other people, referred to as *asymptomatic cases*, have experienced no symptoms at all.

According to the CDC, symptoms of COVID-19 may appear in as few as 2 days or as long as 14 days after exposure.



How COVID-19 Spreads

Although the first human cases of COVID-19 likely resulted from exposure to infected animals, infected people can spread SARS-CoV-2 to other people.

The virus is thought to spread mainly from person-to-person, including:

- Between people who are in close contact with one another (within about 6 feet).
- Through respiratory droplets produced when an infected person coughs or sneezes. These droplets can land in the mouths or noses of people who are nearby or possibly be inhaled into the lungs.

Medium exposure risk jobs include those that require frequent and/or close contact with (i.e., within 6 feet of) other people who may be infected with SARS-CoV-2.

It may be possible that a person can get COVID-19 by touching a surface or object that has SARS-CoV-2 on it and then touching their own mouth, nose, or possibly their eyes, but this is not thought to be the primary way the virus spreads.

People are thought to be most contagious when they are most symptomatic (i.e., experiencing fever, cough, and/or shortness of breath). Some spread might be possible before people show symptoms; there have been reports of this type of asymptomatic transmission with this new coronavirus, but this is also not thought to be the main way the virus spreads.

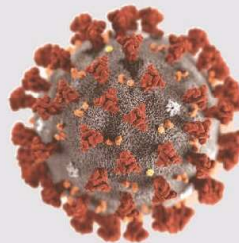
Although the United States has implemented public health measures to limit the spread of the virus, it is likely that some person-to-person transmission will continue to occur.

The CDC website provides the latest information about COVID-19 transmission: www.cdc.gov/coronavirus/2019-ncov/about/transmission.html.

How a COVID-19 Outbreak Could Affect Workplaces

Similar to influenza viruses, SARS-CoV-2, the virus that causes COVID-19, has the potential to cause extensive outbreaks. Under conditions associated with widespread person-to-person spread, multiple areas of the United States and other countries may see impacts at the same time. In the absence of a vaccine, an outbreak may also be an extended event. As a result, workplaces may experience:

- **Absenteeism.** Workers could be absent because they are sick; are caregivers for sick family members; are caregivers for children if schools or day care centers are closed; have at-risk people at home, such as immunocompromised family members; or are afraid to come to work because of fear of possible exposure.
- **Change in patterns of commerce.** Consumer demand for items related to infection prevention (e.g., respirators) is likely to increase significantly, while consumer interest in other goods may decline. Consumers may also change shopping patterns because of a COVID-19 outbreak. Consumers may try to shop at off-peak hours to reduce contact with other people, show increased interest in home delivery services, or prefer other options, such as drive-through service, to reduce person-to-person contact.
- **Interrupted supply/delivery.** Shipments of items from geographic areas severely affected by COVID-19 may be delayed or cancelled with or without notification.



This illustration, created at the Centers for Disease Control and Prevention (CDC), reveals ultrastructural morphology exhibited by the 2019 Novel Coronavirus (2019-nCoV). Note the spikes that adorn the outer surface of the virus, which impart the look of a corona surrounding the virion, when viewed electron microscopically. This virus was identified as the cause of an outbreak of respiratory illness first detected in Wuhan, China.

Photo: CDC / Alissa Eckert & Dan Higgins

Steps All Employers Can Take to Reduce Workers' Risk of Exposure to SARS-CoV-2

This section describes basic steps that every employer can take to reduce the risk of worker exposure to SARS-CoV-2, the virus that causes COVID-19, in their workplace. Later sections of this guidance—including those focusing on jobs classified as having low, medium, high, and very high exposure risks—provide specific recommendations for employers and workers within specific risk categories.

Develop an Infectious Disease Preparedness and Response Plan

If one does not already exist, develop an infectious disease preparedness and response plan that can help guide protective actions against COVID-19.

Stay abreast of guidance from federal, state, local, tribal, and/or territorial health agencies, and consider how to incorporate those recommendations and resources into workplace-specific plans.

Plans should consider and address the level(s) of risk associated with various worksites and job tasks workers perform at those sites. Such considerations may include:

- Where, how, and to what sources of SARS-CoV-2 might workers be exposed, including:
 - The general public, customers, and coworkers; and
 - Sick individuals or those at particularly high risk of infection (e.g., international travelers who have visited locations with widespread sustained (ongoing) COVID-19 transmission, healthcare workers who have had unprotected exposures to people known to have, or suspected of having, COVID-19).
- Non-occupational risk factors at home and in community settings.

- Workers' individual risk factors (e.g., older age; presence of chronic medical conditions, including immunocompromising conditions; pregnancy).
- Controls necessary to address those risks.

