



**Eastern Atlantic States**

REGIONAL COUNCIL OF CARPENTERS



May 2020

# COVID-19 Awareness Training & Certification



## Eastern Atlantic States

REGIONAL COUNCIL OF CARPENTERS

- The Eastern Atlantic States Regional Council of Carpenters recognizes that our members and signatory contractors are always committed to ensuring the health and safety of their workplace.
- The EARCCC has prepared this online course to review the March 2020 guidance document from OSHA on **Preparing Workplaces for COVID-19**
- This online course is designed to educate our members on how to use the OSHA guidance, as well as other Job Site Protocols to take the appropriate steps to limit the spread of the Coronavirus



- The Building & Construction Trades Council of Philadelphia recognizes that our members and signatory contractors are always committed to ensuring the health and safety of their workplace.
- The BCTCPP supports this online course to review the March 2020 guidance document from OSHA on **Preparing Workplaces for COVID-19**
- This online course is designed to educate our members on how to use the OSHA guidance, as well as other Job Site Protocols to take the appropriate steps to limit the spread of the Coronavirus



- The Job Site Protocols are to be viewed as recommended best practices and are provided solely as suggested guidelines and resources for contractors' reference concerning COVID-19.
- The Protocols are not to be relied upon to prevent the spread or transmission of COVID-19 on any specific job site or to prevent a safety violation from being issued by a jurisdictional authority.
- All contractors must continue to comply with all relevant rules and regulations concerning workplace safety and health.  
**This is not legal advice.**

# Contractor Responsibilities

- Contractors should regularly evaluate their health and safety procedures, as well as the specific hazards at their job sites, consistent with the Centers for Disease Control and Prevention (CDC) recommendations to determine the appropriate job hazard analysis and safety procedures for the project/task as it relates to the spread and/or transmission of COVID-19.
- All contractors should incorporate COVID-19 transmission and prevention into all job hazard analyses (JHAs) and pre-task safety planning for all aspects of the work. In addition, all projects should require **social distancing, cloth facial coverings, hand washing on a regular basis, and no large group meetings.**
- These Protocols will be updated as we learn more about how to prevent and treat COVID-19.



# BUILT-RITE

- This course is a distance learning course and can be completed on your computer, tablet or cell phone at your own pace.
- A test is required at the end of the presentation.
- You must score and 75 or higher to pass.
- Since this is an informational training, you may utilize multiple attempts to reach the 75.
- Once you pass your test, BUILT-RITE will supply you with the **COVID-19 Preparedness Training Certificate**

# OSHA Guidance



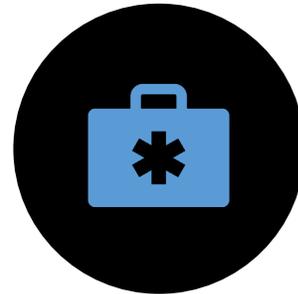
This guidance is not a standard or regulation, and it creates no new legal obligations.



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.

# OSHA Guidance

---



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; tele typewriter (TTY) number: 1-877-889-5627.

# 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

# Introduction

- 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).



**Eastern Atlantic States**

REGIONAL COUNCIL OF CARPENTERS



# Introduction

- 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.





## Introduction

- 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.

# Introduction

- 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.



This Photo by Unknown Author is licensed under [CC BY-SA-NC](#)

# Introduction

- 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:

<https://www.cdc.gov/coronavirus/2019-ncov/index.html>

- The OSHA COVID-19 webpage offers information specifically for workers and employers:

<https://www.osha.gov/SLTC/covid-19/>



# 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



# About COVID-19

## 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

# About COVID-19

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](http://www.cdc.gov/coronavirus/2019-ncov/about/transmission.html).

# How a COVID-19 Outbreak Could Affect Workplace ?

Like 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.

