

DOSH DIRECTIVE

Department of Labor and Industries
Division of Occupational Safety and Health

Keeping Washington Safe and Working

1.70 General Coronavirus Prevention Under Stay Home - Stay Healthy Order

Updated: May 15, 2020

I. Purpose

This Directive provides enforcement policy when evaluating workplace implementation of social distancing, **facial coverings and respiratory protection**, sanitation and sick employee practices as required under the [Governor's Proclamation: Stay Home - Stay Healthy Order](#).

Under the Order, people are required to stay home except **where the Governor has authorized regional or industry specific permission to restart operations or operate essential businesses**.

Employers who continue operations under the Order are required to maintain coronavirus prevention practices consistent with DOSH, OSHA and Department of Health guidance.

Coronavirus is recognized as a very serious workplace hazard.

II. Scope and Application

A. DOSH does not enforce the Governor's Order directly. Under existing DOSH rules, employers are required to protect workers from biological hazards and implement programs to address known hazards in the workplace.

B. DOSH staff will not determine whether an employer is engaged in essential activity. If there is no clear rationale for the business operating, this may be referred to the Washington State coronavirus.wa.gov page. (See the Governor's site "What's open and closed" at <https://coronavirus.wa.gov/whats-open-and-closed>).

C. DOSH staff will limit actions related to infectious disease only when there is an aspect of exposure that is specific to the relationship between employers and workers. DOSH will do so in a manner consistent with public health orders and issued guidance.

D. There are extensive recommendations for healthcare workplaces with specific guidance related to **treatment of COVID-19 patients and the related infectious disease control measures**. Therefore, this Directive will not normally be used in specific healthcare delivery work task settings for hospital and clinic workers who work directly with **COVID-19 patients**. Other hospital and clinic work, such as maintenance, food delivery, administrative support, and supplies, are covered by this directive.

E. This directive does cover workers providing healthcare services for people not known or suspected of having COVID-19. This work must follow procedures for Universal or Standard Precautions, or equivalent programs, as recommended by the CDC. This includes current recommendations to address COVID-19 as a community transmission hazard and potential for transmission by asymptomatic people in specific healthcare specialties.

F. DOSH has updated this Directive to provide guidance on workplace safety practices consistent with the Governor's Executive Orders regarding COVID-19. This updated Directive supersedes DD 1.70, dated April 27, 2020.

III. References

- Chapter 296-800 WAC, Safety and Health Core Rules
 - WAC 296-800-11045 Protect employees from biological agents
 - WAC 296-800-140, Accident Prevention Program
 - WAC 296-800-22005, Keep your workplace clean.
 - WAC 296-800-23025, Provide convenient and clean washing facilities
- Chapter 296-842 WAC, Respirators
- WAC 296-307-16102, Additional requirements to protect occupants in temporary worker housing from 2019 novel coronavirus (COVID-19) exposure.
- Respiratory Protection Annual Fit-Testing for N95 Filtering Facepieces During the COVID-19 Outbreak (DOSH Directive 11.80 - Temporary Enforcement Guidance)
- Proclamation by the Governor: Stay Home - Stay Healthy Order
- CDC Guidance: Infection Control in Healthcare Personnel
- CDC Coronavirus (COVID-19) Page
- Washington State Coronavirus Response (COVID-19) Page
- OSHA Publication 3990: Guidance on Preparing Workplaces for COVID-19.pdf (English)
- OSHA Publication 3992: Guidance on Preparing Workplaces for COVID-19.pdf (Spanish)
- Washington State Department of Health Recommendations for Temporary Worker Housing Facilities
- COVID-19 Guidance for Legionella and Building Water System Closures
- BOMA Guide “Getting Back to Work: Preparing Buildings for Re-Entry Amid COVID-19”
- CDC Interim Guidance: Implementing Safety Practices for Critical Infrastructure Workers Who May Have Had Exposure to a Person with Suspected or Confirmed COVID-19

IV. Background

Staff shall learn and consider the baseline expectations for employers to provide workers a safe workplace during the coronavirus (COVID-19) virus outbreak. Overt workplace specific practices by the employer must be made to implement the Governor’s [Executive Order](#).

There are four basic categories of prevention elements that must be addressed during the inspection/investigation. Employers must:

- (1) Ensure social distancing practices for employees and control customer flow;
- (2) Provide at no cost appropriate facial coverings, respiratory protection and PPE;
- (3) Ensure frequent and adequate employee handwashing and surface sanitation; and
- (4) Ensure sick employees stay home or go home if ill.