Follow federal and state, local, tribal, and/or territorial (SLTT) recommendations regarding development of contingency plans for situations that may arise as a result of outbreaks, such as:

- Increased rates of worker absenteeism.
- The need for social distancing, staggered work shifts, downsizing operations, delivering services remotely, and other exposure-reducing measures.
- Options for conducting essential operations with a reduced workforce, including cross-training workers across different jobs in order to continue operations or deliver surge service.
- Interrupted supply chains or delayed deliveries.

Plans should also consider and address the other steps that employers can take to reduce the risk of worker exposure to SARS-CoV-2 in their workplace, described in the sections below.

Prepare to Implement Basic Infection Prevention Measures

For most employers, protecting workers will depend on emphasizing basic infection prevention measures. As appropriate, all employers should implement good hygiene and infection control practices, including:

- Promote frequent and thorough **hand washing**, including by providing workers, customers, and worksite visitors with a place to wash their hands. If soap and running water are not immediately available, provide alcohol-based hand sanitizer containing at least 60% alcohol.
- Encourage workers to **stay home if they are sick**.
- Encourage **respiratory etiquette**, including covering coughs and sneezes.

- Provide customers and the public with tissues and trash receptacles.
- Employers should explore whether they can establish **policies and practices**, such as flexible worksites (e.g., telecommuting) and flexible work hours (e.g., staggered shifts), to increase the physical distance among employees and between employees and others if state and local health authorities recommend the use of social distancing strategies.
- 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. 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).

Develop Policies and Procedures for Prompt Identification and Isolation of Sick People, if Appropriate

- Prompt identification and isolation of potentially infectious individuals is a critical step in protecting workers, customers, visitors, and others at a worksite.
- Employers should inform and encourage employees to self-monitor for signs and symptoms of COVID-19 if they suspect possible exposure.
- Employers should develop policies and procedures for employees to report when they are sick or experiencing symptoms of COVID-19.

- Where appropriate, employers should develop policies and procedures for immediately isolating people who have **signs and/or symptoms** of COVID-19, and train workers to implement them. Move potentially infectious people to a location away from workers, customers, and other visitors. Although most worksites do not have specific isolation rooms, designated areas with closable doors may serve as isolation rooms until potentially sick people can be removed from the worksite.
- Take steps to limit spread of the respiratory secretions of a person who may have COVID-19. Provide a face mask, if feasible and available, and ask the person to wear it, if tolerated. Note: A face mask (also called a surgical mask, procedure mask, or other similar terms) 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).
- If possible, isolate people suspected of having COVID-19 separately from those with confirmed cases of the virus to prevent further transmission—particularly in worksites where medical screening, triage, or healthcare activities occur, using either permanent (e.g., wall/different room) or temporary barrier (e.g., plastic sheeting).
- Restrict the number of personnel entering isolation areas.
- Protect workers in close contact with (i.e., within 6 feet of) a sick person or who have prolonged/repeated contact with such persons by using additional engineering and administrative controls, safe work practices, and PPE. Workers whose activities involve close or prolonged/repeated contact with sick people are addressed further in later sections covering workplaces classified at medium and very high or high exposure risk.

Develop, Implement, and Communicate about Workplace Flexibilities and Protections

- Actively encourage sick employees to stay home.
- Ensure that sick leave policies are flexible and consistent with public health guidance and that employees are aware of these policies.
- Talk with companies that provide your business with contract or temporary employees about the importance of sick employees staying home and encourage them to develop non-punitive leave policies.
- Do not require a healthcare provider's note for employees who are sick with acute respiratory illness to validate their illness or to return to work, as healthcare provider offices and medical facilities may be extremely busy and not able to provide such documentation in a timely way.
- Maintain flexible policies that permit employees to stay home to care for a sick family member. Employers should be aware that more employees may need to stay at home to care for sick children or other sick family members than is usual.
- Recognize that workers with ill family members may need to stay home to care for them. See CDC's Interim Guidance for Preventing the Spread of COVID-19 in Homes and Residential Communities: www.cdc.gov/coronavirus/2019-ncov/hcp/guidance-prevent-spread.html.
- Be aware of workers' concerns about pay, leave, safety, health, and other issues that may arise during infectious disease outbreaks. Provide adequate, usable, and appropriate training, education, and informational material about business-essential job functions and worker health and safety, including proper hygiene practices and the use of any workplace controls (including PPE). Informed workers who feel safe at work are less likely to be unnecessarily absent.

- Work with insurance companies (e.g., those providing employee health benefits) and state and local health agencies to provide information to workers and customers about medical care in the event of a COVID-19 outbreak.