# How a COVID-19 Outbreak Could Affect Workplace?

**As a result, workplaces may experience 3 new challenges:**

## **1. 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.

# How a COVID-19 Outbreak Could Affect Workplace ?

## 2. 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.

## 3. Interrupted supply/delivery .

Shipments of items from geographic areas severely affected by COVID-19 may be delayed or cancelled with or without notification

# Steps All Employers Can Take to Reduce Workers Risks of Exposure to SARS-CoV-2

## Develop

- Develop an Infectious Disease Preparedness and Response Plan

## Prepare

- Prepare to Implement Basic Infection Prevention Measures

## Policy & Procedures

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

## Implement & Communicate

- Develop, Implement, and Communicate about Workplace Flexibilities and Protections

## Controls

- Implement Workplace Controls

## Follow

- Follow Existing OSHA Standards

# 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.

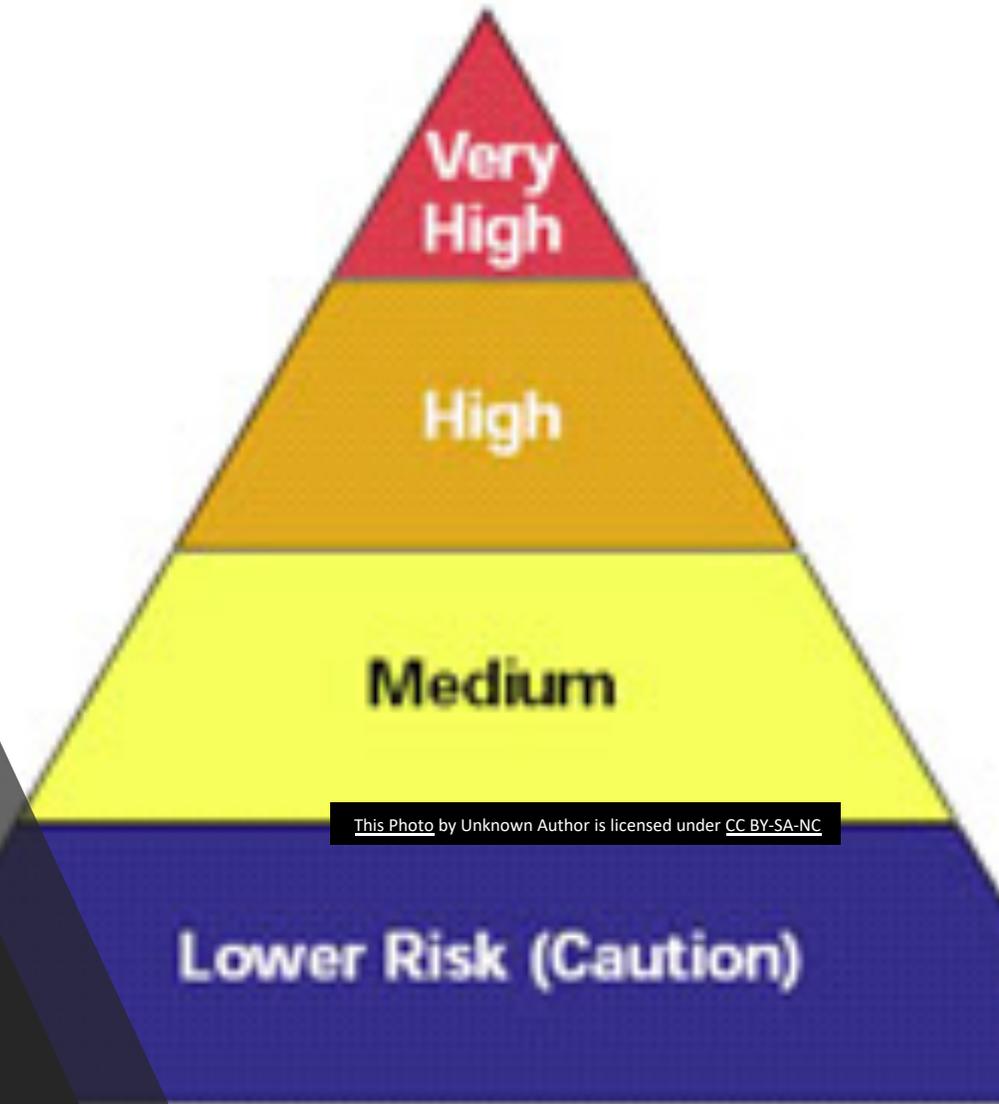


To help employers determine appropriate precautions, OSHA has divided job tasks into four risk exposure levels: very high, high, medium, and lower risk.