Employers must also provide basic workplace hazard education about coronavirus and how to prevent transmission in the language best understood by the employee. DOSH staff will need to be thoughtful on how these four elements are addressed based on the challenges that the specific worksite tasks present, but all four elements must be addressed in each operating workplace.

DOSH Staff shall ensure that employers and employees are made aware that it is against the law for any employer to take any adverse action (such as firing, demotion, or otherwise retaliate) against a worker they suspect for exercising safety and health rights such as raising safety and health concerns to their employer, participating in union activities concerning safety and health matters, filing a safety and health complaint or participating in a DOSH investigation. DOSH Staff will ensure workers are informed they have 30 days to file their complaint with L&I DOSH and/or with Federal OSHA.

Employers must institute these prevention program elements or equivalent protections to limit the spread of the disease within the workplace under DOSH rules and in connection to the Governor's Order. These procedures are specific to COVID-19 prevention and the related virus. If a workplace has a concern about exposures to another pathogen, Technical Services must be consulted on procedures specific to that pathogen.

A. Basic Program Elements.

The following **bold program elements are essential** to the program whenever **applicable**. Employers who can establish work rules consistent with this section are not required to have further active monitoring or ongoing assessment of their workplace.

1. **Educate workers (and customers) about COVID-19 and how to prevent virus spread.**
 - a. Post posters/information from the local health department, state Department of Health, Center for Disease Control and Prevention, and other authorities.
 - b. Inform workers about the steps being taken in the workplace to establish social distancing, increased handwashing, and to prevent the spread of the virus.
 - c. **Make information for workers available in the language they understand best.**
2. **Maintain at least 6 feet of spacing at all times.**
 - a. **Occupied workstations are separated by 6 feet or have physical barriers between human breathing zones.**
 - b. **Only infrequent intermittent passing within 6 feet is allowed between employees without wearing coverings, masks or respiratory protection in accordance with DOSH Directive 11.80, Annual Fit-Testing for N95 Filtering Facepieces and Respirator/Face Covering Selection during the COVID-19 Outbreak.**
 - c. **Provide personal protective equipment (PPE) such as gloves, goggles, face shields and face masks as appropriate or required, to employees for the activity being performed.**
 - d. Materials, product, or work items are transported between workers by mechanical means or by using staging points.
 - Workers may be along a conveyor or production system carrying product.
 - Workers may go to a central point one-at-a-time to drop off or pick up items that transfer between workers.
 - Workers may have mailboxes, bins, or other surfaces at the periphery of their workspace where materials are left for them by other workers.

- Provisions must be made to clean objects **handled by** more than one worker when the items are transferred. Physically wiping the object **with a disinfectant wipe or soap and water** so it is visibly clean (no obvious soiling, smearing, or streaks) is sufficient.
- Social distancing must be maintained during breaks and at shift start and end, while workers are at the employer's worksite.
- Meetings with workers are limited in less than 10, and maintain 6 foot spacing of all in attendance.

3. Regular cleaning of area, frequent cleaning of common-touch surfaces.

- a. A cleaning schedule must be kept to maintain general housekeeping to prevent buildup of dirt and clutter.
- b. The first step in cleaning is to remove buildups of dirt and other materials on surfaces. Water and soap or other cleaning fluids are used with wipes, clothes, brushes or other physical means of removing these materials so that there is no visible build-up, smears, or streaks on the surface. Disinfecting is the second step and is primarily needed for high touch surfaces. **Effective diluted** bleach solutions or an EPA approved disinfectant **must be used** to make sure this is effective. (See the list of approved disinfectants at <https://www.epa.gov/pesticide-registration/list-n-disinfectants-use-against-sars-cov-2>).

Surfaces that are commonly touched with the hands but difficult to clean (fabric, rough surfaces, and so forth) may need to be covered to make sure the environment is hygienic.

- c. Cleaning supplies need to be available to workers to do spot cleaning when necessary.
- d. Surfaces that are regularly touched by workers must be cleaned regularly to maintain a visibly clean state (no obvious soiling, smearing, or streaks).
 - For surfaces touched by multiple workers, this can be on a frequent schedule, or between workers.
 - For surfaces touched by a single worker, this needs to be done periodically, at least once per shift or when unclean, as a minimum.

4. Workers must have facilities for frequent handwashing readily available, including hot and cold (or tepid) running water and soap.

- a. **DOSH staff** must pay particular attention to transient outdoor work, delivery workers and non-fixed worksites where there are no exceptions being granted. Portable wash stations are readily available.
- b. To facilitate more frequent cleaning, secondary handwashing or sanitizing stations can be provided with either hand sanitizer, or wipes/towelettes.
- c. **Gloves may be used to enhance hand hygiene and reduce spread of the COVID-19 virus, but must also be changed or cleaned frequently to be effective for this purpose. (Hand contact with the virus is not the concern. The concern is transferring the virus to the face or other surfaces with the hands. Gloved hands will transfer the virus as effectively as bare hands.)**

- d. Workers must be able to wash their hands after touching any surface/tool suspected of being contaminated, before and after eating and using the restroom, and before touching their face.

5. Sick employee and post- employee illness procedures.

DOSH staff will ensure employers have a program to prevent sick employees from entering the workplace and when recognized, that ill employees are sent home.

- a. Ensure a system for preventing sick employees to be present at work.
- b. Establish a process for deep cleaning after any worker leaves the workplace reporting a suspected or confirmed case of COVID-19.
- c. Thoroughly clean areas where the worker worked or would have stayed more than 10 minutes.
 - Wipe all accessible surfaces
 - Clean up any visible soiling including any smears or streaks.
 - Sanitize common touch surfaces in the vicinity.
- d. Do not allow other workers into these areas until the cleaning is complete.

6. Reopening closed facilities.

- a. The COVID-19 virus is not persistent, so cleaning is only recommended prior to re-occupancy if there were confirmed cases at the time of closure, or if occasional visits by people were made without provisions for cleaning. Enhanced cleaning per this directive must commence at the time of re-occupancy.
- b. Plumbing and other mechanical systems may need to be flushed before full occupancy in a facility.
 - Do a maintenance inspection to look for any issues that have developed during the shutdown.
 - Typically, water taps can simply be turned on until pipes are cleared of stagnant water, with the water allowed to drain directly. Putting some water down floor drains will ensure P-traps are not dry.
 - Arrange for restarting idle HVAC systems prior to full occupancy to clear settled dust and provide an opportunity for maintenance inspection.
 - For production equipment that has been shut down longer than normal, restart SOPs should be reviewed or developed to address any unusual circumstances that could have come about due to the shutdown. Allow for time to troubleshoot systems during the restart. Hold a pre-restart crew meeting to review procedures.
- c. Additional information on procedures for opening buildings can be found in the Department of Health and BOMA guidelines in the reference section.

B. Consider Possible Alternate Strategies.

Some industries may have challenges with basic elements so one or more of the following alternatives may be used to provide protection for workers.

1. Engineering controls can be established and maintained to provide an effective distancing of employees when it is not feasible to fully separate them.
 - a. Barriers must block direct pathways from face to face between individuals, and make it so any indirect air pathways are greater than 6 feet. Sneezes and coughs should not be directed into the air above someone within 6 feet.
 - b. Covers can be used on common touch surfaces that cannot be easily cleaned. The covers may create a cleanable surface, or be something that can be changed out between individuals.
 - c. Ventilation that provides a clean air supply to a worker's breathing zone.
2. Job modifications may be necessary to facilitate appropriate social distancing. Although an operation may be overall part of an essential industry or service, there may be portions of the work which can be deferred until a later time. In some cases, reorganizing the work may be necessary to break up tasks in a manner that facilitates social distancing or other protective measures.
3. Health surveillance can be done to identify early signs of infection, and separate workers who may present a risk to others.
 - a. There will usually be an initial screening and then periodic review (probably daily with COVID-19).
 - b. Initial screening will involve some review of the worker's history that may be relevant to their risk of contracting the disease. This may also include review of the worker's susceptibility to the disease and an education element on the disease and prevention.
 - c. Periodic screening will involve tracking symptoms and ongoing risks for contracting the disease.
 - d. The employer should set up surveillance in consultation with a physician or occupational health nurse and consider having ongoing participation or review by the healthcare professional.
 - e. The employer needs to consult with health professionals and determine whether the program relies on self-reporting by workers or if someone will be actively reviewing worker health on a regular basis.
4. Personal protective equipment may be helpful to prevent transmission of the disease.
5. Face shields can prevent direct exposure to expelled droplets and provide protection from disinfectants.
6. Respirators require care in use and management under a program covered by the Respirator Rule, Chapter 296-842 WAC. Respirators are not normally recommended for social distancing purposes, but may be appropriate where workers must have close proximity to others.