Implement Workplace Controls

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.

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.

Engineering Controls

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.
- 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 work policy or procedures to reduce or minimize exposure to a hazard. Examples of administrative controls for SARS-CoV-2 include:

- Encouraging sick workers to stay at home.
- Minimizing contact among workers, clients, and customers by replacing face-to-face meetings with virtual communications and implementing telework if feasible.
- Establishing alternating days or extra shifts that reduce the total number of employees in a facility at a given time, allowing them to maintain distance from one another while maintaining a full onsite work week.
- Discontinuing nonessential travel to locations with ongoing COVID-19 outbreaks. Regularly check CDC travel warning levels at: www.cdc.gov/coronavirus/2019-ncov/travelers.
- Developing emergency communications plans, including a forum for answering workers' concerns and internet-based communications, if feasible.
- 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 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.

Safe Work Practices

Safe work practices are types of administrative controls that include procedures for safe and proper work used to reduce the duration, frequency, or intensity of exposure to a hazard. Examples of safe work practices for SARS-CoV-2 include:

- Providing resources and a work environment that promotes personal hygiene. For example, provide tissues, no-touch trash cans, hand soap, alcohol-based hand rubs containing at least 60 percent alcohol, disinfectants, and disposable towels for workers to clean their work surfaces.
- Requiring regular hand washing or using of alcohol-based hand rubs. Workers should always wash hands when they are visibly soiled and after removing any PPE.
- Post handwashing signs in restrooms.

Personal Protective Equipment (PPE)

While engineering and administrative controls are considered more effective in minimizing exposure to SARS-CoV-2, PPE may also be needed to prevent certain exposures. While correctly using PPE can help prevent 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. During an outbreak of an infectious disease, such as COVID-19, recommendations for PPE specific to occupations or job tasks may change depending on geographic location, updated risk assessments for workers, and information on PPE effectiveness in preventing the spread of COVID-19. Employers should check the [OSHA](#) and [CDC](#) websites regularly for updates about recommended PPE.

All types of PPE must be:

- Selected based upon the hazard to the worker.
- Properly fitted and periodically refitted, as applicable (e.g., respirators).

- Consistently and properly worn when required.
- Regularly inspected, maintained, and replaced, as necessary.
- Properly removed, cleaned, and stored or disposed of, as applicable, to avoid contamination of self, others, or the environment.

Employers are obligated to provide their workers with PPE needed to keep them safe while performing their jobs. The types of PPE required during a COVID-19 outbreak will be based on the risk of being infected with SARS-CoV-2 while working and job tasks that may lead to exposure.

Workers, including those who work within 6 feet of patients known to be, or suspected of being, infected with SARS-CoV-2 and those performing aerosol-generating procedures, need to use respirators:

- National Institute for Occupational Safety and Health (NIOSH)-approved, N95 filtering facepiece respirators or better must be used in the context of a comprehensive, written respiratory protection program that includes fit-testing, training, and medical exams. See OSHA's Respiratory Protection standard, 29 CFR 1910.134 at www.osha.gov/laws-regs/regulations/standardnumber/1910/1910.134.
- When disposable N95 filtering facepiece respirators are not available, consider using other respirators that provide greater protection and improve worker comfort. Other types of acceptable respirators include: a R/P95, N/R/P99, or N/R/P100 filtering facepiece respirator; an air-purifying elastomeric (e.g., half-face or full-face) respirator with appropriate filters or cartridges; powered air purifying respirator (PAPR) with high-efficiency particulate arrestance (HEPA) filter; or supplied air respirator (SAR). See CDC/NIOSH guidance for optimizing respirator supplies at: www.cdc.gov/coronavirus/2019-ncov/hcp/respirators-strategy.

- Consider using PAPRs or SARs, which are more protective than filtering facepiece respirators, for any work operations or procedures likely to generate aerosols (e.g., cough induction procedures, some dental procedures, invasive specimen collection, blowing out pipettes, shaking or vortexing tubes, filling a syringe, centrifugation).
- Use a surgical N95 respirator when both respiratory protection and resistance to blood and body fluids is needed.
- Face shields may also be worn on top of a respirator to prevent bulk contamination of the respirator. Certain respirator designs with forward protrusions (duckbill style) may be difficult to properly wear under a face shield. Ensure that the face shield does not prevent airflow through the respirator.
- Consider factors such as function, fit, ability to decontaminate, disposal, and cost. OSHA's Respiratory Protection eTool provides basic information on respirators such as medical requirements, maintenance and care, fit testing, written respiratory protection programs, and voluntary use of respirators, which employers may also find beneficial in training workers at: www.osha.gov/SLTC/etools/respiratory. Also see NIOSH respirator guidance at: www.cdc.gov/niosh/topics/respirators.
- Respirator training should address selection, use (including donning and doffing), proper disposal or disinfection, inspection for damage, maintenance, and the limitations of respiratory protection equipment. Learn more at: www.osha.gov/SLTC/respiratoryprotection.
- The appropriate form of respirator will depend on the type of exposure and on the transmission pattern of COVID-19. See the NIOSH "Respirator Selection Logic" at: www.cdc.gov/niosh/docs/2005-100/default.html or the OSHA "Respiratory Protection eTool" at www.osha.gov/SLTC/etools/respiratory.

