

### **Fairfax County**

### COVID-19 Infectious Disease Preparedness and Response Plan

October 2021

Version 4 October 2021 The Infectious Disease Preparedness and Response Plan provides a guide for all county staff on how the Commonwealth's mandatory COVID-19 health and safety requirements will be met from prevention, and control measures (cleaning, wearing face coverings) and health screenings to exposure notification and return-to-work conditions. The requirements are designed to help ensure the safety of all county employees and the plan is an invaluable resource toward that end. Please take the time to become familiar with it, including your responsibilities. Knowledge is power.

Thank you to all the individuals and agencies involved in the development of this plan. Now it is up to each of us to know it and to put it into action. We can rise to the challenges we face, and overcome them, by planning, preparing, and working together.

As we shape the future together, be safe.

All the best,

8 Hue

Bryan Hill County Executive



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### Foreword:

The Fairfax County Infectious Disease Preparedness and Response Plan (IDPRP) is a living document.

A living document means that the terms of the IDPRP are subject to change at any time, and any mandates or guidance that is more stringent than the Virginia Occupational Safety and Health Program (VOSH) Standard from the County Executive (CEX) or the Centers for Disease Control and Prevention (CDC) may or will supersede any of the conditions listed within the plan. Please note that not every change in guidance or recommendation will require a full revision of this plan. If new guidance, recommendations, or standard is issued by the CDC or the CEX and is more stringent than those contained in the VOSH COVID-19 Standard and the IDPRP, that new, more stringent guidance shall be followed. Any new guidance will be placed into the IDPRP in this foreword section.

A person's risk for SARS-CoV-2 infection is directly related to the risk for exposure to infectious persons, which is largely determined by the extent of SARS-CoV-2 circulation in the surrounding community. The CDC classifies transmission rates as low, moderate, substantial, or high:

Low community transmission level means there has been fewer than 10 new positive cases per 100,000 in the last seven days.

Moderate community transmission level means there has been 10 to 50 new positive cases per 100,000 in the last seven days.

Substantial community transmission level means there has been 50 to 100 new positive cases per 100,000 in the last seven days.

High community transmission level means there has been more than 100 new positive cases per 100,000 in the last seven days.

### CDC core indicators of and thresholds for community transmission levels of SARS-CoV-2:

Indicator Level	Low	Moder	rate	Substa	antial	High
New COVID-19 cases per 100,000 persons in the last 7 days	< 10	10 – 49.99		50 – 99.99		≥100.
Percentage of positive SARS-CoV-2 diagnostic nucleic acid amplification tests in the last 7 days	<5%	5 – 7.99%		8 – 9.99%		≥10%

In order to determine the community transmission level please check the Coronavirus Information Page.

Fairfax County will not make immediate adjustments to the requirements of the IDPRP based on the community transmission level moving to a lower category. A maintained period of 28 days at a lower transmission level must occur before the county will update the Coronavirus Resource page to reflect the transmission level change to a lower category.

Fairfax County will make immediate adjustments should the transmission level move to a higher category to ensure protection levels are being met according to the VOSH Standard. Any countywide changes made to practices and mandates will be communicated to all staff via NewsLink, HR managers meetings, and through all available channels. Until notified of any changes, staff shall continue to follow all currently adopted practices.

#### I. Purpose

This plan describes the implementation of mandatory health and safety requirements surrounding COVID-19 established by the Virginia Department of Labor and Industry (DOLI) for **VOSH Standard (VS) for Infectious Disease Prevention of COVID-19**. All information related to COVID-19 is informed by guidelines from the Virginia Department of Health (VDH) and Centers for Disease Control and Prevention (CDC).

#### **II. Responsibilities**

Fairfax County Government is in a unique position as it is both a large employer and the seat of the local public health authority, the Fairfax County Health Department (FCHD). As a result, Fairfax County Government has assigned the following FCHD public health physician to serve in the role of health officer. The health officer is responsible for overseeing case and contact investigations within the Fairfax County workforce and has the authority to stop or alter activities to ensure that all work practices conform to the mandatory safety and health requirements applicable to COVID-19 as well as any other infectious disease hazards.

Dr. Gloria Addo-Ayensu, MD, MPH Director of Health

For the purpose of ensuring compliance with the most recent safety and health requirements, Agency Heads or their designee(s) are responsible for administering this plan, implementing guidance or direction from Risk Management Division (RMD) and FCHD, communicating any changes to employees, and monitoring the overall effectiveness of the plan within their Department and enforcing compliance when needed. Agency Heads or their designees are also responsible for providing employees with a copy of the plan upon request or making it available for self-access through FairfaxNET.

The responsibility for ensuring the plan conforms to the most recent standards, as defined by DOLI, the Virginia Occupational Safety and Health Program (VOSH), or the Occupational Safety and Health Administration (OSHA) will remain with RMD. Necessary updates to protocols, practices or information contained in the plan that are derived from public health guidance – such as guidance from VOSH, OSHA, the CDC, VDH, or FCHD – will remain the purview of FCHD.

#### III. Workplace Hazard Assessment

As defined in the VOSH Standard for Infectious Disease Prevention: SARS-CoV-2 Virus that Causes COVID-19, 16 VAC25-220, and in the Federal OSHA Emergency Temporary Standard Guidance for All Industries, Fairfax County is considered to be a higher risk workplace. This determination is based on the definitions of a higher risk workplace from OSHA and the diversity of job descriptions and functions within the County. For more information on higher risk worksites please see:

OSHA Guidance for All Industries Updated (8/13)

Agencies shall assess their workplace for those hazards and job tasks of employees that can or have the potential exposure to COVID-19. If the agency has completed the

hazard assessment based on the position description of current employees, assessments must be updated as job tasks change, new tasks are introduced, or new hazards are found in the workplace. If the agency fills a vacant position or creates a new position, then a hazard assessment shall be completed based on those risk factors. Agencies shall make employees aware of any change in policy or procedure as it applies to face coverings or PPE use in the workplace.

If at any point an employee's job tasks or roles change the Agency shall reassess that employee's work tasks and address any PPE needs. Any new assignment of PPE must meet any of the OSHA/VOSH training and program requirements.

All assessments currently being stored on SharePoint can remain as historical data and reference or be archived on the system, so long as they remain searchable/printable by the agency. These will still need to be available if there is a VOSH inspection.

The new hazard assessment will be very similar but will remove the employee score and the exposure risk levels and scores associated with them. The new assessment will be an overall view of the risks associated with the position description. Agencies will have to determine what exposure risks the employees will face and provide the Engineering, Administrative and Work Practice controls to eliminate/control the hazard.

Determining the COVID-19 potential exposure risk of all worksite functions is critical to ensure appropriate hazard controls – including training, equipment, and personal protective equipment (PPE) to protect employees' safety and health are implemented.

Agencies who utilize PPE and Respiratory protection as identified in the Workplace Hazard Assessments shall follow all applicable OSHA/VOSH Standards. This includes any required written plans, medical evaluations, fit testing, and training requirements found within those standards.

Agencies shall develop contingency plans for PPE in the event the supply of these items is limited or not available. Those contingency plans shall address extended usage, given that extended use of the PPE does not pose any increased risk of exposure. Agencies must determine whether specified PPE can or cannot be used for an extended period, based on manufacturer recommendations and limitations. The training for extended PPE usage shall include the conditions of extended PPE use, i.e., what situations constitute grounds for extended use – such as supply limitations, inspection criteria for the PPE, and safe storage requirements for PPE being used for an extended period.

Job Hazard Assessments shall be stored, maintained, and revised as necessary in the SharePoint site.

### **IV. Basic Infectious Disease Prevention and Control Measures**

#### **County Facility Cleaning**

To control the spread of infectious diseases such as COVID-19, basic prevention and control measures must be implemented to ensure that all employees are protected against the hazards of infectious disease.

Additional sanitizing actions have been implemented to ensure the safety and health of employees and decrease the chances of spread of an infectious disease. All restrooms, common areas that remain in use, doorknobs/handles, tools, equipment, and other frequently touched surfaces shall be cleaned at least once during or at the end of each shift. If the Agency utilizes multiple shifts, then those spaces shall be cleaned at least every 12 hours, except in healthcare settings where other regulations or practices may be in place.

If there have been no suspected or confirmed COVID-19 persons who have been in the facility, then cleaning shall be once per day.