7. Surgical face masks (loose fitting cloth covers over the mouth and nose) do not prevent respiration of fine aerosols and are not protective in close proximity. The primary purpose for these devices are to prevent exposures to others and may have a use when individuals enter the workplace with a cough or sneeze.

C. Evaluate Special Circumstances.

There are situations where strict social distancing may not be generally feasible for employer provided housing and businesses with extensive public interaction. There are also situations where an essential activity worker may be permitted to continue work following potential exposure to COVID-19, to ensure continuity of operations of essential functions. The following sections provide additional considerations which are applicable in these situations.

1. **Employer provided worker housing** is provided by the employer in some circumstances such as agricultural guest workers. (An emergency rule for temporary worker housing has been adopted in WAC 296-307-16102.)
 - a. Workers may have limited control over their environment in some worker housing situations and to the extent that the employer controls conditions, the basic program elements should be maintained as feasible during non-working time.
 - b. Social distancing **must be supported** for occupants during the time workers are housed, which may require additional resources. This includes accommodation of social distancing during cooking, sleeping, and in transportation.
 - c. If strict social distancing is not feasible (including options for dedicated individual or family rooms or offsite accommodations) then health surveillance should be instituted (see above) prior to and during the housing period.
 - d. Housing occupants **must be provided** cleaners and equipment to maintain a hygienic living space.
 - e. **Plans for ill employees must be in place.** If a housing occupant becomes sick:
 - **Employers must provide them with accommodations that are separate from others.**
 - A separate building or room if available, or use barriers or distance to separate them from others.
 - Separate food and bathroom access is also necessary.
 - **Arrangement for medical access.**
 - Telemedicine resources should be utilized first to determine appropriate care.
 - **Provide for transportation**, if necessary in a manner that does not expose others.
 - The employer needs to consult with a physician or public health authority to monitor the situation and provide guidance on treatment and continued housing of all workers.

2. **Frequent customer/public interaction** may be necessary in some places of employment.
 - a. To the extent feasible, establish social distancing with physical systems.
 - Set up tables that position people away from workers.
 - Place pay stations at a safe distance.
 - Install barriers between people.
 - Place markers and lane dividers to encourage appropriate distancing.
 - b. Have managers or floor leads observing individuals in the workplace and prepared to address behaviors that may put workers at risk.
 - c. Provide supplemental washing facilities to allow additional handwashing when workers handle objects after others, such as:
 - Hand sanitizer stations
 - Wipes or towelettes
 - Tepid water and soap in portable containers.

NOTE: Gloves may be provided, but also must be washed regularly to prevent the spread of the virus. This may help for workers whose hands are bothered by frequent washing.

3. **Essential activities workers with potential exposure to a suspected or confirmed COVID-19 case, coming to common workplaces.** These workers may have an infection, but not yet be symptomatic. There is a risk that they could spread the infection to other workers
 - a. Generally, workers who have been exposed will be asked to self-quarantine. CDC updated guidance allows essential activities workers to return to work to ensure continuity of operations of essential functions.
 - A potential exposure means being a household contact or having close contact within 6 feet of an individual with confirmed or suspected COVID-19. The timeframe for having contact with an individual includes the period of time of 48 hours before the individual became symptomatic.
 - Employers must determine whether it is appropriate for the worker to come to the workplace. Other alternatives, such as teleworking or reassigning duties should be considered. If the worker returns to the workplace, there is a potential for exposing other workers in the critical operation.
 - b. Employers of essential activities workers who have had an exposure but remain at the workplace must adhere to the following practices prior to and during each work shift:
 - Pre-Screen: Determine the employee's temperature and assess symptoms prior to them starting work. Ideally, temperature checks should happen before the individual enters the facility.
 - Regular Monitoring: As long as the employee doesn't have a temperature or symptoms, they should self-monitor. The employer's occupational health program must supervise self-monitoring. If the employer does not have an

occupational health program, they may consult with a physician or public health services for guidance on monitoring the worker's health.

- Wear a Mask: The worker should wear a face mask whenever practicable while in the workplace for 14 days after last exposure. Employers can issue facemasks or can approve worker supplied cloth face coverings in the event of shortages.
 - Social Distance: The worker must maintain 6 foot separation and practice social distancing as work duties permit in the workplace. Where duties do not permit social distancing, the employer must institute other controls as practicable to protect other workers. Barriers or fans may be effective in many circumstances.
 - Disinfect and Clean Work Spaces: Clean and disinfect all areas such as offices, bathrooms, common areas, shared electronic equipment routinely.
- c. If the worker becomes sick during the shift, they should be sent home immediately. Surfaces in their workspace should be cleaned and disinfected. Information on persons who had contact with the ill employee during the time the employee had symptoms, and 2 days prior to symptoms, should be compiled. Others at the facility with close contact within 6 feet of the employee during this time would be considered exposed.
- d. Employers considering allowing potentially exposed workers to remain at the workplace should consider the following preparatory actions.
- Workers must not share headsets or other objects that are near the mouth or nose.
 - Employers must increase the frequency of cleaning commonly touched surfaces.
 - Workers and employers should consider pilot testing the use of face masks to ensure they do not interfere with work assignments.
 - Employers should work with facility maintenance staff to increase air exchanges in room.
 - Workers must physically distance themselves when they take breaks together. Stagger breaks and don't congregate in the break room, and don't share food or utensils.

4. Working with people in non-healthcare (human) settings who have suspect or confirmed COVID-19. Generally, this situation should be avoided, using remote services or delaying work until the COVID-19 case is resolved. However, some cases such as emergency repairs in the residence of the patient, emergency pet veterinary services, or delivery of essential goods to the residence may require workers to be in the presence of an ill individual.

- a. Workers must be informed of the individual's health status.
- b. When practicable, the ill individual must wear a medical procedure mask.

- c. Workers must be provided and required to wear a respirator. A half-face elastomeric respirator with N-95 cartridges, or other respirator with the same or higher protection must be used. Fit-testing and other respirator program elements must be complied with. See Chapter 296-842 WAC, Respirators.
- d. Other personal protective equipment such as gloves, aprons, gowns, and head coverings should be considered to prevent contamination of the worker's body or street clothes. Handwashing and other hygiene resources must be available to the worker as needed during the work and at the conclusion.

D. Evaluation of respiratory protection for COVID-19 protection in healthcare when not treating suspect or known COVID-19 patients.

Healthcare facilities must follow social distancing guidelines including general provisions and any specific requirements set by the Governor. It is expected that all healthcare practitioners will follow Universal or Standard Precautions, or equivalent protocols to address infection control for all infectious diseases. The following specific requirements may be evaluated by DOSH staff when considering COVID-19 hazards:

1. Patient rules and masking.

- a. Evaluate patients at the time appointments are made and when arriving for signs and symptoms of COVID-19. If a patient is determined to have suspected or confirmed COVID-19, they should be asked to postpone medical treatment when appropriate and referred to healthcare providers for evaluation and treatment of their COVID-19.
- b. Patients and visitors to the medical facility must be required to wear cloth face coverings or other appropriate masks in the facility as practicable. Exceptions may be allowed for patients with conditions that may be aggravated by mask use or patients who have difficulty remaining masked due to mental acuity or youth.
- c. Masks may be removed briefly to facilitate specific examination elements for which they interfere. The procedures for the exam must minimize the period without the mask and time the medical workers must be in close proximity of the patient without a mask. In particular, face-to-face positioning of the patient and medical worker must be limited as practicable.

2. Worker masking and respiratory protection.

- a. Workers must wear, at minimum, cloth face coverings or procedure masks whenever working with others.
- b. Workers within 3 feet of a patient or equipment during an aerosol generating procedure must wear a fit-tested N95 filtering facepiece respirator or more protective respirator. (Particulate filters with any N, R, or P and 95, 99, or 100 rating are protective against the COVID-19 virus.) Examples of aerosol generating procedures include:
 - Dental work with an ultrasonic scaler, air/water syringe, or hand piece
 - Administering medicines with a nebulizer
 - Spirometry
 - Deep or forced breathing exercises

c. Employers must evaluate other procedures workers conduct involving close proximity to the patient breathing zone. Where workers have limited time of exposure (less than half hour per day), patients are effectively masked during the procedures, and room conditions include effective ventilation and hygiene, respirators may not be required. A surgical mask must be used when a respirator is not required. Examples of procedures that must be evaluated include:

- Tonometry during eye exams
- Visual examination of the oral and nasal cavities
- Visual examination of the eyes
- Swab sampling in the mouth or nose

3. Evaluation of PPE other than respirators

- a. Other personal protective equipment, such as gloves, gowns, face shields, and head covers, generally will be determined based on general clinical guidelines.
- b. When there is a procedure which could predictably result in coughing or sneezing by the patient which could directly expose the worker, DOSH staff will review PPE to ensure it covers the workers body and street clothes and prevent soaking through. Scrubs may be worn as PPE if the employer allows workers to change out at the end of shift and launders the clothing.
- c. Medical establishments may be required to meet health department or FDA standards for PPE. Compliance with these standards is not addressed by DOSH staff.

V. Enforcement Policy

Inspection findings will be reviewed on a case by case basis. Conditions related to COVID-19 and the virus are still emerging. Public health recommendations and orders are being regularly revised, and so any compliance action must take into consideration current understanding of the situation and current rules and guides.

A. Accident Prevention Programs.

1. Employers are not expected to have comprehensive COVID-19 prevention programs at this point. In conducting program reviews, DOSH staff must look at all documents used by the employer to communicate with workers to determine their overall program.
2. Where the employer is clearly implementing recommendations of the public health authorities, they do not need additional documentation of their program, except for program documentation specified in public health orders or Governor's "Safe Start" phased guidelines for industries or general requirements. Any variation from strict social distancing, the governor's programs, or health department guidelines must be clearly communicated in a written program. (Note that participating in early phases of the restart may be dependent on strictly following the industry specific requirements and guidance. Activities that cannot do so, must wait for a later phase to resume.)
3. Violations of the sections of WAC 296-800-140, Accident Prevention Program, should be considered where the employer does not communicate workplace specific expectations to workers or is not effective in implementing those expectations.

4. Serious violations should specifically be considered in cases where the employer adopts practices or policies that clearly contradict the goals of coronavirus prevention practices published by DOSH, OSHA or public health recommendations.
5. Accident prevention program violations must follow instructions in the Compliance Manual.

B. Housekeeping.

Where a workplace is not being cleaned and kept sanitary per public health guidance, a violation of WAC 296-800-22005, *Keep your workplace clean*, may be considered. A serious classification should be strongly considered.

C. Handwashing.

1. There is a requirement for handwashing facilities that applies to all workplaces at all times. A serious and potential willful violation of WAC 296-800-23025, *Provide convenient and clean washing facilities*, will be considered whenever workers do not have basic handwashing facilities available at all, or they are grossly inadequate in either number or maintenance.
2. Where employers cannot provide unlimited access to full handwashing facilities at all times, they **must provide alternate means** for frequent hand cleaning. A serious classification should be strongly considered if not adequate to achieve prevention. This is specifically necessary where workers regularly handle or touch objects or surfaces touched by others. Alternate hand cleaning may include:
 - a. Portable wash stations with tepid water and soap.
 - b. Wipes or towelettes with water and soap.
 - c. Hand sanitizer stations.

D. Exposure to Biological Hazards.

1. Workplace conditions which have a direct potential for worker exposure to the COVID-19 virus may be cited under WAC 296-800-11045, *Protect employees from biological agents*. This is the primary WAC code to be used for social distancing practice violations. This may include situations such as ineffective barrier or ventilation systems, or specifically allowing workers to be in close proximity, but where there is no written record of a policy or management decision. **Masking violations requiring devices not normally considered respirators may be cited under this section (cloth face coverings or medical procedure masks).**
2. Violations of this section are safe place violations in that they must be serious in classification and must follow the Compliance Manual instructions for safe place.

E. Respirator violations.

Violations involving proper use of respirators, including N95 filtering facepieces, PAPRs, and elastomeric facepiece respirators will normally be cited from Chapter 296-842 WAC, Respirators. When these devices are used in place of a cloth face covering or medical procedure mask due to social distancing rules from public health authorities or the governor, the use will be considered voluntary use for compliance purposes. Protection from contaminated aerosols is required use.

F. Temporary Farmworker Housing.


Temporary worker housing in agriculture is covered under Chapter 296-307 WAC, Part L, *Temporary Worker Housing and Cherry Harvest Camps*. This rule has specific requirements for hygiene facilities and housekeeping. Employers must in general achieve adequate social distancing; frequent handwashing during work; sanitation practices during work; sufficient disinfection supplies in housing; and sick employee practices outlined above. Consult with Technical Services and Compliance Operations on application of these rules when there is a COVID-19 concern.

VI. Point of Contact

DOSH staff should contact Compliance Operations if there are questions about applicability of WISHA rules to an infectious disease in the workplace. Technical Services may be contacted with technical questions about workplace practices.

VII. Review and Expiration

DOSH will review this Directive, and it will remain effective until superseded or canceled.

Approved: 

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Division of Occupational Safety and Health