Follow Existing OSHA Standards

Existing OSHA standards may apply to protecting workers from exposure to and infection with SARS-CoV-2.

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.
 - 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.
- 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.

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.

The OSHA COVID-19 webpage provides additional information about OSHA standards and requirements, including requirements in states that operate their own OSHA-approved State Plans, recordkeeping requirements and injury/illness recording criteria, and applications of standards related to sanitation and communication of risks related to hazardous chemicals that may be in common sanitizers and sterilizers. See: www.osha.gov/SLTC/covid-19/standards.html.

Classifying Worker Exposure to SARS-CoV-2

Worker risk of occupational exposure to SARS-CoV-2, the virus that causes COVID-19, during an outbreak may vary from very high to high, medium, or lower (caution) risk. The level of risk depends in part on the industry type, need for contact within 6 feet of people known to be, or suspected of being, infected with SARS-CoV-2, or requirement for repeated or extended contact with persons known to be, or suspected of being, infected with SARS-CoV-2. To help employers determine appropriate precautions, OSHA has divided job tasks into four risk exposure levels: very high, high, medium, and lower risk. The Occupational Risk Pyramid shows the four exposure risk levels in the shape of a pyramid to represent probable distribution of risk. Most American workers will likely fall in the lower exposure risk (caution) or medium exposure risk level:



Very High Exposure Risk

Very high exposure risk jobs are those with high potential for exposure to known or suspected sources of COVID-19 during specific medical, postmortem, or laboratory procedures. Workers in this category include:

- Healthcare workers (e.g., doctors, nurses, dentists, paramedics, emergency medical technicians) performing aerosol-generating procedures (e.g., intubation, cough induction procedures, bronchoscopies, some dental procedures and exams, or invasive specimen collection) on known or suspected COVID-19 patients.
- Healthcare or laboratory personnel collecting or handling specimens from known or suspected COVID-19 patients (e.g., manipulating cultures from known or suspected COVID-19 patients).
- Morgue workers performing autopsies, which generally involve aerosol-generating procedures, on the bodies of people who are known to have, or suspected of having, COVID-19 at the time of their death.

High Exposure Risk

High exposure risk jobs are those with high potential for exposure to known or suspected sources of COVID-19. Workers in this category include:

- Healthcare delivery and support staff (e.g., doctors, nurses, and other hospital staff who must enter patients' rooms) exposed to known or suspected COVID-19 patients. (Note: when such workers perform aerosol-generating procedures, their exposure risk level becomes *very high*.)
- Medical transport workers (e.g., ambulance vehicle operators) moving known or suspected COVID-19 patients in enclosed vehicles.
- Mortuary workers involved in preparing (e.g., for burial or cremation) the bodies of people who are known to have, or suspected of having, COVID-19 at the time of their death.

Medium Exposure Risk

Medium exposure risk jobs include those that require frequent and/or close contact with (i.e., within 6 feet of) people who may be infected with SARS-CoV-2, but who are not known or suspected COVID-19 patients. In areas without ongoing community transmission, workers in this risk group may have frequent contact with travelers who may return from international locations with widespread COVID-19 transmission. In areas where there *is* ongoing community transmission, workers in this category may have contact with the general public (e.g., schools, high-population-density work environments, some high-volume retail settings).

Lower Exposure Risk (Caution)

Lower exposure risk (caution) jobs are those that do not require contact with people known to be, or suspected of being, infected with SARS-CoV-2 nor frequent close contact with (i.e., within 6 feet of) the general public. Workers in this category have minimal occupational contact with the public and other coworkers.

Jobs Classified at Lower Exposure Risk (Caution): What to Do to Protect Workers

For workers who do not have frequent contact with the general public, employers should follow the guidance for “[Steps All Employers Can Take to Reduce Workers’ Risk of Exposure to SARS-CoV-2](#),” on page 7 of this booklet and implement control measures described in this section.