The Facilities Management Department (FMD) is working closely with county custodial contractors and have modified their contracts to include adjusted cleaning processes to help eliminate the spread of COVID-19. All custodial contractors are using the germicidal cleaning agent Lemon-Quat, which is EPA-approved and 100% effective against microorganisms that cause viral and bacterial infections, including COVID-19. Custodial contractors have been instructed to pay extra attention to sanitizing public areas, especially frequently touched surfaces such as door handles, stairway railings, elevator buttons, reception desks, push plates, etc. County buildings utilize outdoor air supplied rooftop units and commercial exhaust fans that, in combination, "refresh" building air over regular intervals. Building ventilation systems are maintained per standard protocols for optimal indoor quality and HVAC filters are replaced every 3 months.

Custodial contractors are also required to submit a log supporting their cleaning responsibilities.

All disinfectants are EPA-approved or otherwise comply with <u>CDC disinfection</u> <u>guidance</u>. FMD utilizes a combination of Department of Purchasing and Material Management (DPMM) single source provided disinfectants and custodial contractor provided disinfectants. Contractors are directed to use EPA approved products, specifically Lemon-Quat.

Additional measures FMD has implemented for staff and public safety include:

- Signage in restrooms reminding people about appropriate hygiene practices.
- Signage in elevator lobbies reminding passengers to maintain social distancing.
- Sneeze guards at customer service desks in county facilities.

### Agency and Employee Cleaning Requirements

Agencies shall develop procedures for the transference of tools equipment or vehicles from one employee to another. Agencies shall make employees aware of those procedures and ensure the cleaning is taking place, and Employees are responsible for cleaning tools when transferring from one unvaccinated employee to another employee, regardless of that employee's vaccination status. This is not required if the employees that are transferring the tools are all vaccinated.

Cleaning products shall be available for use throughout the day to clean surfaces and items. These cleaning products must be on the EPA's COVID-19 approved products list.

Agencies shall follow all applicable safety and health requirements as provided in the Safety Data Sheet for any cleaning products being used. Agencies must also follow requirements listed in the OSHA Hazard Communication Standard 1910.1200.

Employees shall have access to soap and water, and hand sanitizer where feasible, for the duration of work. Employees assigned to a workstation where job tasks require frequent interaction inside six feet with other persons shall be provided with hand sanitizer at the employee's workstation whenever feasible.

Mobile work crews shall have access to hand sanitizer or have the ability for transportation to take them to a suitable toilet and handwashing area or location. Hand sanitizers are flammable, and care should be used when storing them in vehicles in hot environments.

### Notification to FMD for Cleaning After Positive Case Identification

If an agency head or designee is aware of an agency employee with a positive COVID-19 test who was at work in the two days prior to symptom onset, it will be the responsibility of the agency to submit a work order for cleaning as soon as the notification of positive test result is received. Facilities, where individuals have tested positive for the SARS-CoV-2 virus and have submitted a work order to FMD building services staff via phone or email, will be disinfected. FMD directs a deep cleaning and disinfecting of the areas where the individual(s) were stationed and visited within the building including bathrooms, conference rooms, break areas, etc. Those areas in the facility where suspected or confirmed COVID-19 employees accessed or worked shall be cleaned prior to allowing access to those areas as follows:

- The provisions of this subsection do not apply to healthcare settings or for operators of facilities such as food and agricultural production or processing workplace settings, manufacturing workplace settings, or food preparation and food service areas where specific regulations or practices for cleaning and disinfection may apply.
- If less than 24 hours have passed since the person who is sick or diagnosed with COVID-19 has been in the space, clean and disinfect the space.
- If more than 24 hours have passed since the person who is sick or diagnosed with COVID-19 has been in the space, cleaning is enough. Agencies may elect to disinfect depending on certain conditions or everyday practices required by the facility.
- If more than 3 days have passed since the person who is sick or diagnosed with COVID-19 has been in the space, no additional cleaning or disinfecting beyond regular cleaning practices is needed.

Individual agencies will ensure that relevant staff are aware of updated FMD protocols and practices as they relate to cleaning in county-owned and operated facilities. For COVID-related cleanings in leased facilities, individual agencies should consult with their facility coordinators to determine whether leasing management or FMD should be contacted about the need for a deep cleaning. The cleaning practices in leased facilities should meet, at a minimum, the standards and protocols instituted by FMD for county-owned facilities. The cost of all COVID-related cleanings, whether the agency is in county-owned or leased space, will remain the responsibility of the individual agencies.<sup>1</sup>

Agencies shall follow any VOSH sanitation and OSHA hazard communications standards applicable to their industry and the Safety Data Sheets for all chemicals used.

### **County Vehicle Cleaning**

Fairfax County Government is abiding by the guidance provided by the CDC on cleaning and disinfection for non-emergency transport vehicles. Motor Pool fleet vehicles located at the Government Center are cleaned after each use by a Department of Vehicle Services (DVS) Technician. This occurs in unique situations where staff have a mission critical need for a motor pool unit. Additionally, fleet vehicles being serviced by DVS are cleaned, after service is provided and before pick-up by the user agency.

Detailed instructions and products are available for agency vehicle coordinators upon request. Agencies are provided with a DVS designated point of contact for questions and concerns as well as information on how to request a cleaning kit. Detailed instructions and Safety Data Sheets (SDS) for the cleaners ACS Lemon Disinfectant and PermaSafe can be found in Appendix G. Additional Resources.

Agencies must ensure that agency vehicle coordinators and staff stay updated and comply with current DVS COVID-related protocols and practices.

### V. Vehicle Sharing

- Agencies shall assess which of their employees will likely share a vehicle with others. Agencies shall provide unvaccinated employees with a filtering face-piece respirator (FFR), such as an N-95, and a copy of 1910.134 Appendix H, Fairfax County Government Voluntary Respirator Use in the Workplace document. For employees who voluntarily use filtering face piece respirators in this capacity, fit testing is not required. If the supply of FFRs filtering face-piece respirators N-95 masks is not sufficient for mass distribution, then employees will be provided with a face covering. As noted above at the option of the employee they may choose to wear a face covering in lieu of the FFR such as an N-95. This sheet will be kept with the employee's hazard assessment in their employee file.
- When an employee is occupying a vehicle or other form of transportation with one or more employees or other persons for work purposes, employers shall use the hierarchy of hazard controls to mitigate the hazards associated with SARS-CoV-2 and COVID-19 to prevent employee exposures in the following order (NOTE: This subsection does not apply to fully vaccinated employees in areas of low to moderate community transmission.):

<sup>&</sup>lt;sup>1</sup> Any agency that utilizes other cleaning services must ensure that the cleaning standards, protocols, and cleaning products meet or exceed the VOSH Standard and follow the EPA document for approved cleaning products.

- Eliminate the need for employees to share work vehicles or other transportation and arrange for alternative means for additional employees to travel to work sites.
- Provide access to fresh air ventilation (e.g., windows). Do not recirculate cabin air.
- When physical distancing cannot be maintained, establish procedures to maximize separation between employees as well as other persons during travel (e.g., setting occupancy limits, sitting in alternate seats, etc.).
- When an employee who is not fully vaccinated must share a work vehicle or other transportation with one or more employees or other persons because no other alternatives are available, the Agency shall provide such employees with respiratory protection, a filtering face-piece respirator such as an N-95, or a face covering at the option of the employee. If, at the option of the employee they decline to use the filtering face-piece respirator (FFR), the Agency may keep that FFR as stock for other employees. If the employee declines the FFR for voluntary use, the agency shall document this declination using the form found in Appendix H, Fairfax County Government Voluntary Respirator Use in The Workplace document.
- If an employee accepts the FFR for voluntary use, the employee must follow all manufacturers guidance on the cleaning, maintenance, storage, and useful life of that FFR. Once issued, that FFR becomes the property of that employee.
- Employees shall not be required to share PPE with other employees.
- When an employee who is **fully vaccinated** must share a work vehicle or other transportation with one or more employees or other persons in areas of substantial or high community transmission because no alternatives are available, such employees shall be provided with and wear a face covering. See section III for information regarding complying during a PPE shortage.

### VI. Contingency Plan in the Event of an Infectious Disease Outbreak

Fairfax County Government has multiple plans that address workplace and emergency planning needs as well as the health and safety of employees. These plans are as follows:

- Fairfax County Emergency Operations Plan (EOP)<sup>2</sup>
- Fairfax County Pre-Disaster Recovery Plan (PDRP)<sup>3</sup>
- Fairfax County Agency and Department Continuity of Operations Plans

https://www.fairfaxcounty.gov/emergencymanagement/emergency-plans

<sup>&</sup>lt;sup>2</sup> The County's EOP is a multiple discipline, all hazards plan that establishes a framework for the management of emergencies and disasters within Fairfax County:

<sup>&</sup>lt;sup>3</sup> The PDRP is a multiple discipline, all hazards plan that establishes a framework for managing recovery from a major disaster: <u>https://www.fairfaxcounty.gov/emergencymanagement/emergency-plans</u>

- Fairfax County Telework Policy
- Fairfax County Health Department Emergency Operations Plan
- Fairfax County Fire and Rescue Exposure Control Plan
- Fairfax County Police Department Exposure Control Plan
- Fairfax County Sheriff's Department Exposure Control Plan
- Agency Specific Exposure Control Plans
- Fairfax County Vaccination Policy

Note: specific worksites may have additional plans not listed above that describe infection prevention practices or employee health programs.

