



COVID-19 INDUSTRY GUIDANCE:

Life Sciences

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covid19.ca.gov



OVERVIEW

On March 19, 2020, the State Public Health Officer and Director of the California Department of Public Health issued an order requiring most Californians to stay at home to disrupt the spread of COVID-19 among the population.

The impact of COVID-19 on the health of Californians is not yet fully known. Reported illness ranges from very mild (some people have no symptoms) to severe illness that may result in death. Certain groups, including people aged 65 or older and those with serious underlying medical conditions, such as heart or lung disease or diabetes, are at higher risk of hospitalization and serious complications. Transmission is most likely when people are in close contact or in a poorly ventilated area with an infected person, even if that person does not have any symptoms or has not yet developed symptoms.

Precise information about the number and rates of COVID-19 by industry or occupational groups, including among critical infrastructure workers, is not available at this time. There have been multiple outbreaks in a range of workplaces, indicating that workers are at risk of acquiring or transmitting COVID-19 infection. Examples of these workplaces include hospitals, long-term care facilities, prisons, food production, warehouses, meat processing plants, and grocery stores.

As stay-at-home orders are modified, it is essential that all possible steps be taken to ensure the safety of workers and the public.

Key prevention practices include:

- ✓ physical distancing to the maximum extent possible,
- ✓ use of face coverings by workers (where respiratory protection is not required) and customers/clients,
- ✓ frequent handwashing and regular cleaning and disinfection,
- ✓ training workers on these and other elements of the COVID-19 prevention plan.

In addition, it will be critical to have in place appropriate processes to identify new cases of illness in workplaces and, when they are identified, to intervene quickly and work with public health authorities to halt the spread of the virus.

PURPOSE

This document provides guidance for the life sciences industry to support a safe, clean environment for workers. The guidance is not intended to revoke or repeal any worker rights, either statutory, regulatory or collectively bargained, and is not exhaustive, as it does not include county health orders, nor is it a substitute for any existing safety and health-related regulatory requirements such as those of Cal/OSHA.¹ Stay current on changes to public health guidance and state/local orders, as the COVID-19 situation continues. Cal/OSHA has specific requirements for facilities that handle pathogens (title 8 section 5199) and additional safety and health guidance on their Cal/OSHA COVID-19 Infection Prevention webpage. CDC has additional information in their guidance for laboratories and for businesses and employers.

Required Use of Face Coverings

On June 18, CDPH issued <u>Guidance on the Use of Face Coverings</u>, which broadly requires the use of face coverings for both members of the public and workers in all public and workplace settings where there is a high risk of exposure.

People in California must wear face coverings when they are engaged in work, whether at the workplace or performing work off-site, when:

- Interacting in-person with any member of the public;
- Working in any space visited by members of the public, regardless of whether anyone from the public is present at the time;
- Working in any space where food is prepared or packaged for sale or distribution to others;
- Working in or walking through common areas, such as hallways, stairways, elevators, and parking facilities;
- In any room or enclosed area where other people (except for members of the person's own household or residence) are present when unable to physically distance:
- Driving or operating any public transportation or paratransit vehicle, taxi, or
 private car service or ride-sharing vehicle when passengers are present. When no
 passengers are present, face coverings are strongly recommended.

Complete details, including all requirements and exemptions to these rules, can be found in the <u>guidance</u>. Face coverings are strongly encouraged in other circumstances, and employers can implement additional face covering requirements in fulfilling their obligation to provide workers with a safe and healthful workplace. Employers should provide face coverings to workers or reimburse workers for the reasonable cost of obtaining them.

Employers should develop an accommodation policy for any worker who meets one of the exemptions from wearing a face covering. If a worker who would otherwise be required to wear a face covering because of frequent contact with others cannot wear one due to a medical condition, they should be provided with a non-restrictive alternative, such as a face shield with a drape attached to the bottom edge, if feasible, and if the medical condition permits it.

Businesses that are open to the public should be cognizant of the exemptions to wearing face coverings in the <u>CDPH Face Covering Guidance</u> and may not exclude any member of the public for not wearing a face covering if that person is complying with the <u>guidance</u>. Businesses will need to develop policies for handling these exemptions among customers, clients, visitors, and workers.



Worksites that Handle Infectious Pathogens

Research facilities, laboratories, and other locations that handle material that may contain pathogens and whose operations may disperse pathogens in the air must establish, implement, and maintain an effective written Biosafety Plan, administered by the facility's biological safety officer. The Biosafety Plan must include the following:

- List of job classifications with exposure to infectious pathogens.
- List of infectious pathogens known or reasonably expected to be present in laboratory materials and applicable biosafety measures.
- Procedures to ensure all incoming materials containing pathogens are treated as virulent, until verified as deactivated or attenuated.
- A risk assessment, performed by the biological safety officer, in accordance with CDC's <u>Biosafety in Microbiological and Biomedical</u> Laboratories guidelines.
- Feasible engineering controls including containment equipment and procedures.
- Required safe work practice controls and prohibited unsafe work practices in accordance with the risk assessment and CDC guidelines.
- Necessary personal protective equipment (PPE), including respiratory protective equipment.
- Effective decontamination and disinfection procedures for laboratory surfaces, equipment, and tools.
- Procedures for communicating hazards to workers and providing required worker training.
- Emergency procedures for uncontrolled releases in the facility and untreated releases outside the facility.
- Provision of applicable vaccines to workers.
- Procedures to investigate and provide medical follow up to workers exposed to laboratory pathogens.
- Procedures to annually inspect facilities and annually audit the facility's biosafety procedures.
- Procedures to record and correct deficiencies found during inspections and audits.



Workplace Specific Plan

- Establish a written, workplace-specific COVID-19 prevention plan at every location, perform a comprehensive risk assessment of all work areas and work tasks, and designate a person at each establishment to implement the plan.
- Incorporate the <u>CDPH Face Covering Guidance</u> into the Workplace Specific Plan and include a policy for handling exemptions.
- Identify contact information for the local health department where the operation is located for communicating information about COVID-19 outbreaks among workers or customers.
- Train and communicate with workers and worker representatives on the plan and make the plan available to workers and their representatives.
- Regularly evaluate the establishment for compliance with the plan and document and correct deficiencies identified.
- Investigate any COVID-19 illness and determine if any work-related factors could have contributed to risk of infection. Update the plan as needed to prevent further cases.
- Implement the necessary processes and protocols when a workplace has an outbreak, in accordance with <u>CDPH guidelines</u>.
- Identify close contacts (within six feet for 15 minutes or more) of an infected worker and take steps to isolate COVID-19 positive worker(s) and close contacts.
- Adhere to the guidelines below. Failure to do so could result in workplace illnesses that may cause operations to be temporarily closed or limited.



Topics for Worker Training

- If applicable, training on the facility's biosafety plan and all controls used to prevent transmission of aerosol transmitted diseases while working with pathogens.
- Information on <u>COVID-19</u>, how to prevent it from spreading, and which
 underlying health conditions may make individuals more susceptible to
 contracting the virus.
- Self-screening at home, including temperature and/or symptom checks using CDC guidelines.

- The importance of not coming to work:
 - If a worker has symptoms of COVID-19 as <u>described by the CDC</u>, such as a fever or chills, cough, shortness of breath or difficulty breathing, fatigue, muscle or body aches, headache, new loss of taste or smell, sore throat, congestion or runny nose, nausea, vomiting, or diarrhea, OR
 - If a worker was diagnosed with COVID-19 and has not yet been released from isolation. OR
 - o If, within the past 14 days, a worker has had contact with someone who has been diagnosed with COVID-19 and is considered potentially infectious (i.e. still on isolation).
- To return to work after a worker receives a COVID-19 diagnosis only if 10 days have passed since symptoms first appeared, their symptoms have improved, and the worker has had no fevers (without the use of fever reducing medications) for the last 72 hours. A worker without symptoms who was diagnosed with COVID-19 can return to work only if 10 days have passed since the date of the first positive COVID-19 test.
- To seek medical attention if their symptoms become severe, including
 persistent pain or pressure in the chest, confusion, or bluish lips or face.
 Updates and further details are available on <u>CDC's webpage</u>.
- The importance of frequent handwashing with soap and water, including scrubbing with soap for 20 seconds (or using hand sanitizer with at least 60% ethanol (preferred) or 70% isopropanol (if the product is inaccessible to unsupervised children) when workers cannot get to a sink or handwashing station, per <u>CDC guidelines</u>).
- The importance of physical distancing, both at work and off work time (see Physical Distancing section below).
- Proper use of face coverings, including:
 - Face coverings do not protect the wearer and are not personal protective equipment (PPE).
 - Face coverings can help protect people near the wearer, but do not replace the need for physical distancing and frequent handwashing.
 - o Face coverings must cover the nose and mouth.
 - Workers should wash or sanitize hands before and after using or adjusting face coverings.
 - o Avoid touching the eyes, nose, and mouth.

- Face coverings must not be shared and should be washed or discarded after each shift.
- Information contained in the <u>CDPH Guidance for the Use of Face</u>
 <u>Coverings</u>, which mandates the circumstances in which face coverings
 must be worn and the exemptions, as well as any policies, work rules, and
 practices the employer has adopted to ensure the use of face coverings.
 Training should also include the employer's policies on how people who
 are exempted from wearing a face covering will be handled.
- Ensure any independent contractors, temporary, or contract workers at the facility are also properly trained in COVID-19 prevention policies and have necessary supplies and PPE. Discuss these responsibilities ahead of time with organizations supplying temporary and/or contract workers.
- Information on paid leave benefits the worker may be entitled to receive that would make it financially easier to stay at home. See additional information on government programs supporting sick leave and workers' compensation for COVID-19, including workers' sick leave rights under the Families First Coronavirus Response Act and workers' rights to workers' compensation benefits and presumption of the work-relatedness of COVID-19 pursuant to the Governor's Executive Order N-62-20 while that Order is in effect.



Individual Control Measures and Screening

- Provide temperature and/or symptom screenings for all workers at the beginning of their shift and any vendors, contractors, visitors, or other workers entering the establishment. Make sure the temperature/symptom screener avoids close contact with workers to the extent possible.
- If requiring self-screening at home, which is an appropriate alternative to
 providing it at the establishment, ensure that screening was performed
 prior to the worker leaving the home for their shift and follows <u>CDC</u>
 guidelines, as described in the Topics for Worker Training section above.
- Encourage workers who are sick or exhibiting symptoms of COVID-19 to stay home.
- Employers must provide and ensure workers use all required protective equipment, including eye protection and gloves where necessary.
 Employers should consider where disposable glove use may be helpful to supplement frequent handwashing or use of hand sanitizer; examples are for workers who are screening others for symptoms or handling commonly touched items.

 For those facilities in laboratory, research, or clinical settings, evaluate existing personal protective equipment practices and determine additional measures or necessary adjustments to prevent exposure to COVID-19.



Cleaning and Disinfecting Protocols

- Perform thorough cleaning on high traffic areas such as lunch areas, changing areas, and areas of ingress and egress including stairways, stairwells, handrails, and elevators controls. Frequently disinfect commonly used surfaces including laboratory equipment, tools, office supplies, doorknobs, toilets, and handwashing facilities.
- Clean touchable surfaces between shifts or between users, whichever is more frequent, including but not limited to working surfaces, tools, handles and latches, and controls on stationary and mobile equipment.
- Avoid sharing phones, desks, office equipment, or other items wherever possible. Never share PPE.
- Supply the necessary cleaning products so workers can clean and disinfect personal work areas. Ensure that sanitary facilities stay operational and stocked at all times and provide additional soap, paper towels, and hand sanitizer when needed.
- To minimize the risk of <u>Legionnaires' disease</u> and other diseases associated with water, <u>take steps</u> to ensure that all water systems and features are safe to use after a prolonged facility shutdown.
- Provide time for workers to implement cleaning practices during their shift. Cleaning assignments should be assigned during working hours as part of the worker's job duties. Modify hours to ensure regular deep cleaning of office, laboratory, and other facility spaces. Stagger breaks if feasible to ensure physical distancing and the chance to clean restrooms frequently.
- When choosing disinfecting chemicals, employers should use products approved for use against COVID-19 on the Environmental Protection Agency (EPA)-approved list and follow product instructions. Use disinfectants labeled to be effective against emerging viral pathogens, diluted household bleach solutions (5 tablespoons per gallon of water), or alcohol solutions with at least 70% alcohol that are appropriate for the surface. Provide workers training on the chemical hazards, manufacturer's directions, ventilation requirements, and Cal/OSHA requirements for safe use. Workers using cleaners or disinfectants should wear gloves and other protective equipment as required by the product

instructions. Follow the <u>asthma-safer cleaning methods</u> recommended by the California Department of Public Health and ensure proper ventilation.

- Modify offerings in any on-site cafeterias or dining rooms, including using prepackaged foods, drink, condiment, and flatware dispensing options.
- Where possible, do not clean floors by sweeping or other methods that can disperse pathogens into the air. Use a vacuum with a HEPA filter wherever possible.
- Consider installing portable high-efficiency air cleaners, upgrading the building's air filters to the highest efficiency possible, and making other modifications to increase the quantity of outside air and ventilation in work and break areas.
- For those facilities in laboratory, research, or clinical settings, evaluate
 existing cleaning and disinfecting protocols and determine additional
 measures or necessary adjustments to prevent exposure to COVID-19.



Physical Distancing Guidelines

- Implement measures to ensure physical distancing of at least six feet between workers. These can include use of physical partitions or visual cues (e.g., floor markings or signs to indicate where workers should stand).
- Redesign office spaces, cubicles, laboratory rooms, etc., to ensure
 workspaces allow for at least six feet between workers. Decrease the
 capacity for conference and meeting rooms in order to maintain at least
 six feet of physical distance between workers. Designate separate
 entrance and exits and post signage to this effect.
- Utilize work practices, when feasible, to limit the number of workers at
 the office at one time. This may include scheduling (e.g., staggering
 start/end times), establishing alternating days for onsite reporting,
 returning to the office workspace in phases, or continued use of telework
 when feasible. Reassign lockers or limit/stagger locker use to increase
 distance between workers.
- Consider offering workers who request modified duties options that minimize their contact with customers and other worker (e.g., managing inventory or administrative needs through telework).
- Transition all meetings and interviews to phone or digital platforms. For meetings that must be in person, adjust meetings and use smaller meetings to ensure compliance with physical distancing guidelines

- In areas where physical distancing is difficult to maintain, workers should have increased symptom screenings including temperature, visual, and verbal checks.
- Discontinue nonessential travel and encourage distance meetings via phone and internet.
- Require workers to avoid handshakes and similar greetings that break physical distance guidelines.
- Place additional limitations on the number of workers in enclosed areas, to ensure at least six feet of separation to limit transmission of the virus.
- Stagger worker breaks, in compliance with wage and hour regulations, to maintain physical distancing protocols.
- Close breakrooms, use barriers, or increase distance between tables/chairs to separate workers and discourage congregating during breaks. Where possible, create outdoor break areas with shade covers and seating that ensures physical distancing.
- Use the following hierarchy to prevent transmission of COVID-19 in research, production, and other work areas especially where physical distancing is difficult to maintain: engineering controls, administrative controls, and PPE.
 - Engineering controls include creating physical or spatial barriers between workers such as Plexiglas or other sturdy and impermeable partitions.
 - Administrative controls include increasing the number of shifts to reduce the number of personnel present at one time and ensure adequate physical distancing.
 - PPE includes face shields, <u>some types of masks</u>, and impermeable gloves. Note that some disposable equipment, such as respirators, are prioritized for health care workers and workers that handle pathogens and should not otherwise be used.

¹Additional requirements must be considered for vulnerable populations. The life sciences industry must comply with all <u>Cal/OSHA</u> standards and be prepared to adhere to its guidance as well as guidance from the <u>Centers for Disease Control and Prevention (CDC)</u> and the <u>California Department of Public Health (CDPH)</u>. Additionally, employers should be prepared to alter their operations as those guidelines change.