Engineering Controls

Additional engineering controls are not recommended for workers in the lower exposure risk group. Employers should ensure that engineering controls, if any, used to protect workers from other job hazards continue to function as intended.

Administrative Controls

- Monitor public health communications about COVID-19 recommendations and ensure that workers have access to that information. Frequently check the CDC COVID-19 website: www.cdc.gov/coronavirus/2019-ncov.
- Collaborate with workers to designate effective means of communicating important COVID-19 information.

Personal Protective Equipment

Additional PPE is not recommended for workers in the lower exposure risk group. Workers should continue to use the PPE, if any, that they would ordinarily use for other job tasks.

Jobs Classified at Medium Exposure Risk: What to Do to Protect Workers

In workplaces where workers have medium exposure risk, employers should follow the guidance for “[Steps All Employers Can Take to Reduce Workers’ Risk of Exposure to SARS-CoV-2](#),” on page 7 of this booklet and implement control measures described in this section.

Engineering Controls

- Install physical barriers, such as clear plastic sneeze guards, where feasible.

Administrative Controls

- Consider offering face masks to ill employees and customers to contain respiratory secretions until they are able leave the workplace (i.e., for medical evaluation/care or to return home). In the event of a shortage of masks, a reusable face shield that can be decontaminated may be an acceptable method of protecting against droplet transmission. See CDC/NIOSH guidance for optimizing respirator supplies, which discusses the use of surgical masks, at: www.cdc.gov/coronavirus/2019-ncov/hcp/respirators-strategy.

- Keep customers informed about symptoms of COVID-19 and ask sick customers to minimize contact with workers until healthy again, such as by posting signs about COVID-19 in stores where sick customers may visit (e.g., pharmacies) or including COVID-19 information in automated messages sent when prescriptions are ready for pick up.
- Where appropriate, limit customers’ and the public’s access to the worksite, or restrict access to only certain workplace areas.
- Consider strategies to minimize face-to-face contact (e.g., drive-through windows, phone-based communication, telework).
- Communicate the availability of medical screening or other worker health resources (e.g., on-site nurse; telemedicine services).

Personal Protective Equipment (PPE)

When selecting PPE, consider factors such as function, fit, decontamination ability, disposal, and cost. Sometimes, when PPE will have to be used repeatedly for a long period of time, a more expensive and durable type of PPE may be less expensive overall than disposable PPE. Each employer should select the combination of PPE that protects workers specific to their workplace.

Workers with medium exposure risk may need to wear some combination of gloves, a gown, a face mask, and/or a face shield or goggles. PPE ensembles for workers in the medium exposure risk category will vary by work task, the results of the employer’s hazard assessment, and the types of exposures workers have on the job.

High exposure risk jobs are those with high potential for exposure to known or suspected sources of COVID-19.

Very high exposure risk jobs are those with high potential for exposure to known or suspected sources of COVID-19 during specific medical, postmortem, or laboratory procedures that involve aerosol generation or specimen collection/handling.

In rare situations that would require workers in this risk category to use respirators, see the PPE section beginning on [page 14](#) of this booklet, which provides more details about respirators. For the most up-to-date information, visit OSHA's COVID-19 webpage: www.osha.gov/covid-19.

Jobs Classified at High or Very High Exposure Risk: What to Do to Protect Workers

In workplaces where workers have high or very high exposure risk, employers should follow the guidance for “Steps All Employers Can Take to Reduce Workers’ Risk of Exposure to SARS-CoV-2,” on page 7 of this booklet and implement control measures described in this section.

Engineering Controls

- Ensure appropriate air-handling systems are installed and maintained in healthcare facilities. See “Guidelines for Environmental Infection Control in Healthcare Facilities” for more recommendations on air handling systems at: www.cdc.gov/mmwr/preview/mmwrhtml/rr5210a1.htm.
- CDC recommends that patients with known or suspected COVID-19 (i.e., person under investigation) should be placed in an airborne infection isolation room (AIIR), if available.
- Use isolation rooms when available for performing aerosol-generating procedures on patients with known or suspected COVID-19. For postmortem activities, use autopsy suites or other similar isolation facilities when performing aerosol-generating procedures on the bodies of people who are known to have, or suspected of having, COVID-19 at the time of their death. See the CDC postmortem guidance at: www.cdc.gov/coronavirus/2019-ncov/hcp/guidance-postmortem-specimens.html. OSHA also provides guidance for postmortem activities on its COVID-19 webpage: www.osha.gov/covid-19.

- Use special precautions associated with Biosafety Level 3 when handling specimens from known or suspected COVID-19 patients. For more information about biosafety levels, consult the U.S. Department of Health and Human Services (HHS) “Biosafety in Microbiological and Biomedical Laboratories” at www.cdc.gov/biosafety/publications/bmbl5.