### VII. Additional Infectious Disease Prevention and Control Measures Being Taken

### **Fairfax County Vaccination Policy**

The Fairfax County Vaccination Policy extends to all employees, present and prospective, unless otherwise provided in the policy document. Any violation of this policy, (to include but not limited to: falsification of vaccination status or attestation information, refusal to comply with weekly testing if deemed necessary), will result in the employee being subject to potential disciplinary action up to and including dismissal. Employees were required to submit in the Employee Vaccination Verification portal either their proof of vaccination, or their medical or religious exemption request forms, no later than October 11, 2021. Any employee who is not fully vaccinated against COVID-19 or has an approved medical or religious exemption from the vaccination requirement, will be subject to weekly testing for COVID-19 starting the week of October 11, 2021.

### **Daily Screenings**

As noted in 16VAC25-220-60 (C)(1) Higher Risk Workplaces, all county employees are required to complete a daily screening before the start of their workday. This screening is required of all employees conducting official county business, regardless of physical work location. If employees are scheduled to telework, they should select "agree" or "disagree" then select "telework". If that employee is teleworking, and gets called into a worksite, they are to complete the Employee Daily Health Check again marking "I agree", and "onsite". Agency heads are responsible for ensuring all staff comply with the requirement for a daily screening and are responsible for ensuring process that regularly monitors for employee compliance within their agency.

To facilitate this process, the Fairfax County Department of Information Technology (DIT) has created the Employee Daily Health Check a web-based system that allows for daily, self-attestation from employees. Self-attestation will address that employees do not have symptoms consistent with COVID-19, are not at risk for COVID-19 infection, and are committed to complying with prevention protocols, such as social distancing. Screening questions are standardized countywide, and hard copies are made available, on request or downloaded on FairfaxNET.

The DIT format for both electronic and non-electronic reporting is the official county format and shall not be altered by any county agency. Agency heads will be responsible for ensuring established processes are followed for employees unable to conduct the screening by an electronic means on a daily basis. Questions about process and approach, including whether process is sufficient to meet county and state standard, should be directed to RMD.

If the employee's response to daily screenings indicates symptoms or risk of COVID-19 disease, the employee shall stay home for the day. If the employee has reported to the worksite they shall be sent home immediately. When an employee has symptoms consistent with COVID-19, the employee should be directed to seek medical guidance; in the absence of other diagnosis, individuals should be urged to seek out testing for COVID-19 and remain at home until results are available. The employee will follow the guidance from their agency regarding time coding and telework policy in such circumstances.

The public health department for the jurisdiction in which the employee lives will provide monitoring and guidance for individuals who ultimately test positive for COVID-19. Agency heads will be responsible for ensuring a process to document when an employee is sent home, based off the questionnaire.

Symptomatic employees who refuse to be tested shall be directed to stay home until 10 days have passed since symptoms first appeared and 24 hours have passed without a fever, without fever-reducing medication. Individual agencies can advise on policy to telework or take leave (paid or unpaid) in such a situation. Employee refusal to comply with daily screening requirements may result in disciplinary action consistent with existing Fairfax County protocols and procedures. Signs will be posted at the access points to all Fairfax County buildings that state, "Employees, if you have the following signs or symptoms of COVID-19 you must not enter the building and return home and notify your supervisor." A similar sign shall be posted for patrons that states they will not enter the site.

Employees who develop symptoms during their shift must immediately notify their supervisor and/or Human Resources and return home to self-isolate and contact their healthcare provider. Employees that develop symptoms during their workday/shift will not stay on site to complete the day/shift, they shall leave immediately after notification as stated above.

County employees are required to complete the Acknowledgment of COVID-19 Health and Safety Practices<sup>4</sup>.

### Face covering use in all county facilities:

<sup>&</sup>lt;sup>4</sup> This county document provides guidance for expected health and safety practices while at work to help limit the spread of COVID-19.

- All county employees and visitors to county facilities are required, and are advised by posted signage, to wear a minimum two or more-layer washable fabric or disposable face covering that meets or exceeds guidance issued by the CDC. Employees are expected to wear face coverings in all common areas of their workplace (workstations, suites, hallways, kitchens, restrooms, etc.) and follow guidelines as outlined in the IDPRP, VOSH Standard (VS), VOSH FAQ page, and CDC Guidelines. Unvaccinated employees must continue to maintain 6 feet of physical distance while in common areas of the facility.
- The VOSH standard and FAQ page lists exceptions to wearing a face covering to include when eating or drinking at your desk. This exception only applies when you are eating on your designated break/lunch/dinner (shift work) time. Continual eating or drinking at your desk does not remove the requirement for wearing a face covering.
- **Vaccinated** employees are not required to maintain 6' of social distance while wearing a face covering when with other **vaccinated** employees.
- Employees will wear face coverings when working outdoors except in areas where 6' of social distancing can be maintained or as indicated by current CDC guidance.
- Agencies will follow DHR policy for disciplinary action for non-compliance among Employees.
- Employee non-compliance shall be documented and followed by the retraining of those employees on the VOSH Standard, and the County Infectious Disease Preparedness and Response Plan (IDPRP). Retraining will require the employee to take the full web-based training, this includes vaccinated employees who had previously completed the acknowledgement.
- Unvaccinated employees are required to maintain physical distance when reporting to work, clocking in, leaving work, and clocking out.
- Unvaccinated, otherwise at-risk employees are encouraged to maintain physical distance even when on break, as well as before and after working hours.
  - When transmission rates are substantial or high, this will apply to all employees regardless of vaccination status.
- Agencies will make arrangements in their work area so that Employee workstations are spaced so that they are greater than six feet apart (agency facility coordinators or safety analysts/officers ensure that all workstations/conference rooms/break rooms meet the standard).
- Meeting rooms shall have county signage posted outside of the room that states the capacity available to maintain six feet social distancing of unvaccinated employees. Unvaccinated employees in conference rooms shall wear face coverings during these meetings and maintain social distancing.
  - When transmission rates are substantial or high, this will apply to all employees regardless of vaccination status.
- Agencies may provide areas for employees to eat and drink in their facility or suite that provide more than 6' of distance between those employees if 6' of distance cannot be maintained at their desk or workstation.

- Maintaining social distancing in elevators is advised through county signage.
- The agency may utilize flexible work hours and telework, as indicated in the Fairfax County Telework Policy, to limit the number of employees simultaneously working on-site (as outlined in the Fairfax County Telework Policy).
- Employee interactions with the general public are modified to allow for additional physical space between parties. This applies to the interaction with the general public as well as co-workers.

The revised VOSH Standard and the IDPRP contain certain provisions that are based on current transmission rates. If community transmission levels in Fairfax County are low or moderate, then most of the standards contained within the IDPRP only apply to those employees who are not vaccinated. If transmission levels are Substantial or High, then the standards apply to all employees regardless of vaccination status.

Community transmission levels are found on the Fairfax County Coronavirus Information Page.

Low community transmission level means there has been fewer than 10 new positive cases per 100,000 in the last seven days.

Moderate community transmission level means there has been 10 to 50 new positive cases per 100,000 in the last seven days.

Substantial community transmission level means there has been 50 to 100 new positive cases per 100,000 in the last seven days.

High community transmission level means there has been more than 100 new positive cases per 100,000 in the last seven days.

Fairfax County will not make immediate adjustments to the requirements of the IDPRP based on the community transmission level moving to a lower category. A maintained period of 28 days at a lower transmission level must occur before the county will update the Coronavirus Resource page to reflect the transmission level change to a lower category.

Fairfax County will make immediate adjustments should the transmission level move to a higher category to ensure protection levels are being met according to the VOSH Standard. Any countywide changes made to practices and mandates will be communicated to all staff via NewsLink, HR managers meetings, and through all available channels. Until notified of any changes, staff shall continue to follow all currently adopted practices.

	C	ommunity Transmissio	n Level/Face Covering Requi	red
	Low	Moderate	Substantial	High
Vaccinated	No	No	Yes	Yes
*Unvaccinated	Yes	Yes	Yes	Yes

Vaccinated Employees are required to wear a face covering in county buildings when community transmission levels are substantial to high. Exceptions to this requirement are noted on the VOSH FAQ page.