# Classifying Worker Exposure to SARS-CoV-2

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 levels.



# Classifying Worker Exposure to SARS-CoV-2

## 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:

1. Healthcare workers performing aerosol-generating procedures on known or suspected COVID-19 patients
2. Healthcare or laboratory personnel collecting or handling specimens from known or suspected COVID-19 patients
3. 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

# Classifying Worker Exposure to SARS-CoV-2

## 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: Workers in this category include:

1. Healthcare delivery and support staff who must enter patient rooms who are known or suspected COVID-19 patients
2. Medical transport workers from known or suspected COVID-19 patients
3. 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.

# Classifying Worker Exposure to SARS-CoV-2

## 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).

# Classifying Worker Exposure to SARS-CoV-2

## **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.

COVID-19

*Six  
Recommended  
Job Site  
Protocols*

- Contractors should regularly evaluate their health and safety procedures, as well as the specific hazards at their job sites, consistent with the [Centers for Disease Control and Prevention \(CDC\) recommendations](#) to determine the appropriate job hazard analysis and safety procedures for the project/task as it relates to the spread and/or transmission of COVID-19.
- All contractors should incorporate COVID-19 transmission and prevention into all job hazard analyses (JHAs) and pre-task safety planning for all aspects of the work. In addition, all projects should require **social distancing, cloth facial coverings, hand washing on a regular basis, and no large group meetings.**
- These Protocols will be updated as we learn more about how to prevent and treat COVID-19.

# Protocol #1 Worker Personal Responsibilities

Employees need to take steps to protect themselves. Refer to CDC guidelines on [How to Protect Yourself](#).

- If you are sick, do **NOT** report to work. It is critical that individuals **NOT** report to work while they are experiencing illness symptoms such as fever of 100.4 or higher (or local jurisdiction), cough, shortness of breath or difficulty breathing, dry cough, body aches, chills, or fatigue, or loss of sense of smell and/or taste. Refer to CDC guidelines on [What To Do If You Are Sick](#).

# Protocol #1

## Worker Personal Responsibilities

- Workers should **NOT** return to work until:
  - **If you have NOT had a test** to determine if you are still contagious, you can leave home after these three things have happened:
    - at least 10 days have passed since symptoms first appeared, **AND,**
    - at least 3 days (72 hours) have passed since recovery defined as resolution of fever without the use of fever-reducing medications, **AND,**
    - other symptoms have improved (for example, when your cough or shortness of breath have improved)
  - **If you have had a test** to determine if you are still contagious, you can leave home after these three things have happened:
    - You received two negative tests in a row, at least 24 hours apart, **AND,**
    - You no longer have a fever (without the use of medicine that reduces fevers), **AND,**
    - other symptoms have improved (for example, when your cough or shortness of breath have improved).

# Protocol #1 Worker Personal Responsibilities

- Individuals should seek medical attention if they develop these symptoms. Refer to CDC guidelines on [What To Do If You Are Sick](#).
- An individual contractor may require, in order to return to work after experiencing any of these symptoms, personnel must produce a doctor's note or negative COVID-19 test results. For non-COVID-19 related illness, workers should follow guidance of healthcare provider and may be required to produce a doctor's note.
- If you feel sick, uncomfortable, or unsafe, please stay home.

# Protocol #2 Social Distancing

- **Work in occupied areas should be limited to only those tasks that are strictly necessary.**
- Limit physical contact with others.
- Direct employees to increase personal space (to at least 6 feet, where possible).
- Limit in-person meetings and replace them with phone or online meetings.
- Take breaks and lunch in shifts to reduce the size of the group in the lunch area at any one time to less than 10 people, ultimately maintaining 6 feet distance between individuals.
- Subcontractor foremen and project managers should communicate with their general contractors about prohibiting large gatherings (currently no more than 10 people) on the job site, such as the all-hands meeting and all-hands lunches.



## Protocol #2 Social Distancing

# Protocol #2

## Social Distancing

To limit the number of people on a jobsite, allow non-essential personnel to work from home when possible.

Avoid trade stacking, evaluate work schedule and consider things like shift work, resequencing work, etc.

Discourage hand-shaking and other contact greetings.

Social distancing should be used in hoists/elevators. Social distancing signage should be placed in all areas, hoists, elevators, stairs, and meetings areas.

Individuals should be **encouraged to avoid hoists/elevators when walking up or down 5 flights of stairs** to limit contact with others.

Conduct an evaluation of the size of the hoist/elevator to maintain 6 feet when possible. Separate material and people when possible.

Other considerations may be put into place at the contractor's discretion.

# Protocol #3 General Jobsite/Office Practices

- Employers should reference the CDC's Interim Guidance for Businesses and Employers. Employers should check CDC recommendations frequently and update JHAs and safety plans accordingly.
- For work in the state of Pennsylvania refer to Governor Tom Wolf's Construction Industry Guidance from April 23, 2020.

# Protocol #3 General Jobsite/Office Practices

- For work in the City of Philadelphia refer to Mayor Jim Kenney's Construction Activity Executive Orders

# Protocol #3

## General Jobsite/Office Practices

- A single point of contact /*Pandemic Safety Officer* should be identified by the General Contractor/Construction Manager for the implementation of all COVID-19 guidance.
- This individual will be responsible for implementation of all Building Trades Council/GBCA/Eastern Atlantic States Regional Council of Carpenters COVID-19 Recommended Job Site Protocols.
- If an employee is well but someone in their immediate household is diagnosed with COVID-19, they should notify their supervisor. Refer to CDC guidance for How To Conduct a Risk Assessment.

# Protocol #3 General Jobsite/Office Practices

- If an employee is well but someone in their immediate household is diagnosed with COVID-19, they should notify their supervisor. Refer to CDC guidance for How To Conduct a Risk Assessment.
- **If an employee is confirmed, diagnosed, or suspected to have COVID-19, inform supervisor, refer to Recommended Response Protocols.**
- Attendance at meetings should be taken verbally and the foreman/superintendent can sign in each attendee.
- Contractors should not pass around a sign-in sheet or mobile device (iPad, tablet, or mobile phone) to confirm attendance.
- iPad and mobile device use should be limited to a single user

# Protocol #3

## General Jobsite/Office Practices

- Communicate key CDC recommendations (and post signage where appropriate) to your staff and tradespeople:
  - How to Protect Yourself
  - If You are Sick
  - COVID-19 Frequently Asked Questions
- Place posters that encourage staying home when sick, cough and sneeze etiquette, and hand hygiene other at the entrance to your workplace and in other workplace areas where they are likely to be seen.
- Workers will be required to answer questions related to COVID-19 related health conditions.
- Additionally, personnel may be temperature scanned daily prior to accessing a project by a trained and qualified individual in the safe use and interpretation of thermometers.
- Temperature scanning may continue for the foreseeable future.

# Protocol #3 General Jobsite/Office Practices

- Employers should consider designating a trained and qualified individual to take employees' temperatures with a digital, non-contact, medical grade thermometer, or equivalent.
- If a contact thermometer is needed, it must be properly disinfected between uses.
  - Training for this individual should include following the manufacturer's instructions for the thermometer.
  - Note that some people with COVID-19 may not have a fever, so this should not be the only means of detection.
  - GBCA has provided a JSA template for Pre-Site Screening and Temperature Taking.

# Protocol #3 General Jobsite/Office Practices

- Pre-Site Screening Recommendations
  - **Screening Question Process –**
    - Greet the person and state: *“As a precaution and in an effort to help prevent the spread of COVID-19 we are conducting a pre-site screening.”*
    - **Screener should ask the following questions to all employees prior to entering the jobsite.**
    - If they answer **“yes”** to any, they should be directed to the **site point of contact/Pandemic Safety Officer for guidance**. It is at an individual contractor’s discretion to ask additional screening questions.