Administrative Controls

If working in a healthcare facility, follow existing guidelines and facility standards of practice for identifying and isolating infected individuals and for protecting workers.

- Develop and implement policies that reduce exposure, such as cohorting (i.e., grouping) COVID-19 patients when single rooms are not available.
- Post signs requesting patients and family members to immediately report symptoms of respiratory illness on arrival at the healthcare facility and use disposable face masks.
- Consider offering enhanced medical monitoring of workers during COVID-19 outbreaks.
- Provide all workers with job-specific education and training on preventing transmission of COVID-19, including initial and routine/refreshers training.
- Ensure that psychological and behavioral support is available to address employee stress.

Safe Work Practices

- Provide emergency responders and other essential personnel who may be exposed while working away from fixed facilities with alcohol-based hand rubs containing at least 60% alcohol for decontamination in the field.

Personal Protective Equipment (PPE)

Most workers at high or very high exposure risk likely need to wear gloves, a gown, a face shield or goggles, and either a face mask or a respirator, depending on their job tasks and exposure risks.

Those who work closely with (either in contact with or within 6 feet of) patients known to be, or suspected of being, infected with SARS-CoV-2, the virus that causes COVID-19, should wear respirators. In these instances, see the PPE section beginning on [page 14](#) of this booklet, which provides more details about respirators. For the most up-to-date information, also visit OSHA's COVID-19 webpage: www.osha.gov/covid-19.

PPE ensembles may vary, especially for workers in laboratories or morgue/mortuary facilities who may need additional protection against blood, body fluids, chemicals, and other materials to which they may be exposed. Additional PPE may include medical/surgical gowns, fluid-resistant coveralls, aprons, or other disposable or reusable protective clothing. Gowns should be large enough to cover the areas requiring protection. OSHA may also provide updated guidance for PPE use on its website: www.osha.gov/covid-19.

NOTE: Workers who dispose of PPE and other infectious waste must also be trained and provided with appropriate PPE.

The CDC webpage “Healthcare-associated Infections” (www.cdc.gov/hai) provides additional information on infection control in healthcare facilities.

Workers Living Abroad or Travelling Internationally

Employers with workers living abroad or traveling on international business should consult the “Business Travelers” section of the OSHA COVID-19 webpage (www.osha.gov/covid-19), which also provides links to the latest:

- CDC travel warnings: www.cdc.gov/coronavirus/2019-ncov/travelers
- U.S. Department of State (DOS) travel advisories: travel.state.gov

Employers should communicate to workers that the DOS cannot provide Americans traveling or living abroad with medications or supplies, even in the event of a COVID-19 outbreak.

As COVID-19 outbreak conditions change, travel into or out of a country may not be possible, safe, or medically advisable. It is also likely that governments will respond to a COVID-19 outbreak by imposing public health measures that restrict domestic and international movement, further limiting the U.S. government's ability to assist Americans in these countries. It is important that employers and workers plan appropriately, as it is possible that these measures will be implemented very quickly in the event of worsening outbreak conditions in certain areas.

More information on COVID-19 planning for workers living and traveling abroad can be found at: www.cdc.gov/travel.

For More Information

Federal, state, and local government agencies are the best source of information in the event of an infectious disease outbreak, such as COVID-19. Staying informed about the latest developments and recommendations is critical, since specific guidance may change based upon evolving outbreak situations.

Below are several recommended websites to access the most current and accurate information:

- Occupational Safety and Health Administration website: www.osha.gov
- Centers for Disease Control and Prevention website: www.cdc.gov
- National Institute for Occupational Safety and Health website: www.cdc.gov/niosh

OSHA Assistance, Services, and Programs

OSHA has a great deal of information to assist employers in complying with their responsibilities under OSHA law. Several OSHA programs and services can help employers identify and correct job hazards, as well as improve their safety and health program.

Establishing a Safety and Health Program

Safety and health programs are systems that can substantially reduce the number and severity of workplace injuries and illnesses, while reducing costs to employers.

Visit www.osha.gov/safetymanagement for more information.

Compliance Assistance Specialists

OSHA compliance assistance specialists can provide information to employers and workers about OSHA standards, short educational programs on specific hazards or OSHA rights and responsibilities, and information on additional compliance assistance resources.

Visit www.osha.gov/complianceassistance/cas or call 1-800-321-OSHA (6742) to contact your local OSHA office.

No-Cost On-Site Safety and Health Consultation Services for Small Business

OSHA's On-Site Consultation Program offers no-cost and confidential advice to small and medium-sized businesses in all states, with priority given to high-hazard worksites. On-Site consultation services are separate from enforcement and do not result in penalties or citations.