\*Unvaccinated employees shall wear a face covering at all times in county facilities. Exceptions to this requirement are noted on the VOSH FAQ page.

	Con	nmunity Transn	nission Level/Face Coverings Others	Required in Vehicles with
	Low	Moderate	Substantial	High
Vaccinated	No	No	Yes	Yes
*Unvaccinated	Yes	Yes	Yes (Face covering or FFR)	Yes (Face covering or FFR)
			es will be provided with the option at their option. Employees who	

to sign the Fairfax County Voluntary Respirator Use in the Workplace form.

### VIII. Procedures for Minimizing Exposures from Outside of the Workplace

Fairfax County business practices have been evaluated to ensure the safety and health of all individuals, and changes have been made to minimize exposure from outside of the workplace. The following steps have been taken to minimize exposure from outside the workplace:

- 6-foot distances are marked in areas where customers might gather/wait. The Office of Public Affairs (OPA) developed and distributed signage as well as provided signage from the CDC. All locations within the county where customers might gather and/or wait have been outfitted with the appropriate signage designating and stressing 6-foot distancing.
- Employees should not bring guests or other family members into county facilities (except for instances of Childcare, such as day care programs, after school programs, SACC, etc.)
- Information is posted throughout worksites educating individuals on ways to reduce the spread of COVID-19. Infographic signage is posted throughout county facilities at all entrances, lobbies, general meeting areas, conference rooms, restrooms, kitchens, shared common areas, suite entrances, etc. OPA developed and distributed signage via FairfaxNET as well as provided signage from the CDC. <sup>5</sup>

### To Minimize Exposure from Visitors or Vendors:

<sup>&</sup>lt;sup>5</sup> Resources can be found in Appendix G. Additional Resources.

All county employees and business partners working alongside county employees have access to this Plan through FairfaxNET or through their contracting manager.

- Fairfax County is following CDC, VDH, and FCHD guidance to limit facility visitors as necessary and where and when possible.
- Several key government services are available online (Assistance from a Distance) so residents can continue to conduct business.
- Individuals entering some county-owned critical infrastructure facilities may have their temperature checked and/or a health status questionnaire completed prior to entry. Employees who have symptoms consistent with COVID-19 will not be permitted to enter the facility and will be removed from the workplace.

Face coverings may be available to visitors/vendors as well as appropriate disinfectants so individuals can clean work areas before and after use.

### Minimizing Exposure from the General Public:

The county has incorporated social distancing practices, employed signage, incorporating remote/mobile working where able, and, where face-to-face interaction is necessary, installed plexiglass screens to protect both the employee and the customer.

- Unvaccinated persons should maintain a 6-foot distance from others at all times in the workplace, including when on break and eating meals.
- Minimize face to face contact.
- Position workstations at least 6 feet apart, where feasible.
- Physical barriers between Fairfax County employees and the public have been installed in high impact areas (i.e., shielding at the front desk areas). Fairfax County considers high impact areas to be those areas where face-to-face interaction cannot be avoided at a potentially high volume of traffic, for example the Department of Tax Administration customer service counter, or receptionist areas with high traffic. In these locations transparent barriers have been placed. In areas where greater controls are deemed necessary, the barrier is more enclosed, providing protection on the sides, top and bottom.
- Face coverings may be available to members of the public who do not have one.
- Appropriate disinfectants and cleaning products are provided in the workplace.

### IX. Training

All Fairfax County employees are required to complete training on the hazards and characteristics of SARS-CoV-2 virus and COVID-19 disease to ensure employees understand the hazards of COVID-19 as well as the procedures to minimize the hazards related to infectious diseases and help prevent the spread of infectious disease.

The standard requires mandatory training content that covers the following:

- Requirements of the COVID-19 Final Permanent Standard
- Anti-discrimination provisions of the Final Permanent Standard
- Rate of Community Spread and High-Risk Workplaces
- The Infectious Disease Preparedness and Response Plan
- Characteristics and methods of spread of SARS-CoV-2 virus
- Symptoms of COVID-19 disease as well as the asymptomatic reactions of some persons to the SARS-CoV-2 virus
- Safe and healthy work practices, including but not limited to, physical distancing, cleaning, and disinfection procedures.
- The training offered by the county contains two versions; one for vaccinated employees and one for those who are unvaccinated. The training for vaccinated employees is an acknowledgement and the training for unvaccinated employees is a full-length presentation.
- Training on PPE appropriate to all job tasks that employees will perform. This will be conducted at the Department/Agency level and will be appropriate to the job tasks that the employee performs as determined by that Department/Agency Workplace Hazard Assessment. The training shall include information on:
  - When PPE is required (What job tasks require the use of respiratory protection? Concrete cutting, chemical use, etc.)
  - Why the PPE is required
  - What type of PPE is required for each hazard identified
  - How to properly don (put on), doff (take off), adjust, and wear PPE
  - Limitations of PPE
  - Proper care, maintenance, useful life, and disposal of PPE (to include replacement of worn out, lost, or stolen PPE)
  - If Respiratory Protection Equipment is required, then Agencies will follow the requirements of 29 CFR OSHA 1910.134, or 29 CFR OSHA 1910.504 (This includes the Agency having a written Respiratory Protection Plan or Mini Respiratory Protection Plan (OSHA Standard for Healthcare or High-Risk Industries) to include Fit Testing, Medical Evaluation, etc. This plan shall be updated annually in accordance with OSHA Respiratory Protection Standard.)
  - Agencies will develop contingency plans for situations when PPE is not available in the workplace. This may include procedures for extending the life of the PPE.
  - PPE training at the agency level will also include training on Heat related stress while wearing PPE and face coverings.
  - Heat related stress training will be agency specific and relate directly to that agency's activities. This training is required for those employees that are exposed to heat and are working in hot environments, indoors or outdoors. If the employees do not work in hot environments this training is not required. Agencies may not use the online generic heat related stress training found on Employee U, that training is an awareness only training and is not specific to those work tasks that agency employees engage in while performing their duties.

Employees who demonstrate a lack of understanding of the standards, mitigation controls, or procedures such as social distancing, wearing face coverings and other preventative measures within the VOSH Standard and the Fairfax County IDPRP, shall be retrained. As noted above the training for non-compliance to this IDPRP will require the employee to take the full web-based training for the COVID Disease and the IDPRP. Agency's which, due to the nature of work, are required to maintain site specific Exposure Control Plans (ECP) as indicated in the 29 CFR OSHA 1910.502 Emergency Temporary Standard shall provide additional training on this ECP.

Additional PPE training that corresponds to job tasks performed by individual employees will be handled at the agency level with support from Fairfax County Risk Management Division (RMD) and FCHD as requested. Fairfax County government has developed mandatory online training that meets all requirements of VOSH Standard 16 VAC 25-220. Training will be updated as appropriate and can be accessed through Employee U, the County's Learning Management System (LMS). Requests for reasonable accommodation to facilitate training delivery will be handled by the agency. Employees shall be required to complete training any time training is updated even if similar training has been completed in the past. The course completion is stored in Employee U. Reports of employee completion are available in Employee U for management to review.

Each employee is required to electronically sign the "Fairfax County Employee Acknowledgment of COVID-19 Health and Safety Practices" which is stored in Employee U that includes the completion and employee name. This acknowledgement indicates that each employee is required to comply with specific measures to help limit the spread of the coronavirus. In addition to the required acknowledgement, employees can complete a Health and Safety Guidance for COVID-19 Online Course (ONL-C006-COVID-19-V2) which highlights the universal precautions related to containing the spread of COVID and the Employee Acknowledgment of Health and Safety Practices.

Fairfax County has allowed and encouraged telework for its workforce where feasible based on the employee's job tasks. Fairfax County's Organizational Development and Training (OD&T) Division provides various virtual development and support resources, and some instructor-led classroom training has been converted to virtual format utilizing various technology platforms. Employees can send suggestions and requests for training support to: <u>HRODTTraining@fairfaxcounty.gov</u>.

Employee U tracks training activity for each employee in a transcript format that is easily accessible to the employee, supervisors, department training coordinators and OD&T staff members. Employee U also offers reporting functionality based on course title, employee name and course completion date.

#### X. Industry-Specific Guidelines for Healthcare settings

Agencies that fall within the NAICS codes listed below shall comply with the requirements of the Federal 29 CFR OSHA 1910.502 Emergency Temporary Standard for Healthcare until that document is rescinded. At the time of rescission of the OSHA

Emergency Temporary Standard, these same agencies will then follow the requirements contained within the IDPRP.