# Protocol #3 General Jobsite/Office Practices

- Pre-Site Screening Recommendations

- Screening Question Process

- Have you been in close contact (less than six feet for more than 10 minutes without facial coverings) with a person that has shown signs/symptoms, or been diagnosed with COVID-19 within the past 14 days?
    - Have you or anyone in your household been instructed to quarantine or self-isolate due to COVID-19 within the past 14 days?
    - Are you having trouble breathing or have you had flu-like symptoms within the past 72 hours, including: fever, dry cough, shortness of breath, sore throat, body aches, chills, loss of taste or smell, or fatigue?
    - \*Reference Current CDC Symptoms. (Link to CDC symptoms <https://www.cdc.gov/coronavirus/2019-ncov/symptoms-testing/symptoms.html>)

# Protocol #3

## General Jobsite/Office Practices

### Temperature Scanning

- If required by site and if “no” to all questions: Step in and extend arm to get reading, then step away to show the results.
- If over 100.4, they cannot enter the site. Refer to them to your site point of contact/Pandemic Safety Officer.
- Temperature scanner should follow host/owner rules.
- Follow thermometer instructions and recognize precision of reading range.

**A person’s temperature is considered to be private health information – do NOT record the temperature in association with the person’s name.**

- Do not share the temperature unless given permission by that employee.
- If host requires temperature records, it should be done anonymously, or the employer must handle the information as CONFIDENTIAL as per EEOC rules relating to coronavirus.

# Protocol #3 General Jobsite/Office Practices

**Anyone asked to leave should NOT return to work until:**

- at least 10 days have passed since symptoms first appeared, **AND,**
- at least 3 days (72 hours) have passed since recovery defined as resolution of fever without the use of fever-reducing medications, **AND,**
- other symptoms have improved (for example, when your cough or shortness of breath have improved).

An individual contractor may require, in order to return to work after experiencing any of these symptoms or, being sent away for not passing pre-site screening, that personnel produce a doctor's note or a negative COVID-19 test results.

# Protocol #3 General Jobsite/Office Practices

For non-COVID-19 related illness, workers may return to work sooner upon guidance of healthcare provider and may be required to produce a doctor's note.

- Do not congregate in lunch areas and wipe all common areas with appropriate disinfectant.
- Do not share tools. When sharing is necessary, wipe down with proper disinfectant first.

# Protocol #4 Sanitation & Cleanliness

- Promote **frequent and thorough hand washing with soap and running water** for at least **20 seconds**.
- Hand washing stations are recommended to help prevent the spread of COVID-19.
- Employers should also provide hand sanitizer when hand washing facilities are not available. Refer to CDC guideline for When and How to Wash Your Hands. Hand washing stations or hand sanitizer should be provided at all access points, hoists, elevators, restrooms, etc.
  - All workers should wash hands often, especially before eating, smoking, or drinking, and after blowing your nose, coughing, or sneezing. Workers should refrain from touching their face.
  - All sites should have hand washing stations readily available to all workers on site. If you have a large site, get a hand washing station from your portable job site toilet provider.
- Providing hand sanitizer is acceptable in the interim between availability of hand washing facilities

# Protocol #4 Sanitation & Cleanliness

- Disinfect frequently touched surfaces within the workplace multiple times each day. Refer to CDC guideline for Clean & Disinfect.
  - **Disinfectant wipes** should be available and used to wipe down any surfaces (doorknobs, keyboards, remote controls, desks) that are commonly touched periodically each day.
  - **Portable job site toilets** should be properly cleaned by leasing company at least twice per week, when possible.
  - Double check that hand sanitizer dispensers are filled. Frequently touched items (i.e., door pulls and toilet seats) should be cleaned frequently.
  - Job site offices/trailers and break/lunchrooms frequently touched surfaces should be cleaned at least twice per day.
  - Employees performing cleaning will be issue proper PPE, such as nitrile gloves and eye or face protection as needed.
  - Maintain Safety Data Sheets (SDS) of all disinfectants on site.
  - Follow the CDC guidelines on use and types of disinfectants.

# Protocol #4 Sanitation & Cleanliness

- Employers should **encourage employees to cover their noses and mouths** with a tissue (or elbow or shoulder if a tissue is not available) when coughing or sneezing.
- Wash your hands after each time you cough, sneeze, or blow your nose, and any time before touching your face or food. Refer to CDC guideline for [Coughing & Sneezing](#).
- Do not use a common water cooler. Provide individual water bottles or instruct workers to bring their own.
- Instruct workers to consider changing potentially contaminated work clothes prior to arriving home; and to wash clothes in hot water with soap.
- Utilize disposable hand towels and no-touch trash receptacles.
- Avoid cleaning techniques, such as using pressurized air or water sprays that may result in the generation of bioaerosols.

# PPE Helpful Jobsite Resources for Sanitation & Cleanliness

## FALL PROTECTION EQUIPMENT-

- [MSA Fall Protection Cleaning Guidance](#)
- [PSG Equipment Cleaning Guide](#)

## HEAD & EYE PROTECTION

- [MSA Cleaning Guide](#)

## RESPIRATORS

- [MSA Respiratory Protection Equipment](#)

## NYC Department of Building (DOB)

- [Prevention and Remediation of Contamination of Germs on Construction Sites](#)

# Protocol #5 Personal Protective Equipment (PPE)

- **Gloves:** Gloves are recognized as a means of possibly preventing contact spread.
  - The type of glove worn should be appropriate to the task. If gloves are not typically required for the task, then any type of glove is acceptable.
- **Eye protection:** Eye protection may be a means of preventing exposure and should be worn at all times.
- **The CDC recommends wearing cloth face coverings in public settings where social distancing measures are difficult to maintain.**
  - Contractors should continue to provide and direct employees to wear face masks if required by the work.
  - For tasks performed within 6 feet of another person, should consider additional respiratory protection.
  - Please consult a professional for respiratory protection guidance.
  - Perform a job hazard analysis.

# Protocol #5

## Personal Protective Equipment (PPE)

01

Do not share personal protection equipment (PPE).

02

Sanitize reusable PPE per manufacturer's recommendation prior to each use.

03

If tasks require workers be within 6 feet, additional PPE is advised.

- **Examples include:**
  - any kind of face covering and a face shield, **OR**
  - a N95 (or greater) and eye protection

# Protocol #5 Personal Protective Equipment (PPE)

## **Note:**

### **Cloth face covering:**

- Textile (cloth) covers are intended to keep the person wearing one from spreading respiratory secretions when talking, sneezing, or coughing.
- They are not PPE and it is uncertain whether cloth face coverings protect the wearer. CDC has guidance available on design, use, and maintenance of cloth face coverings.

### **Facemask:**

- Facemasks are PPE and are often referred to as surgical masks or procedure masks.
- Use facemasks according to product labeling and local, state, and federal requirements.
- FDA-cleared surgical masks are designed to protect against splashes and sprays and are prioritized for use when such exposures are anticipated, including surgical procedures.
- Facemasks that are not regulated by FDA, such as some procedure masks, which are typically used for isolation purposes, may not provide protection against splashes and sprays.

# Protocol #5 Personal Protective Equipment (PPE)

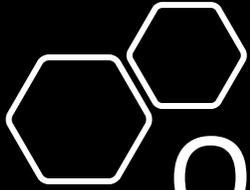
## **Respirator:**

- A respirator is a personal protective device that is worn on the face, covers at least the nose and mouth, and is used to reduce the wearer's risk of inhaling hazardous airborne particles (including dust particles and infectious agents), gases, or vapors.
- Respirators are certified by the CDC/NIOSH, including those intended for use in healthcare.

# Protocol #6

## Job Site Visitors

- Restrict the number of visitors to the job site, including the trailer or office.
- All visitors, deliveries and delivery personnel are subject to the same criteria and guidelines as regular onsite personnel to access the jobsite: including social distancing, cloth face coverings, hand washing, temperature scanning when applicable, and pre-site screening.
- Using the same questions as field personnel recognized above under Protocol #3 General Jobsite/Office Practices



# Other Useful Resources

## GBCA, EASRCC & BTC

- [Job Site Protocols](#)

## CDC

- [Coronavirus \(COVID-19\)](#)
- [Interim Guidance for Businesses and Employers](#)

## OSHA

- [OSHA Guidance on Preparing Workplaces for COVID-19](#)
- [OSHA COVID-19 FACT SHEET](#)

## WHO

- [Rolling Updates on Coronavirus disease \(COVID-19\)](#)

## AGC of America

- [Proactive Measures for Addressing COVID-19](#)
- [OSHA Issues Guidance to Help Construction Workers](#)

## NIOSH

- [Coronavirus Disease-2019](#)