For more information or to find the local On-Site Consultation office in your state, visit www.osha.gov/consultation, or call 1-800-321-OSHA (6742).

Under the consultation program, certain exemplary employers may request participation in OSHA's **Safety and Health Achievement Recognition Program (SHARP)**. Worksites that receive SHARP recognition are exempt from programmed inspections during the period that the SHARP certification is valid.

Cooperative Programs

OSHA offers cooperative programs under which businesses, labor groups and other organizations can work cooperatively with OSHA. To find out more about any of the following programs, visit www.osha.gov/cooperativeprograms.

Strategic Partnerships and Alliances

The OSHA Strategic Partnerships (OSP) provide the opportunity for OSHA to partner with employers, workers, professional or trade associations, labor organizations, and/or other interested stakeholders. Through the Alliance Program, OSHA works with groups to develop compliance assistance tools and resources to share with workers and employers, and educate workers and employers about their rights and responsibilities.

Voluntary Protection Programs (VPP)

The VPP recognize employers and workers in the private sector and federal agencies who have implemented effective safety and health programs and maintain injury and illness rates below the national average for their respective industries.

Occupational Safety and Health Training

OSHA partners with 26 OSHA Training Institute Education Centers at 37 locations throughout the United States to deliver courses on OSHA standards and occupational safety and health topics to thousands of students a year. For more information on training courses, visit www.osha.gov/otiec.

- CDC travel warnings: www.cdc.gov/coronavirus/2019-ncov/travelers
- U.S. Department of State (DOS) travel advisories: travel.state.gov

Employers should communicate to workers that the DOS cannot provide Americans traveling or living abroad with medications or supplies, even in the event of a COVID-19 outbreak.

As COVID-19 outbreak conditions change, travel into or out of a country may not be possible, safe, or medically advisable. It is also likely that governments will respond to a COVID-19 outbreak by imposing public health measures that restrict domestic and international movement, further limiting the U.S. government's ability to assist Americans in these countries. It is important that employers and workers plan appropriately, as it is possible that these measures will be implemented very quickly in the event of worsening outbreak conditions in certain areas.

More information on COVID-19 planning for workers living and traveling abroad can be found at: www.cdc.gov/travel.

For More Information

Federal, state, and local government agencies are the best source of information in the event of an infectious disease outbreak, such as COVID-19. Staying informed about the latest developments and recommendations is critical, since specific guidance may change based upon evolving outbreak situations.

Below are several recommended websites to access the most current and accurate information:

- Occupational Safety and Health Administration website: www.osha.gov
- Centers for Disease Control and Prevention website: www.cdc.gov
- National Institute for Occupational Safety and Health website: www.cdc.gov/niosh

OSHA Assistance, Services, and Programs

OSHA has a great deal of information to assist employers in complying with their responsibilities under OSHA law. Several OSHA programs and services can help employers identify and correct job hazards, as well as improve their safety and health program.

Establishing a Safety and Health Program

Safety and health programs are systems that can substantially reduce the number and severity of workplace injuries and illnesses, while reducing costs to employers.

Visit www.osha.gov/safetymanagement for more information.

Compliance Assistance Specialists

OSHA compliance assistance specialists can provide information to employers and workers about OSHA standards, short educational programs on specific hazards or OSHA rights and responsibilities, and information on additional compliance assistance resources.

Visit www.osha.gov/complianceassistance/cas or call 1-800-321-OSHA (6742) to contact your local OSHA office.

No-Cost On-Site Safety and Health Consultation Services for Small Business

OSHA's On-Site Consultation Program offers no-cost and confidential advice to small and medium-sized businesses in all states, with priority given to high-hazard worksites. On-Site consultation services are separate from enforcement and do not result in penalties or citations.

For more information or to find the local On-Site Consultation office in your state, visit www.osha.gov/consultation, or call 1-800-321-OSHA (6742).

Under the consultation program, certain exemplary employers may request participation in OSHA's **Safety and Health Achievement Recognition Program (SHARP)**. Worksites that receive SHARP recognition are exempt from programmed inspections during the period that the SHARP certification is valid.

Cooperative Programs

OSHA offers cooperative programs under which businesses, labor groups and other organizations can work cooperatively with OSHA. To find out more about any of the following programs, visit www.osha.gov/cooperativeprograms.

Strategic Partnerships and Alliances

The OSHA Strategic Partnerships (OSP) provide the opportunity for OSHA to partner with employers, workers, professional or trade associations, labor organizations, and/or other interested stakeholders. Through the Alliance Program, OSHA works with groups to develop compliance assistance tools and resources to share with workers and employers, and educate workers and employers about their rights and responsibilities.