Table 1. Target	ed Industries in Healthcare by 2017 NAICS
NAICS Code	Industry
621111	Offices of Physicians (except Mental Health Specialists)*
621210	Offices of Dentists*
621610	Home Health Care Services*
621910	Ambulance Services
622110	General Medical and Surgical Hospitals
622210	Psychiatric and Substance Abuse Hospitals
622310	Specialty (except Psychiatric and Substance Abuse) Hospitals
623110	Nursing Care Facilities (Skilled Nursing Facilities)
623210	Residential Intellectual and Developmental Disability Facilities
623311	Continuing Care Retirement Communities
623312	Assisted Living Facilities for the Elderly

NAICS Codes for Healthcare Industries

NAICS Code	Industry
311612	Meat Processed from Carcasses
311611	Animal (except Poultry) Slaughtering
311615	Poultry Processing
445110	Supermarkets and Other Grocery (except Convenience) Stores
452210/452311	Discount Department Stores**
491110	Postal Service*
493110	General Warehousing and Storage
561320	Temporary Help Services***
722511	Full-Service Restaurants*
722513	Limited-Service Restaurants*
922140	Correctional Institutions (Public Administration Sector)*

Table 2. Targeted Industries for non-Healthcare by 2017 NAICS

**\*NOTE:** For certain industries such as Home Health Care Services NAICS 621610, Offices of Physicians (except Mental Health Specialists) NAICS 621111, Offices of Dentists NAICS 621210, Postal Service NAICS 499110, Full-Service Restaurants, NAICS 7224511, Limited-Service Restaurants NIACS 722513, and Correctional Institutions (Public Administration Sector) NAICS 922140, some of which have had a large number or high rate of COVID-19-related complaints in some communities during 2020, Area Directors should use discretion based on local information pertaining to COVID-19-related workplace exposures, to determine whether they should be considered in the generating of their master lists of establishments. These industries are not automatically included in the Office of Statistical Analysis (OSA) targeting lists for programmed inspections. Additionally, the private and contractor-run sectors that are equivalent for Correctional Institutions fall under NAICS 561210 and can similarly be targeted based on local knowledge.

**\*\*NOTE:** For Discount Department Stores, the 2012 NAICS, 452112, has changed. Area offices should be aware that these establishments may now be classified under either of two new 2017 NAICS, 452210 (Department Stores) or 452311 (Warehouse Clubs and Supercenters), depending on whether they have significant perishable grocery sales.

\*\*\*NOTE: Establishments within the Temporary Help Services (NAICS 561320) industry should not be automatically included in the targeting list for programmed inspections. Although this industry has been among the top industries with OSHA enforcement activities related to COVID-19, this has primarily occurred where services occurred at host healthcare facilities and other high-hazard workplaces. Therefore, to effectively address SARS-CoV-2 hazards for Temporary Help Services, where OSHA is conducting an inspection for other purposes, a COVID-19-related inspection shall be opened for all hazardous conditions observed in plain view (such as, for example, temporary employees working in high exposure areas without adequate PPE).

Reference: OSHA Directive Number: DIR 2021-03 (CPL 03)

#### **XI. Anti-Discrimination**

Employers shall not discriminate against any employee who exercises their rights in accordance with the safety and health standards in Chapter 40.1 of the Code of Virginia and in 16VAC-60-110 Whistleblower Protections.

An employee may not be discharged or discriminated against if the employee voluntarily brings their own Personal Protective Equipment, including respirators, face shields, gowns, gloves as long as the PPE does not create a greater hazard to the employee. Employers can implement dress codes or similar requirements that addresses the outward appearance of PPE or face coverings.

Employers shall not discriminate or discharge any employee that raises a reasonable concern about infection control related to SARS-CoV-2 or COVID-19 to the employer, government agency, or the public through means such as print, online, social, or any other media.

Nothing in the VOSH Standard for Infectious Disease Prevention of the SARS-Co-V-2 Virus that Causes COVID-19 shall prevent employees from refusing to work or enter a location because of a reasonable fear of illness or death. The requirements of 16VAC25-60-110 Whistleblower protections contain the applicable requirements concerning discharge or discipline of an employee who has refused to complete an assigned task because of a reasonable fear of illness or death.

Single Case	2 Cases	3 or More Cases
1. Employee present at th		1. 3 or more Employees
place of employment	place of employment receives	present at the place of
Receives positive	positive COVID-19 test result	employment receives
COVID-19 test result	within 14 days of 1 <sup>st</sup> case	positive COVID-19 test
		result within 14 days of 1 <sup>st</sup>
2. Employee notifies	2. Employee notifies his/her	case
his/her Supervisor/Agency	Supervisor/Agency COVID Coordinator/HR Manager	2. Employee notifies his/her
COVID Coordinator/HF		Supervisor/Agency COVID
Manager	3. COVID Coordinator submits	Coordinator/HR Manager
	FCHD REDCap COVID-19	
3. COVID Coordinator	Employee Case Reporting	3. COVID Coordinator submits
submits FCHD REDCa		FCHD REDCap COVID-19
COVID-19 Employee	VDH REDCap form, notifies	Employee Case Reporting
Case Reporting Form	VOSH by completing the	Form, <b>notifies VOSH by</b>
4. FCHD conducts case	VDH REDCap form and notifies RMD. Notification to	completing the VDH REDCap form, and
investigation and notifi		notifies RMD. Notification
all close contacts* via		to RMD is not optional.
phone, text, and/or em	ail 4. FCHD conducts case	
	investigation and notifies all	4. FCHD conducts case
5. Case and contacts	close contacts* via phone,	investigation and notifies all
enrolled in Sara Alert	text, and/or email	close contacts* via phone,
(electronic wellness	5 Occas and contracts annullad in	text, and/or email
system)	5. Case and contacts enrolled in	5. Case and contacts enrolled
6. Agency Records all	Sara Alert (electronic wellness system)	in Sara Alert (electronic
work-related cases on	System	wellness system)
the OSHA 300 Log	6. Summary of investigation	
	findings provided to agency by	6. Summary of investigation
7. If another Employee	n FCHD	findings provided to agency
the workplace within		by FCHD
14 days tests positive		
– See 2 cases scenar	io related cases on the OSHA 300 Log	<ol> <li>Agency Records all work- related Cases on the OSHA</li> </ol>
	SUU LUG	300 Log, continue to report
	8. If another Employee in the	until outbreak is closed by
	workplace within 14 days	FCHD
	tests positive – See 3 or	
	more cases scenario	8. If another Employee in
		the workplace within 14
		days tests positive - Report to VOSH by
		completing the VDH
		REDCap form
FORMS:FCHD REDCap	VDH REDCap Form—VDH/VOSH	VDH/VOSH REDCap
	REDCap	

### Appendix A: Fairfax County Employee Positive Test Notification Procedures

\* Cases must be reported regardless of Vaccination Status. After the initial report of outbreak (two or more cases), employers shall continue to report all cases to FCHD, VDH, DOLI, and RMD until the FCHD notifies the Agency COVID Coordinator that the outbreak has been closed.

### Appendix B: Reporting of Positive Cases

When an employee who was present in the workplace receives a diagnosis of COVID-19 or receives a laboratory result indicating the SARS-CoV-2 virus was "detected," the employee shall notify his/her supervisor as quickly as possible. Supervisors should be instructed on which individual(s) within their agency are designated to receive all COVID-19 reports among employees. In some agencies, it may be the Human Resources Manager or their designee, but in others it may be a designated COVID Coordinator, Safety Analyst, Infectious Disease Officer, etc. All cases must be tracked from date and time of positive notification for 14 days. The 14-day period is a rolling 14 days and begins with each case. Agencies are responsible for determining the process for how those dates and cases are to be tracked.

Once the designated reporter receives the notification of a positive case, they complete an online reporting form through REDCap, which is a HIPAA-compliant epidemiology reporting tool used by the Fairfax County Health Department.

Upon receipt of the REDCap submission, FCHD begins a contact investigation to determine what, if any, workplace exposures exist. FCHD also notifies any workplace exposures (close contacts) via phone, text, and/or email. This process takes up to 24 hours after discovery to complete. In cases where a close contact does not answer their phone or text messages, FCHD mails a certified letter to the address of record with instructions on how to contact FCHD to receive important health information.

When there are two (2) or more cases as detailed below in a single county worksite within a period of 14 days, Agencies shall notify VDH, DOLI and RMD. FCHD may provide a de-identified written summary of cases so that additional training, signage, or engineering, administrative and work practice controls can be considered for that particular worksite. In accordance with the VOSH Standard agencies that have 2 or more cases shall also complete the Virginia Occupational Safety and Health (VOSH) online reporting form as directed by DOLI. This submission contains only the minimum necessary information to meet the reporting requirements of the VS. Information gathered during case and contact investigation remains protected under the Code of Virginia §32.1-41.

### Single Cases – Notification to the Fairfax County Health Department (FCHD)

Every positive employee case shall be reported to the FCHD using the <u>FCHD REDCap</u> form.

### 2 cases in 14 days – Additional notifications to the Virginia Department of Health (VDH), Virginia DOLI, RMD.

Agency reporters shall report to the VDH, DOLI, and RMD within 24 hours of the discovery of **two or more cases** of its own employees *present at the place of employment* within a 14 day period testing positive for SARS-CoV-2 virus during that

14 day time period using the <u>VDH/DOLI REDCap reporting form</u> to notify VDH/DOLI, and the FCHD <u>REDCap form</u> to notify FCHD. The 24-hour notification requirement is applicable after hours and on weekends and holidays.

# After the initial report of outbreak (two or more cases), employers shall continue to report all cases to FCHD, VDH, DOLI, and RMD until the FCHD notifies the Agency Covid Coordinator that the outbreak has been closed.

Agencies shall email <u>covid@fairfaxcounty.gov</u> to notify RMD of 2 or more cases in a worksite. This notification shall be made for each instance where 2 or more employees are identified as positive at the worksite.

For more information regarding reporting requirements agency reporters can go to the DOLI webpage: Report a Positive Coronavirus Case, Workplace Fatality, or Severe Injury. <u>The 24-hour notification requirement is applicable after hours and on</u> <u>weekends and holidays.</u>

Upon notification of 2 cases, Agencies should prepare for a VOSH investigation. Agency Directors, HR Managers, COVID Coordinators, Safety Analysts, Infectious Disease Officers, etc., are expected to know and follow the procedures and requirements of <u>Risk Management Policy LP-8</u>: <u>Procedures for Responding to VOSH</u> <u>Inspections.</u>

### More than 2 cases in 14 days – Notification to the Department of Labor and Industry (DOLI), VDH, FCHD, and Risk Management (RMD).

Agency reporters shall report to DOLI, VDH, FCHD, and RMD within 24 hours of the discovery of **more than 2 cases** of its own employees present at the place of employment within a 14-day period testing positive for SARS-CoV-2 virus during that 14-day time period using the <u>VDH/DOLI REDCap reporting form</u> to notify VDH/DOLI, and the FCHD <u>REDCap form</u> to notify FCHD. Email <u>covid@fairfaxcounty.gov</u> to notify RMD of more than 2 cases in 14 days. For more information regarding reporting requirements agency reporters can go to the DOLI webpage: **Report a Positive Coronavirus Case, Workplace Fatality, or Severe Injury**. <u>The 24-hour notification requirement is applicable after hours and on weekends and holidays</u>.

Upon notification of 2 or more cases in 14 days, Agencies should prepare for a VOSH investigation. Agency Directors, HR Managers, COVID Coordinators, Safety Analysts, Infectious Disease Officers, etc., are expected to know and follow the procedures and requirements of <u>Risk Management Policy LP-8</u>: <u>Procedures for Responding to VOSH Inspections</u>.

**Recording of cases on the Agency OSHA 300 Log:** If a case has been determined to be work related, the illness must be recorded in the Agency OSHA 300 log. COVID-19 is a respiratory illness and should be coded as such on the OSHA Form 300.

 Because this is an illness, if an employee voluntarily requests that his or her name not be entered on the log, the employer must comply as specified under 29 CFR § 1904.29(b)(7)(vi).

After the outbreak is closed, subsequent identification of additional cases of COVID-19 shall be reported, as above.

# Appendix C - VOSH Notification for Fatalities, In-Patient Hospitalization, Loss of an Eye, VOSH Onsite Inspection Information

Virginia Code § 40.1-51.1. D requires all employers, regardless of how many individuals they employ, to report any work-related incident resulting in a fatality or catastrophe within **eight (8) hours** to the Virginia Department of Labor and Industry (DOLI). Virginia Code § 40.1-51.1. D also provides that every employer shall report to the Virginia Department of Labor and Industry to the Virginia in (i) the inpatient hospitalization of one or more persons, (ii) an amputation, or (iii) the loss of an eye.

### Risk Management must be contacted immediately using the prescribed contacts listed in LP-8 if any of these notifications are made.

## The reporting timeframe requirement is applicable after hours on weekends and holidays.

If an employee is admitted within 24 hours of the workplace exposure for an in-patient hospitalization and/or passes away from COVID complications, **immediately after notification to the Agency HR or COVID Coordinator by a family member or the hospital**, the following notifications are required within the mandated timeframes below.

### An in-patient hospitalization, amputation, or eye loss must be reported within **24 hours**. The **24-hour notification requirement is applicable after hours**, on weekends, and on holidays.

Under <u>29 CFR 1904.39(b)(6)</u>, employers are only required to report in-patient hospitalizations to OSHA if the hospitalization "occurs within twenty-four (24) hours of the work-related incident." For cases of COVID-19, the term "incident" means an exposure to SARS-CoV-2 in the workplace. Therefore, to be reportable, an in-patient hospitalization due to COVID-19 must occur within 24 hours of an exposure to SARS-CoV-2 at work. The employer must report such hospitalization within 24 hours of knowing both that the employee has been in-patient hospitalized and that the reason for the hospitalization was a work-related case of COVID-19. Thus, if an employer learns that an employee was in-patient hospitalized within 24 hours of a work-related incident and determines afterward that the cause of the in-patient hospitalization was a work-related case of COVID-19. Thus, if an employer learns that an employee was in-patient hospitalized within 24 hours of a work-related incident and determines afterward that the cause of the in-patient hospitalization was a work-related case of COVID-19, the case must be reported within 24 hours of that determination. See 29 CFR 1904.39(a)(2), (b)(7) -(b)(8).

# A fatality must be reported within 8 hours. <u>The 8 and 24hour notification requirement</u> is applicable after hours and on weekends and holidays.

Under <u>29 CFR 1904.39(b)(6)</u>, an employer must "report a fatality to OSHA if the fatality occurs within thirty (30) days of the work-related incident." For cases of COVID-19, the term "incident" means an exposure to SARS-CoV-2 in the workplace. Therefore, to be reportable, a fatality due to COVID-19 must occur within 30 days of an exposure to

SARS-CoV-2 at work. The employer must report the fatality within eight hours of knowing both that the employee has died, and that the cause of death was a *work-related* case of COVID-19. Thus, if an employer learns that an employee died within 30 days of a work-related incident and determines afterward that the cause of the death was a work-related case of COVID-19, the case must be reported within eight hours of that determination.

### **Reporting a Fatality to VOSH/OSHA**

When contacting either of these offices via phone, leaving a message on voicemail does not satisfy notification requirements When calling, <u>reporters must</u> <u>speak with a VOSH/OSHA representative. For this reason</u>, the online reporting portal is the recommended means of reporting.

### **Reporting Online**

Be prepared to supply the following information: Business name; names of employees affected; location and time of the incident, brief description of the incident; contact person and phone number.

### **Reporting Via Telephone**

Call the nearest OSHA office. (Manassas Office 703-392-0900)

Call the OSHA 24-hour hotline at 1-800-321-6742 (OSHA).

The following information can be found in full in Fairfax County Policy LP-8: VOSH Reporting and Inspection Procedures

### What to do if a VOSH/OSHA Compliance Officer Requests a Site Inspection:

- **1.** Politely request the Compliance Officer remain in the waiting area until the Agency/Department Safety Analyst or designee is notified and onsite.
- **2.** Immediately call the County Risk Manager. The contact numbers can be found in LP-8.
- **3.** Verify the Compliance Officer's credentials and inquire as to the details of the inspection request.
- 4. Demonstrate professionalism and respect.
- 5. Contact the Department/worksite designated staff and determine the period of time it will take for the designee to be available to escort the Compliance Officer to the area to be inspected.
- **6.** Notify the Compliance Officer of the time the Agency/Department Safety Analyst and/or designee will be available. (30 minutes is a reasonable amount of wait time; preferably not more than an hour).

**Note:** Inspections should take place during normal business hours; however, this may not always be the case.

### What to do if VOSH/OSHA Serve a Warrant

Immediately contact the County Attorney's Office at <u>karen.gibbons@fairfaxcounty.gov</u> and the County Risk Manager at <u>DOFRiskMgmt-LossPrevention@fairfaxcounty.gov</u> for instructions.

### Frequently Requested Documents during COVID-19 inspections (This list is not intended to be all inclusive)

- Injury/Illness records (past 3 years) The OSHA 300 log, OSHA 300A or 300 Summary. Note: The OSHA 300 Summary should be posted from February 1st through April 30th, in a common area visible to employees.
- Total number of Employees in the Agency/Department and the total number of employees that worked with a COVID-19 positive individual.
- A listing of all Engineering, Administrative and Work Practice Controls in place to prevent exposure to COVID-19.
- Workplace Hazard Assessments
- Written Programs –Such as but not limited to, Emergency Action Plans, Hazard Communication Program, Hazard Assessment (PPE), Respiratory Protection Program, Respiratory Program Fit Testing to include medical clearance documentation.
- Safety Data Sheets Including a Chemical Inventory List if applicable to your site
- Training/Certification Records for all written safety programs Other Examples: -Tailgate talks, Toolbox Safety Meetings, New Employee Safety Orientation Required Postings, Job Safety and Health Protection, Equal Employment Opportunity, Fair Labor Standards Act (FLSA), Family Medical Leave Act (FMLA).

### Employee Rights When Requested to Meet Privately With a VOSH/OSHA Compliance Officer

Employees have the right to a representative of his/her choice, present during any meetings with a VOSH/OSHA Compliance Officer. It is strongly recommended employees exercise the right to representation. Employees have the right to decline a VOSH/OSHA Compliance Officer's request to meet in private. Employees also have a right to request to meet privately with a VOSH/OSHA Compliance Officer without reprisal.

### **Complaint Letter, Citation and Abatement Process Note**

Whenever a VOSH/OSHA complaint letter or citation is received at a county worksite; immediately contact the County Risk Manager and County Attorney. Responses, appeals, and abatement correspondence should be issued through the County Attorney, with assistance as needed by the Risk Manager and any affected County Agency/Department.

- VOSH may issue a formal citation several weeks after the closing conference.
- Upon receipt, a citation or complaint letter must be posted at or near the site of the violation for ten working days or until the violation/hazard is corrected for a citation

and for a complaint, 3 working days or until the violation/hazard is corrected, whichever is longer.

- Official notification to the county may be received in different locations.
- Upon receipt of any correspondence from Federal OSHA or VOSH the following notifications shall be made Immediately:
  - a. The Department Director/Agency Head
  - b. County Risk Manager
  - c. County Attorney should be notified and provided a copy of any VOSH/OSHA complaint letters or issued citation(s).

Notification (scanned copy of the complaint letter/citation and any supporting documentation) can be made to the general Risk Management email <u>DOFRiskMgmt-LossPrevention@fairfaxcounty.gov</u> and to the Office of the County Attorney at <u>karen.gibbons@fairfaxcounty.gov</u>.

- Decisions to appeal a citation will be made jointly by the County Attorney, Department Director/Agency Head and County Risk Manager. Filing a Notice of Contest will only be made by the County Attorney within the specified timeframe from receipt of the citation.
- If an "Informal Conference" is requested at the guidance of Risk Management or the County Attorney, the agency will have responsibility for addressing any issues where there is controversy. Settlement agreements may take place that can potentially revise citations.
- Uncontested citations become final orders to the county. Uncontested citations must be corrected within the designated abatement period.
- An abatement plan needs to be drafted and forwarded to the County Risk Manager for review and approval, with a copy forwarded to the County Attorney prior to submitting to VOSH/OSHA. Documented proof of abatement will be required as well if warranted.
- The County Risk Manager will be responsible for ensuring that any mitigation and/or abatement action required is met by the respective agency.
- Notification of abatement completion must explain specific actions taken, supported by documentation showing the date(s) corrective action(s) was completed. Abatement Notification should be submitted to the County Attorney for review and final approval.
- Submission to the VOSH Area Director shall be via registered/certified mail, issued by the County Attorney's Office, with copies to the County Risk Manager and the respective Department Head.

### Appendix D: COVID-19 Positive Case Notification to Employees in the Workplace

The VOSH Standard (VS) states that notification shall be made to those employees that may have been exposed to a positive case in the workplace. After the Health Department is notified of a positive case in the workplace the process begins to complete the contact investigation of close contacts. Contact investigations will identify any employees that were in close contact with the positive employee and contact investigators will assess those individuals' need to quarantine, based on VDH guidance. **A close contact is defined by the CDC as follows:** 

**Close Contact through** <u>Proximity and Duration of Exposure</u>: Someone who was within <u>6 feet of an infected person</u> (laboratory-confirmed or a <u>clinically compatible</u> <u>illness</u>) for a cumulative total of 15 minutes or more over a 24-hour period (for example, *three individual 5-minute exposures for a total of 15 minutes*). An infected person can spread SARS-CoV-2 starting from 2 days before they have any symptoms (or, for asymptomatic patients, 2 days before the positive specimen collection date), until they meet criteria for <u>discontinuing home isolation</u>.

Source: CDC Website: Appendices | CDC Updated definition 9//2021

A contact investigation conducted by the FCHD satisfies the requirement in the VOSH Standard for COVID-19 of Employee notification of a positive case and no other notification to employees is necessary or required. VOSH has confirmed that this process meets the standard for employee notification of a positive case in the workplace.

If an employee is not contacted by a FCHD case investigator, then the employee was not deemed to be a close contact during the investigation.

### Appendix E: Positive Case Language for Employer Tenants in County Buildings

<u>The language below is used by Fairfax County Government to notify vendors,</u> <u>contractors, or lessees</u> only. This is not to be used for notification to employees. ONLY FCHD will contact those who have been deemed to be close contacts of a positive case. **For Employee Notifications of a positive case see Appendix D.** 

#### Hello,

We have been made aware that a building occupant/tenant of the [INSERT BUILDING NAME] has been diagnosed with coronavirus disease 2019 (COVID-19).

We are working closely with the Fairfax County Health Department to identify anyone who had close contact with the person to determine if they might have been exposed to the virus that causes COVID-19. If you are identified as having been potentially exposed, the Health Department will contact you directly. If you are not contacted by the Health Department, you do not need to stay home or exclude yourself from activities at this time.

The Fairfax County Health Department, Virginia Department of Health, and the Centers for Disease Control and Prevention recommend that we all stay informed about COVID-19 in our community and take the following steps to protect ourselves and the people around us:

- Get vaccinated against COVID-19 as soon as possible. Vaccines are free, safe, and readily available in every community.
- A minimum two-layer washable face covering, or disposable (one-time use) face covering shall be worn at all times when in Fairfax County Buildings or leased spaces as indicated by the transmission level.
- After notifying employer tenants, the county will take the necessary steps to sanitize the common areas of the building.
- Follow all physical and social distancing guidelines as issued by VDH or FCHD.
- Wash your hands often with soap and water for at least 20 seconds especially after you have been in a public place or after blowing your nose, coughing, or sneezing.
  - If soap and water are not readily available, use a hand sanitizer that contains at least 60% alcohol.
- Avoid touching your eyes, nose, and mouth with unwashed hands.
- Avoid close contact with people who are sick.
- Stay home if you are sick, even if your symptoms are mild.
- Cover coughs and sneezes.
- Clean and disinfect frequently touched surfaces daily.

If you have any questions, please email <u>COVID@fairfaxcounty.gov</u>

### **Appendix F: Definitions**

Term	Definition
Asymptomatic	An asymptomatic case is an individual infected with SARS-CoV-2, who does not exhibit symptoms during the course of infection. These individuals are capable of spreading the SARS-CoV-2 virus.
Building Owner	The legal entity, including a lessee, which exercises control over management and record keeping functions relating to a building and/or facility in which activities covered by this standard take place.
CDC	Centers for Disease Control & Prevention
Close Contact	Close Contact through Proximity and Duration of Exposure: Someone who was within <u>6 feet of an infected</u> person (laboratory-confirmed or a <u>clinically compatible illness</u> ) for a cumulative total of 15 minutes or more over a 24-hour period (for example, <i>three individual 5-minute exposures for a total of 15</i> <i>minutes</i> ). An infected person can spread SARS-CoV-2 starting from 2 days before they have any symptoms (or, for asymptomatic patients, 2 days before the positive specimen collection date), until they meet criteria for <u>discontinuing home isolation</u> .
COVID-19	Coronavirus Disease 2019, which is primarily a respiratory disease, caused by the SARS-CoV-2 virus.
COVID Coordinator	A designated employee in each department and agency that works with Fairfax County Health Department during employee COVID cases.
DOLI	Virginia Department of Labor and Industry.
DVS	Department of Vehicle Services
Elimination	Removes the employee from exposure to SARS-CoV-2 virus and COVID-19 disease related workplace hazards and job tasks. Elimination of a hazard is not always possible.
Employee	An employee of an employer who is employed in a business of the employer. Reference to the term "employee" in this standard also includes, but is not limited to, temporary employees and other joint employment relationships, persons in supervisory or management positions with the employer, etc., in accordance with Virginia occupational safety and health laws, standards, regulations, and court rulings.
Face Covering	Minimum two-layer washable fabric or disposable face covering that meets or exceeds guidance issued by the CDC.
FCHD	Fairfax County Health Department
FMD	Facilities Management Department

Health Officer	The health officer is responsible for overseeing case and contact investigations within the Fairfax County workforce and has the authority to stop or alter activities to ensure that all work practices conform to the mandatory safety and health requirements applicable to COVID-19 as well as any other infectious disease hazards.
High Impact Areas	Fairfax County considers high impact areas those areas where face-to- face interaction cannot be avoided at a potentially high volume of traffic (Department of Tax Administration, receptionist areas with high traffic, etc.). In these locations a physical, transparent barrier has been placed. In areas where greater controls are deemed necessary the barrier is more enclosed, providing both sides, top and bottom protections as well.
HIGH RISK WORKPLACE	RMD has determined that all of Fairfax County meets the parameters of a high-risk workplace due to the following parameters. Due to the diversity of job functions throughout the county, RMD has determined the county meets this definition.
ΗΙΡΑΑ	The Health Insurance Portability and Accountability Act of 1996 (HIPAA) is a federal law that required the creation of national standards to protect sensitive patient health information from being disclosed without the patient's consent or knowledge.
Hygiene	Hygiene refers to conditions and practices that help to maintain health and prevent the spread of diseases.
Lemon-Quat	EPA-approved disinfectant and 100% effective against microorganisms that cause viral and bacterial infections including COVID-19.
Non-test-based strategy	Known as the time-based strategy. Under the non-test-based strategy, employees who <u>tested positive and had COVID-19 symptoms</u> may discontinue isolation and return to work upon achieving the following conditions:
	<ul> <li>At least 10 days have passed since symptoms first appeared, and</li> <li>At least 24 hours with no fever without fever-reducing medication, and</li> <li>Other symptoms of COVID-19 are improving. *</li> </ul>
	*Loss of taste and smell may persist for weeks or months after recovery and need not delay the end of isolation.
Occupational Exposure	The state of being actually or potentially exposed to contact with SARS-CoV-2 virus or COVID-19 disease related hazards at the work location or while engaged in work activities at another location.

PermaSafe	The approved cleaner that can be used before and after vehicles are used
Personal Protective Equipment (PPE)	Personal Protective Equipment is equipment worn to minimize exposure to hazards that cause workplace injuries and illnesses.
Plan Administrator	Agency Heads or their designee(s) are responsible for administering this plan, monitoring agencies for new requirements, updating this plan, communicating any changes to employees, and monitoring the overall effectiveness of the plan. This person is also responsible for providing employees with a copy of this plan upon request or making it available for self-access through FairfaxNET.
Pre-symptomatic	A pre-symptomatic case of COVID-19 is an individual infected with the SARS-CoV-2 virus, who has not exhibited symptoms at the time of testing, but who later exhibits symptoms during the course of the infection. These individuals are capable of spreading the SARS-CoV-2 virus.
REDCap	A HIPAA-compliant epidemiology reporting tool used by the Fairfax County Health Department to collect data.
RMD	Risk Management Division
Sanitizing Actions/ Sanitization	Sanitizing actions and sanitization refers to public health systems aimed to protect human health by providing a clean environment.
Sara Alert	The wellness system used for both confirmed cases and their close contacts.
SARS-CoV-2	A betacoronavirus, like MERS-CoV & SARS-CoV. Coronaviruses are named for the crown- like spikes on their surface. SARS-CoV-2 causes what has been designated as the Coronavirus Disease 2019 (COVID- 19).
Self-Check	The steps to take including checking of your own temperature or determining if you are displaying any known symptoms (below).
Symptoms	People with COVID-19 have had a wide range of symptoms reported – ranging from mild symptoms to severe illness. Symptoms may appear 2- 14 days after exposure to the virus. People with these symptoms may have COVID-19: 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 or vomiting, and/or diarrhea.
Symptomatic	A person is experiencing symptoms of COVID-19 illness, as defined by CDC, and summarized in this table.
Transmission	COVID-19 is a respiratory disease that is transmitted from person to person mainly through close contact (inside 6 feet) by respiratory droplets produced when an infected person coughs, sneezes, or talks.

Transmission Reduction	Measures shown to reduce risk of exposure and transmission to yourself and others including face coverings, handwashing, and social distancing.
VDH	Virginia Department of Health
VOSH	Virginia Occupational Safety and Health program
VS	VOSH Standard

### Appendix G. Additional Resources

Fairfax County Resources
Fairfax County Government's COVID-19 YouTube Channel (Videos)
Department of Vehicle Services Sanitizes Fleet to Fight the Spread (Video)
Assistance from a Distance – Accessing Fairfax County Services During COVID-19 (Video)
Assistance from a Distance During COVID-19
Fairfax County Employee Acknowledgment of COVID-19 Health and Safety Practices
COVID-19 Preparedness County Business Travel
Cleaning and Disinfecting County Vehicles
State Resources
VDH Businesses
Federal Resources
Reopening Guidance for Cleaning and Disinfecting Public Spaces, Workplaces,
Businesses, Schools, and Homes
CDC Print Resources
Reopening Guidance for Cleaning and Disinfecting Public Spaces, Workplaces,
Businesses, Schools, and Homes
Cleaning and Disinfecting Your Facility
OSHA 3990: Guidance on Preparing Workplaces for COVID-19
Other
National Chemical Laboratories, Inc. Safety Data Sheet for Lemon-Quat Disinfectant
ACS Lemon Disinfectant Safety Data Sheet
PermaSafe Protective Coatings Safety Data Sheet
SDS Online – Safety Data Sheet Management System

## Appendix H – Fairfax County Government Voluntary Respirator Use in the Workplace



#### Fairfax County Government Voluntary Respirator Use in the Workplace

Appendix D to Sec. 1910.134 (Mandatory) Information for Employees Using Respirators When Not Required Under the Standard

Respirators are an effective method of protection against designated hazards when properly selected and worn. Respirator use is encouraged, even when exposures are below the exposure limit, to provide an additional level of comfort and protection for workers. However, if

a respirator is used improperly or not kept clean, the respirator itself can become a hazard to the worker. Sometimes, workers may wear respirators to avoid exposures to hazards, even if the amount of hazardous substance does not exceed the limits set by OSHA standards. If your employer provides respirators for your voluntary use, or if you provide your own respirator, you need to take certain precautions to be sure that the respirator itself does not present a hazard.

You should do the following:

1. Read and heed all instructions provided by the manufacturer on use, maintenance, cleaning and care, and warnings regarding the respirator's limitations.

2. Choose respirators certified for use to protect against the contaminant of concern. NIOSH, the National Institute for Occupational Safety and Health of the U.S. Department of Health and Human Services, certifies respirators. A label or statement of certification should appear on the respirator or respirator packaging. It will tell you what the respirator is designed for and how much it will protect you.

3. Do not wear your respirator into atmospheres containing contaminants for which your respirator is not designed to protect against. For example, a respirator designed to filter dust particles will not protect you against gases, vapors, or very small solid particles of fumes or smoke.

4. Keep track of your respirator so that you do not mistakenly use someone else's respirator.

 Employee Name:
 \_\_\_\_\_\_ Date provided:

 Position Title:
 \_\_\_\_\_\_\_\_

 Department/Agency:
 \_\_\_\_\_\_\_ Location:

 I have read and understand the information provided in Appendix D from the OSHA 1910.134 Respiratory Protection Standard as noted above and have been provided a copy of the Hazard Assessment form. A copy of the assessment shall be kept with the signed copy of Appendix D.

 Employee Signature:
 \_\_\_\_\_\_\_ Date:

 Employee Name:
 \_\_\_\_\_\_\_\_ has elected to wear a face covering in lieu of a filtering face piece respirator such as an N-95 while sharing a vehicle while conducting business for Fairfax County.

Employee Signature: \_\_\_\_\_ Date: \_\_\_\_\_

Agencies shall maintain this record along with the hazard assessment as noted above. This documentation shall be made available to Risk Management and DOLI should an investigation occur.

### Appendix I - Fairfax County COVID-19 Points of Contact

Contact Type	Contact Person	Contact Email	Contact Phone
COVID- 19/IDPRP Questions or Concerns	COVID Email Box	Covid@fairfaxcounty.gov	N/A
Workplace Safety Concerns or Hazard Reporting	Risk Management Loss Prevention Team	DOFRiskMgmt- LossPrevention@fairfaxcounty.gov	703-324-3040