

# City of Columbus COVID-19 Safe Work Practice Guidance

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## Purpose

The purpose of this Safe Work Practice is to:

- Reduce the likelihood that all employees, visitors and volunteers will become infected by those with a contagious airborne or droplet-transmitted disease.
- Increase the City of Columbus’s ability to continue its core missions and return to normal operations in a timely manner.
- Minimize the disruption and impact on employee’s lives that occur with pandemics, epidemics, and other respiratory illness outbreaks.
- Maintain consistency with OSHA Guidance on Mitigating and Preventing the Spread of COVID-19 in the Workplace for non-health care employees.

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## Objective

The objective of this guidance is reducing the spread of infection by implementing safe work practices that will help reduce transmission by decreasing contact between sick and uninfected persons in the workplace.

**Please note** – this is a quickly-evolving pandemic and recommendations in work practices are subject to change quickly if recommendations from Centers for Disease Control, the Occupational Safety and Health Administration, Ohio Department of Health, Columbus Public Health, Citywide Occupational Safety and Health Program, or your Department/Division change.

Because of the nature of any respiratory illnesses, the object is to focus on educating and protecting employees as well as curtailing the spread of the disease. Employee protection and service delivery can be achieved through a combination of infection control methods and the use of personal preventive measures and equipment.

**This document is a best management practice designed to supplement, NOT REPLACE, any Mayor’s Executive Orders or Policies, or any Department/Division policies, procedures, or guidance.**

## Daily Health Monitoring and Face Coverings

### Required daily self-monitoring (at home)

This applies to all City of Columbus employees who will be reporting to work. Prior to coming to work each day, employees must self-evaluate for the below symptoms.

**If you have the symptoms below, do not report to work.** Call your supervisor and your health care provider. Supervisors should contact their Department/Division Human Resources Officer/Manager. If you do not have a health care provider, call your local health department. Columbus Public Health COVID-19 hotline is 614-645-1519.

### ***Any of the following symptoms:***

- **Fever** (Fever is  $\geq 100.4^{\circ}\text{F}$ )
- **Cough** (new or worsening)
- **Shortness of breath or difficulty breathing**
- **Fatigue**
- **Headache**
- **Congestion or runny nose** (new or worsening)
- **Nausea or vomiting**
- **Diarrhea**
- **Chills**
- **Muscle pain**
- **Sore throat**
- **New loss of taste or smell**

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## Department/Division health screenings and face coverings

**All City of Columbus employees and visitors to city buildings are required to wear a face covering, regardless of vaccination status.** Masks are required if you are working in an office around others and if you are in a communal space with others.

If you work in a healthcare setting – please follow the face covering and PPE requirements of your appointing authority; which may be different or more stringent in some circumstances.

Upon arrival to work, the Department must screen employees with the below questions. This screening process may occur in a variety of ways; however, the employee cannot begin work until the health assessment is completed. For privacy purposes, documentation of the screening process should not include whether or not an employee passed or failed the test, just whether the employee was screened with the below questions. The COVID-19 screening process that occurs when an employee logs into the City of Columbus network DOES fulfill the work health screening requirement. The health assessment no longer includes taking temperatures of employees at the work site.

Questions:

- When you took your temperature at home prior to coming to work, did you have a fever?
  - Fever is  $\geq 100.4^{\circ}\text{F}$
- Are you experiencing shortness of breath, difficulty breathing, or **do you have a new or worsening** cough?
- Are you experiencing any of the following symptoms: chills, muscle **or body** aches, sore throat, fatigue, headache, runny nose or congestion (new or worsening), nausea or vomiting, diarrhea, or new loss of taste or smell?
- Are you, anyone residing in your household, or anyone who you were within 6 feet of for at least 15 minutes in a 24 hour period (regardless of PPE use or other preventive measures):
  - currently being tested for COVID-19 after having developed symptoms, at the recommendation of a healthcare provider or local health department or in follow up to exposure to a person with COVID-19; or
  - clinically diagnosed with COVID-19 by a healthcare provider?

NOTE: You or someone in your home who is asymptomatic and being tested for COVID-19 in preparation for a medical procedure or for travel or simply for peace of mind would NOT disqualify you from reporting to work.

If the employee answers “Yes” to any of the questions above they should be sent home immediately\*. The employee’s supervisor should contact your Department/Division Human Resources representative to notify them of any employees sent home or needing to remain at home due to responding yes to these questions. Please refer to City of Columbus Employees COVID-19 FAQs (FAQ #16) for return to work guidance after answering “Yes” to any of the health screening questions.

\*Exceptions for staying home/quarantine after close contact with someone with COVID-19:

1. An employee who meets the below criteria does NOT need to quarantine:

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- Had COVID-19 illness within the previous 3 months **and**
  - Has recovered **and**
  - Remains without COVID-19 symptoms (for example, cough, shortness of breath). \*Loss of taste and smell may persist for weeks or months after recovery
2. An employee who meets the below criteria does NOT need to quarantine:
- Is fully vaccinated (i.e., 2 weeks or more following receipt of the second dose in a 2-dose series, or 2 weeks or more following receipt of one dose of a single-dose vaccine), **and**
  - Is showing no symptoms of COVID-19.
  - NOTE: fully vaccinated people should get tested 3-5 days after their exposure (even they don't have symptoms) AND shall wear a mask indoors in public for 14 days following exposure or until their test result is negative.
  - ***Employee may be asked to provide CDC COVID-19 vaccination card for verification of vaccination dates.***

If an employee has a confirmed positive test for COVID-19: Initiate the COVID-19 Flow Chart. Refer to the applicable flow chart to screen employees – there is a separate flow chart for critical Infrastructure and non-critical infrastructure employees.

### **Visitors**

To reduce the spread of COVID-19, visitors are required to wear face coverings, unless an exemption applies, in public buildings and indoor facilities. Post signage to City of Columbus buildings where the public may enter that requires the use of face coverings. Additionally, continue to post signage asking the public NOT to enter if they are experiencing symptoms of illness.

### **City of Columbus Safe Work Practices**

NOTE: The City of Columbus COVID-19 Safe Work Practices listed below are consistent with OSHA guidance: Protecting Workers: Guidance on Mitigating and Preventing the Spread of COVID-19 in the Workplace. City of Columbus employees who are considered healthcare employees will have additional requirements as a part of the OSHA COVID-19 Healthcare Emergency Temporary Standard. These additional requirements are developed within the Departments that have healthcare employees.

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## Time, Distance, and Shielding

- **Six feet (6') of social distancing** continues to be **highly recommended** in the workplace to prevent COVID-19 infections.
- Consider moving or reorienting workstations so employees can be spaced 6' from each other and do not face each other, particularly if there are no barriers between employees.
- Examine each task that is performed by City employees and determine how the task can be performed using distancing, technology, barriers, or other means to prevent or limit employees from being within 6 feet of another employee or member of the public.
- Stagger work shifts, allow flexible work hours, and continue to allow telework, when possible, to decrease the amount of people working in the same work space at the same time.
- Consider cross-training employees to perform essential functions so the workplace can operate even if key employees are absent.
- Be aware that some employees may be at higher risk for serious illness, such as older adults and those with chronic medical conditions. Consider minimizing face-to-face contact between these employees or assign work tasks that allow them to maintain a distance of six feet from other workers, customers and visitors, or to telework if possible.
- Continue to limit in-person or face to face meetings when virtual options are possible, even if all parties are physically in the workplace.
  - If necessary to have in person meetings, choose a large room for meetings and sit at least 6 feet away from each other.
- Avoid large gatherings when possible.
- Create drop off availability for documents when electronic submittal is not possible. When possible, request information via telephone/email/fax.
- If repeated contact with people who are ill is unavoidable, take precautionary measures (examples include, using a teller window, physical barrier which maintains a distance of 6 feet, other person dons surgical mask to prevent droplet).

## Hygiene Practices

- Discourage workers from using other workers' phones, desks, offices, or other work tools and equipment, when possible
- Remove or redirect personal fans to prevent blowing air from one worker to another.
- Disinfect shared work surfaces between uses.
- Wash hands frequently with soap and water or alcohol based hand cleaners, especially after coughing or sneezing and before smoking or eating. Avoid touching your face/ mouth/nose/eyes.
- Hand sanitizer: Should be at least 60% or greater alcohol content.
- Use cough and sneeze etiquette: cough and sneeze into your inner elbow or arm to reduce droplets. If you contaminate your hands with a cough or sneeze, immediately wash your hands with soap and water or use sanitizer if hand washing is not available.

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## Cleaning/disinfecting practices

- Establish a cleaning schedule in your work station/area if you don't already have one. Pay particular attention to high-touch surface areas. Shared work surfaces should be cleaned/sanitized between uses.
- When no people with confirmed or suspected COVID-19 are known to have been in a space, cleaning once a day is usually enough to sufficiently remove virus that may be on surfaces and help maintain a healthy facility.
  - Cleaning with products containing soap or detergent reduces germs on surfaces by removing contaminants and may also weaken or damage some of the virus particles, which decreases risk of infection from surfaces.
  - Disinfecting (using EPA's List N) kills any remaining germs on surfaces, which further reduces any risk of spreading infection.
- In most cases, fogging, fumigation, and wide-area or electrostatic spraying is not recommended as a primary method of surface disinfection
- As a recommended best practice, maintain 3 weeks of cleaning supplies.
- If an employee becomes symptomatic while at work, or if there has been a sick person or someone who tested positive for COVID-19 in the facility within the last 24 hours, isolate or remove the employee immediately and contact the department human resources officer. Keep employees away from the ill employee's work area until a cleaning and disinfection can be performed.
  - **Contact custodial/facility management for your building when there is/has been an ill person in the workplace. Do not wait for a positive test result.**
  - Refer to the CDC's Coronavirus cleaning and disinfecting guidelines: <https://www.cdc.gov/coronavirus/2019-ncov/community/disinfecting-building-facility.html>.
  - **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.
  - **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 (beyond regular cleaning practices) is needed.

## Facility/Building Considerations

- Post signage at City buildings that directs visitors NOT to enter if they are experiencing COVID-19 symptoms. Consider posting these signs in multiple languages, where needed.
- Signage on COVID-19 related health and safety guidelines are required in common areas. Examples can be found on the CDC website.
- Conference rooms should have a reduced maximum capacity. To allow for 6 feet distancing, we highly recommend the following:
  - 6' distancing between each person/seat is highly recommended.
  - Remove all additional seating in the conference room.



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- Post room configuration and notice not to adjust seating (this can be as simple as a hand drawn diagram).
- Post the new maximum capacity outside of the conference room.
- Consider improving the engineering controls using the building ventilation system. This may include some or all of the following activities<sup>1</sup>:
  - Increase outdoor air ventilation (disable demand-controlled ventilation and open outdoor air dampers as much as possible as indoor and outdoor conditions permit).
  - Increasing ventilation with all or mostly outside air may not always be possible or practical. In such cases, the effective rate of ventilation per person can also be increased by limiting the number of people present in the building in general, or in specific rooms.
  - Consider updating or replacing existing HVAC air filtration to a minimum of MERV 13 **or the highest compatible with the filter rack**, and seal edges of the filter to limit by-pass. Make sure the air handling systems and fans can overcome the additional pressure drop of the new filters and still maintain air flow at acceptable levels.
  - Keep HVAC systems running longer hours (24/7 if possible).
  - Consider adding portable room air cleaners with HEPA or high-MERV filters in locations where:
    - Filter efficiency cannot be increased in the HVAC system, and/or
    - Fresh air levels in the HVAC system do not exist or cannot be increased, and/or
    - There is a high concentration of employees in an area that cannot be decreased (i.e., call centers, open sleeping quarters, large cubicle areas).
  - Portable air cleaners and HVAC filters can reduce indoor air pollutants, including viruses. By themselves, portable air cleaners and HVAC filters are not enough to protect people from the virus that causes COVID-19. When used along with other best practices recommended by CDC and others, filtration can be part of a plan to protect people indoors.
  - Consider bypassing energy recovery ventilation systems that leak potentially contaminated exhaust air back into the outdoor air supply.
  - Consider opening windows as an enhancement for outside air, especially when the system cannot accommodate MERV-13 filter or 100% outside air.
  - When changing HVAC or portable HEPA unit filters, wear appropriate personal protective equipment. ASHRAE recommends N95 respirators, eye protection (safety glasses, goggles, or face shields), and disposable gloves.
  - Make sure exhaust fans in restrooms are fully functional, operating at maximum capacity, and are set to remain on.
- Prevent cross contamination at drinking fountains by following the below steps:
  - Consider disabling or marking closed drinking fountains that do not have bottle filling capabilities.
  - Consider disabling or marking closed the drinking spout on drinking fountains with bottle filling capabilities, if present.
  - Automated bottle filling stations can remain unchanged.
- Prevent cross contamination at ice machines by following the below steps:

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<sup>1</sup> American Society of Heating, Refrigeration, and Air Conditioning Engineers (ASHRAE) Position Document on Infectious Aerosols, April 14, 2020 and ASHRAE COVID-19 Technical Resources for Commercial and Office Buildings (<https://www.ashrae.org/technical-resources/commercial#general>)

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- Keep ice bin doors closed when not in use.
- Employees must wash their hands, or use hand sanitizer if handwashing facilities are not immediately available, before accessing the ice machine.
- Utilize a scoop to dispense ice.
- Ice scoops should be stored outside the ice bin, unless the bin is equipped with scoop storage inside the bin. The ice scoop should not be stored on/touching the ice.
- Don disposable gloves before handling the ice scoop and properly remove and dispose of gloves following use.
- Ice scoop should not touch the surface/rim of a personal drinking container.
- Ice scoops must be cleaned/disinfected daily. Ice scoops are considered food contact surfaces and disinfectant used should be approved for food contact surfaces. Please refer to the disinfectant manufacturer instructions to ensure the chemical is safe for food contact surfaces and to determine proper preparation of disinfecting solution.

### Additional Guidelines for Field Work

- Employees riding in vehicles together should be minimized to the best extent feasible. If employees are riding together in vehicles, face coverings must be worn and employees should be as distanced as possible. All windows should be kept as open as possible whenever more than 1 employee is riding in the vehicle. Additionally, the car ventilation should be kept on 100% fresh air and not on the recirculation function.
- Whenever possible, continue to limit City business inside anyone's home or business.
- Any City business that will occur within someone's home should first be triaged by phone to determine:
  - If the site visit is necessary.
  - If anyone in the home is experiencing any symptoms of illness (fever, or other flu-like symptoms)
    - If they answer no to illness symptoms, let the citizen know that the City of Columbus employee will ask those questions again upon arrival and if anyone in the home is experiencing those symptoms the need for the home visit will be re-evaluated.
- During an in-home visit:
  - Upon arrival and before entering the home, put on your face covering and ask again if anyone in the home is experiencing any symptoms of illness. If they are – reach out to your supervisor to determine if the visit will move forward.
  - If you continue with the visit – let the homeowner or client know that as a precautionary measure you will be asking anyone in the room with you to maintain a 6' distance.
  - Hand Hygiene: Hand sanitizer or hand wipes should be used prior to entering the home or business. Gloves are also recommended, particularly if you will be touching anything in the home or business.
    - As much as possible, do not touch anything.
    - Do not touch your face, mouth, nose, or eyes while in the home or business.
    - Do not shake hands with the resident or client and do not share pens or other equipment.
    - If worn, remove gloves upon exiting in a manner that does not contaminate the hands.
    - Use care when removing your face covering to not touch the exterior of the mask.



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- Perform hand hygiene with hand sanitizer or wipes upon exiting. Wash hands with soap and water as soon as possible.
- If an in-home or in-business inspection **MUST** be conducted at a location of someone who is exhibiting flu-like symptoms or other similar symptoms of illness additional personal protective equipment will be required, **PLEASE SEEK THE GUIDANCE FROM YOUR DEPARTMENT/DIVISION SAFETY PROFESSIONAL PRIOR TO CONDUCTING THE IN-HOME OR IN-BUSINESS VISIT.**

The Citywide Occupational Safety and Health Program is available for guidance in determining appropriate measures, if requested.

## Personal Protective Equipment (PPE) and Face Coverings

**Except when an exception applies, a face covering is required** if you are working in an office around others and if you are in a communal space with others and should be donned prior to entering your work building or work space. A face covering can be a cloth face covering or a surgical mask and its purpose is to reduce exhaled droplets. Face coverings play an important role in preventing the spread of COVID-19. Although vaccines are **highly effective** against severe illness and death from COVID-19, the delta variant causes more infections and spreads much more easily than previous variants of the virus. Additionally, recent studies have shown that vaccinated individuals who have breakthrough infections, though largely mild in nature, can still transmit the virus.

When the community has high or substantial transmission of COVID-19, it is even more critical to wear a face covering - even if you are fully vaccinated – because of an increase of breakthrough infections.

Please note: If you work in a healthcare setting – please follow the face covering and PPE requirements of your appointing authority; which may be different or more stringent in some circumstances.

To reflect CDC guidance, a face shield is not permitted to be used in lieu of a face covering unless the employee has a written exception documented on a face covering exception form. Updated CDC guidance allows for the use of a neck gaiter as a face covering IF the neck gaiter is at least 2-layers or is folded to create 2 layers.

Masks (or N95 respirators) with exhalation valves or vents are NOT recommended as they do not adequately prevent the person wearing the mask from spreading COVID-19 to others. If an N95 respirator with an exhalation valve must be worn because there are no alternatives, it should have an additional face covering or surgical mask over it covering the exhalation valve. Additional safety measures may need to be taken, including more frequent breaks, in instances where heat stress is a concern. Please note – face coverings with exhalation valves (vented) are NOT permitted.

If a Department will allow a face covering exception for a particular task, **the Department must provide written justification** (instructions attached to this guidance) upon request, explaining why an employee is not required to wear a facial covering in the workplace

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Face covering exceptions (including possible City of Columbus employee examples) are as follows:

- An employee in a particular position is prohibited by a law or regulation from wearing a face covering while on the job
- A face covering is not advisable for health purposes
- Wearing a face covering on the job is against documented industry best practice
- Wearing a face covering violates a company's safety policies
- There is a practical reason a face covering cannot be worn
  - Individuals while acting in their official capacity as a public safety employee or emergency responder when wearing a face covering would interfere with or limit their ability to carry out their official duties or functions, outside of an office or business-type setting. These include police officers, firefighters and other public safety or emergency medical personnel that support public safety functions;
  - Employees working in the heat or other instances where the mask presents an additional health risk (where distancing or other control measures can be implemented) and where the mask would become soaked with sweat.
  - Employees are already wearing a respirator for job task
- An employee is actively eating or drinking during break or lunch times.
- An employee is sitting alone in an enclosed work-space.
  - Employees working in offices, working alone in vehicles, working alone operating in the cab of equipment, lawn mowing. Face covering must be donned as soon as the employee exits their office, work space, or exits their vehicle or piece of equipment.

Please see the end of this guidance document for more information regarding cloth face coverings, their limitations, how to clean them, and tips for making cloth face coverings. Employees can bring in and wear their own cloth face coverings but they must not contain any inappropriate, offensive, or political pictures or language.

Please refer to your Department/Division safety professional for any additional guidance regarding PPE. Department/Division safety professionals can contact Citywide Occupational Safety and Health for further guidance.

## Reporting Guidelines

Stay home when you are sick. Do not report to work if experiencing a fever, respiratory illness, or flu like symptoms. Please see above for monitoring guidance.

If an employee becomes symptomatic while at work, isolate or remove the employee immediately and contact your department/division human resources officer **and custodial/facility management for cleaning**.

Refer to PO23-1 *Coronavirus Disease 2019 (COVID-19) Workplace Policy* (or updated version) distributed by the Mayor's Office on March 12, 2020 and the Department of Human Resources Q&As.

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## Face Covering Exception Justification Form

If employees within your work place are not able to wear face coverings, you must complete a written justification for the exception. Complete for **EACH PERSON/TASK where a face covering is required but cannot be worn. Please note: if an employee is exempted from wearing a face covering for health purposes additional measures may need to be taken to protect the employees working around that exempted employee. A potential alternative would be a plastic face shield. If there are no alternatives for the employee, contact your Department/Division Human Resources.**

- Each exception must be approved by the Department/Division safety professional
- A copy of each exception must be sent to the department/division human resources office AND Citywide Occupational Safety and Health Program ([jnmorgan@columbus.gov](mailto:jnmorgan@columbus.gov))

Department		Division	
Work Group/Area		Date of assessment	
Location of Work Group			
Task or employee name to be exempted			
Reason for exception: CHECK BOX(ES) that apply		Description of task and why it meets criteria for exception	
<input type="checkbox"/>	An employee in a particular position is prohibited by a law or regulation from wearing a face covering while on the job		
<input type="checkbox"/>	A face covering is not advisable for health purposes		
<input type="checkbox"/>	Wearing a face covering on the job is against documented industry best practice		
<input type="checkbox"/>	Wearing a face covering violates a company's safety policies		
<input type="checkbox"/>	There is a practical reason a face covering cannot be worn		
Approved by:			
Title:			
Date of approval:			

# City of Columbus COVID-19 Safe Work Practice Guidance

## Use of Cloth Face Coverings to Help Slow the Spread of COVID-19 (updated V18)

Vaccines are **highly effective** against severe illness and death from COVID-19. However, the COVID-19 delta variant causes more infections and spreads much more easily than previous variants of the virus. Additionally, recent studies have shown that vaccinated individuals who have breakthrough infections, though largely mild in nature, can still transmit the virus.

We know that a significant portion of individuals with coronavirus lack symptoms (“asymptomatic”) and that even those who eventually develop symptoms (“pre-symptomatic”) can transmit the virus to others before showing symptoms. This means that the virus can spread between people interacting in close proximity—for example, speaking, coughing, or sneezing—even if those people are not exhibiting symptoms. While the community has made great strides in vaccination efforts – many in our community are not fully vaccinated.

It is critical to emphasize that maintaining 6-foot social distancing remains important to slowing the spread of the virus. A face covering can be a cloth face covering or a surgical mask and its purpose is to reduce exhaled droplets in crowded settings when controls like physical distancing cannot be maintained. Face coverings play an important role in preventing the spread of COVID-19. A layered approach to preventing exposures to coronavirus, including face coverings combined with social distancing, barriers, proper hand hygiene, and other prevention measures, provides the best protection from COVID-19.

Cloth face coverings should have two or more layers to stop the spread of COVID-19. Updated CDC guidance allows for the use of a neck gaiter as a face covering IF the neck gaiter is at least 2-layers or is folded to create 2 layers.

Cloth face coverings fashioned from household items or made at home from common materials at low cost can be used.

Cloth face coverings are not surgical masks or N-95 respirators.

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## How to Wear a Cloth Face Covering



*DO NOT place cloth face coverings on children under age 2, anyone who has trouble breathing, or is unconscious, incapacitated or otherwise unable to remove the mask without assistance.*

Cloth face coverings should—

- Fit snugly but comfortably against the side of the face
- Be secured with ties or ear loops
- Include multiple layers of fabric
- Allow for breathing without restriction
- Be able to be laundered and dried without damage or change to shape

## Additional Cloth and Surgical Mask Fit Guidance

New guidance from the CDC includes **recommendations** for ensuring the proper fit of a cloth/surgical mask as well as, in some cases, doubling up on masks to provide additional protection. Please see the below list of guidelines from the CDC (<https://www.cdc.gov/coronavirus/2019-ncov/your-health/effective-masks.html>).

### **DO:** Choose a mask with a **Nose Wire**

- A nose wire is a metal strip along the top of the mask
- Nose wires prevent air from leaking out of the top of the mask.
- Bend the nose wire over your nose to fit close to your face.



### **DO:** Use a **Mask Fitter or Brace**

- Use a mask fitter or brace over a disposable mask or a cloth mask to prevent air from leaking around the edges of the mask.



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**DO:** Check that it **Fits Snugly** over your nose, mouth, and chin

- Check for gaps by cupping your hands around the outside edges of the mask.
- Make sure no air is flowing from the area near your eyes or from the sides of the mask.
- If the mask has a good fit, you will feel warm air come through the front of the mask and may be able to see the mask material move in and out with each breath.



**DO:** Add **Layers** of material

2 ways to layer

- Use a cloth mask that has multiple layers of fabric.
- Wear one disposable mask underneath a cloth mask.
  - The second mask should push the edges of the inner mask against your face.



**Make sure you can see and breathe easily**

**DO:** **Knot and Tuck** ear loops of a 3-ply mask

- Knot the ear loops of a 3-ply face mask where they join the edge of the mask
- Fold and tuck the unneeded material under the edges
- For video instructions, see: <https://youtu.be/UANi8Cc71A0>



**DO NOT:** Combine 2 disposable masks.

- Disposable masks are not designed to fit tightly and wearing more than one will not improve fit.

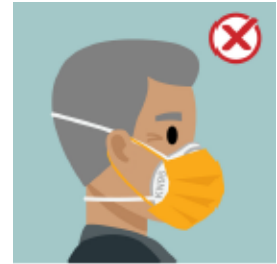




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**DO NOT:** Combine a KN95 mask with any other mask.

- Only use one KN95 mask at a time.



## DIY Face Coverings

- Employees can bring in and wear their own cloth face coverings but they must not contain any inappropriate, offensive, or political pictures or language.
- Use tightly woven fabric (preferably cloth that lets minimal light shine through) such as quilting cloth and ensure multiple layers of fabric are used. If you need to buy materials, consider purchasing online to avoid public places.
- Review the above face covering guidelines so your face covering is meeting the updated, more protective guidelines.
- The CDC offers instructions on creating a no-sew face covering out of a T-shirt; or out of a bandanna, coffee filter, and rubber bands. You will also need scissors.

Can cloth face coverings be reused?

- Yes. Cloth face coverings can be re-used until they are no longer in good condition (i.e., loss of elasticity, degraded, material wearing thin or holes/cuts in material, heavily soiled and cannot be cleaned)

Should cloth face coverings be washed or otherwise cleaned regularly? How regularly?

- Yes. They should be washed daily using hot water.

How does one safely sterilize/clean a cloth face covering?

- A washing machine should suffice in properly washing a face covering.

How does one safely remove a used cloth face covering?

- Be careful not to touch your eyes, nose, and mouth when removing a face covering and wash hands or use hand sanitizer immediately after removing.

For more information on DIY face coverings please visit the CDC website for more guidance:

<https://www.cdc.gov/coronavirus/2019-ncov/prevent-getting-sick/diy-cloth-face-coverings.html>

# City of Columbus COVID-19 Safe Work Practice Guidance

## Guidance for Limited Reuse of N95 Respirators and Surgical Facemasks

NOTE: This guidance is NOT designed for the use of cloth face coverings for general public health (please see above). This guidance is for City of Columbus employees who wear a respirator or surgical face mask for occupational exposure prevention.

This following is based on guidance from the CDC for healthcare workers regarding the reuse of N-95 respirators and facemasks. For guidance regarding extended use for respirators please refer to the Centers for Disease Control website. Reuse is permitted provided that the respiratory protection is free of contamination, still maintains its fit and function, and for reuse, can be stored appropriately to prevent contamination and damage in between uses.

Reuse should not be considered unless the current amount of N95s or surgical masks on hand will not last (based on current use) until more N95s or surgical masks can be ordered or if the resupply of the items is unknown.

Guidance for reuse of N95 respirators for Healthcare Professionals (HCP) is as follows:

HCP performing aerosol generating procedures or surgery should replace their N95 respirator after each patient encounter. For HCP not performing the above mentioned procedures, N95 respirators should be disposed of at the end of each work day.

For non-healthcare professionals, guidance for the reuse of N95s or surgical masks is as follows:

Based on CDC recommendations, the number of donnings (number of times you can put on) for an N95 respirator or surgical mask is limited to **no more than five per respirator**.

Always perform hand hygiene before and after touching, adjusting, donning, or doffing the respiratory protection. Regardless of extended use or reuse N-95 respirators and facemasks must only be used by a single wearer.

### **Basic practices when considering re-use of disposable respirators or surgical face masks:**

- Minimize the number of individuals who need to use respiratory protection by using engineering and administrative controls where possible;
- Use alternatives to N95 respirators that can be cleaned and re-used (e.g., other classes of filtering facepiece respirators, elastomeric half-mask and full facepiece air purifying respirators, powered air purifying respirators) where feasible;
- Ensure all employees who may re-use N95 respirators or surgical masks receive proper training.

### **Reuse Recommendations for N95 respirator or surgical face mask**

- Limit potential surface contamination. Minimize unnecessary contact with the respirator surface, particularly the inside of the respirator or facemask.
- Discard if gross contamination occurs (i.e., sneezed on, coughed on, other gross contamination).

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- Perform hand hygiene with soap and water or an alcohol-based hand sanitizer before and after touching or adjusting the respirator or mask (if necessary for comfort or to maintain fit).
- Hang used respirators and masks in a designated storage area or keep them in a clean, Ziploc container (kept open for air) between uses. To minimize potential cross-contamination, store so that they do not touch each other and the person using the respirator or face mask is clearly identified. Storage containers should be disposed of or cleaned regularly.
- Ensure the respirator or surgical mask is sitting comfortably on your face with a good seal.
- Discard any respirator or mask that is obviously damaged or becomes hard to breathe through.
- Respirators and facemasks must only be used by a single wearer.
- Do not attempt to self-sanitize your N95 respirator or face mask. Doing so could degrade the respirator or surgical mask or cause injury.