Voluntary Protection Programs (VPP)

The VPP recognize employers and workers in the private sector and federal agencies who have implemented effective safety and health programs and maintain injury and illness rates below the national average for their respective industries.

Occupational Safety and Health Training

OSHA partners with 26 OSHA Training Institute Education Centers at 37 locations throughout the United States to deliver courses on OSHA standards and occupational safety and health topics to thousands of students a year. For more information on training courses, visit www.osha.gov/otiec.

OSHA Educational Materials

OSHA has many types of educational materials to assist employers and workers in finding and preventing workplace hazards.

All OSHA publications are free at www.osha.gov/publications and www.osha.gov/ebooks. You can also call 1-800-321-OSHA (6742) to order publications.

Employers and safety and health professionals can sign-up for *QuickTakes*, OSHA's free, twice-monthly online newsletter with the latest news about OSHA initiatives and products to assist in finding and preventing workplace hazards. To sign up, visit www.osha.gov/quicktakes.

OSHA Regional Offices

Region 1

Boston Regional Office
(CT*, ME*, MA, NH, RI, VT*)
JFK Federal Building
25 New Sudbury Street, Room E340
Boston, MA 02203
(617) 565-9860 (617) 565-9827 Fax

Region 2

New York Regional Office
(NJ*, NY*, PR*, VI*)
Federal Building
201 Varick Street, Room 670
New York, NY 10014
(212) 337-2378 (212) 337-2371 Fax

Region 3

Philadelphia Regional Office
(DE, DC, MD*, PA, VA*, WV)
The Curtis Center
170 S. Independence Mall West, Suite 740 West
Philadelphia, PA 19106-3309
(215) 861-4900 (215) 861-4904 Fax

Region 4

Atlanta Regional Office
(AL, FL, GA, KY*, MS, NC*, SC*, TN*)
Sam Nunn Atlanta Federal Center
61 Forsyth Street, SW, Room 6T50
Atlanta, GA 30303
(678) 237-0400 (678) 237-0447 Fax

Region 5

Chicago Regional Office
(IL*, IN*, MI*, MN*, OH, WI)
John C. Kluczynski Federal Building
230 South Dearborn Street, Room 3244
Chicago, IL 60604
(312) 353-2220 (312) 353-7774 Fax

Region 6

Dallas Regional Office
(AR, LA, NM*, OK, TX)
A. Maceo Smith Federal Building
525 Griffin Street, Room 602
Dallas, TX 75202
(972) 850-4145 (972) 850-4149 Fax

Region 7

Kansas City Regional Office
(IA*, KS, MO, NE)
Two Pershing Square Building
2300 Main Street, Suite 1010
Kansas City, MO 64108-2416
(816) 283-8745 (816) 283-0547 Fax

Region 8

Denver Regional Office
(CO, MT, ND, SD, UT*, WY*)
Cesar Chavez Memorial Building
1244 Speer Boulevard, Suite 551
Denver, CO 80204
(720) 264-6550 (720) 264-6585 Fax

Region 9

San Francisco Regional Office
(AZ*, CA*, HI*, NV*, and American Samoa,
Guam and the Northern Mariana Islands)
San Francisco Federal Building
90 7th Street, Suite 2650
San Francisco, CA 94103
(415) 625-2547 (415) 625-2534 Fax

Region 10

Seattle Regional Office
(AK*, ID, OR*, WA*)
Fifth & Yesler Tower
300 Fifth Avenue, Suite 1280
Seattle, WA 98104
(206) 757-6700 (206) 757-6705 Fax

*These states and territories operate their own OSHA-approved job safety and health plans and cover state and local government employees as well as private sector employees. The Connecticut, Illinois, Maine, New Jersey, New York and Virgin Islands programs cover public employees only. (Private sector workers in these states are covered by Federal OSHA). States with approved programs must have standards that are identical to, or at least as effective as, the Federal OSHA standards.

Note: To get contact information for OSHA area offices, OSHA-approved state plans and OSHA consultation projects, please visit us online at www.osha.gov or call us at 1-800-321-OSHA (6742).

How to Contact OSHA

Under the Occupational Safety and Health Act of 1970, employers are responsible for providing safe and healthful workplaces for their employees. OSHA's role is to help ensure these conditions for America's working men and women by setting and enforcing standards, and providing training, education and assistance. For more information, visit www.osha.gov or call OSHA at 1-800-321-OSHA (6742), TTY 1-877-889-5627.

**For assistance, contact us.
We are OSHA. We can help.**



U.S. Department of Labor

For more information:

