Cal/OSHA Guidance for Employers and Employees
Regarding Recent H1N1 (Swine Flu) Cases

UPDATED July 15, 2009—In April, a novel type A influenza virus, H1N1 (swine flu) emerged as a significant disease in Mexico. Laboratory-confirmed cases have now been found in more than 70 countries. There have been 211 deaths related to this infection in the U.S., with 31 reported in California.

The U.S. Centers for Disease Control and Prevention have confirmed 37,246 cases in the U.S. including 2,461 cases in California. These numbers do not include all outpatient cases, since public health agencies are no longer requesting that healthcare providers test most patients suspected of being infected with this H1N1 swine origin influenza A virus (S-OIV) and are focusing testing on hospitalized patients, healthcare workers, and other patients of epidemiologic interest. The World Health Organization has determined that this virus has shown “sustained” human to human transmission and has upgraded the pandemic alert level to 6 on a scale of 6. A Phase 6 designation indicates that a global pandemic is underway. (A pandemic is an infectious disease outbreak that affects many countries.) A national public health emergency has been declared. This emergency declaration allows state and local governments access to national resources, such as stockpiled drugs, medical equipment, and personal protective equipment. There is currently no vaccine to protect against this virus. Therefore it is important that other preventive measures be used to protect employees.

Although it is still unclear as to how severe this disease will become, and whether this disease will be widespread, all California employers are encouraged to review their strategies for protecting the health of their employees, including their pandemic flu or other emergency plans. Employers should take this opportunity to update their plans and to train their employees. Local health departments can provide up-to-date local information and resources. Employers whose employees have significant public contact should review their procedures for reducing risks.

Federal OSHA has added several documents to their website which provide specific advice regarding H1N1 and pandemic influenza. These can be found at www.osha.gov, under the heading “In Focus.” Additional information on how businesses can plan for pandemic flu can be found at: http://www.osha.gov/Publications/influenza_pandemic.html
Health Care and Higher Risk Environments

Cal/OSHA is actively working with public health authorities to provide information, guidance on occupational safety and health, and to ensure that appropriate protection is provided to all employees who work in health care and other jobs that place them at increased risk of this disease. The U.S. Centers for Disease Control have prepared guidelines [http://www.cdc.gov/swineflu/guidelines_infection_control.htm](http://www.cdc.gov/swineflu/guidelines_infection_control.htm) for protecting health care workers who are exposed to people who are suspected of, or confirmed as being, infected with the H1N1 flu virus. Until more is known about this disease, the CDC recommends the use of approved N95 filtering face-piece respirators when providing care to H1N1 flu patients or otherwise entering the patient’s room, and when collecting clinical samples, such as nasal swabs. The California Department of Public Health guidelines [http://www.cdph.ca.gov/HealthInfo/discond/Documents/CDPH_Swine_Flu_Infection_Control_Recommendations.pdf](http://www.cdph.ca.gov/HealthInfo/discond/Documents/CDPH_Swine_Flu_Infection_Control_Recommendations.pdf) recommend that hospitalized H1N1 flu patients (suspected or confirmed) be housed in an airborne infection isolation room, or if such a facility is not available, in a single patient room with the door kept closed (except for access). Higher levels of respiratory protection, such as powered air purifying respirators, should be considered for employees who perform high hazard procedures, such as endotracheal intubation, nebulizer treatment, bronchoscopy, and resuscitation involving emergency intubation or cardiac pulmonary resuscitation. The CDPH has posted additional guidelines, which will be available at: [http://ww2.cdph.ca.gov/HealthInfo/discond/Pages/SwineInfluenza.aspx](http://ww2.cdph.ca.gov/HealthInfo/discond/Pages/SwineInfluenza.aspx). Federal OSHA’s guidance for health care workers can be found at: [http://www.osha.gov/Publications/exposure-risk-classification-factsheet.html](http://www.osha.gov/Publications/exposure-risk-classification-factsheet.html).

In general, health care operations and other higher risk environments such as homeless shelters, should take steps to reduce employee exposure to this disease through their injury and illness prevention plan, and through providing approved respiratory protection when necessary. Posters and signs informing people to “cover their cough,” which can be understood by all people who enter the facility, should be posted.

Examples of these posters in English and Spanish can be found at: [http://www.cdc.gov/flu/professionals/infectioncontrol/resphygiene.htm](http://www.cdc.gov/flu/professionals/infectioncontrol/resphygiene.htm).

Surgical, or procedure masks, should be provided to patients, clients, or other individuals who are coughing. If masks are not available, or can not be used by the patient, tissues and hand hygiene materials should be provided. People entering the facility, or people in a home in which an employee is providing care, should be screened for flu-like symptoms, and should be separated from other clients, patients, and employees to the extent feasible, until they can be
seen by a health care provider. Employees, patients and clients should be instructed to practice good hand hygiene, and environmental surfaces should be regularly cleaned.

OSHA and Cal/OSHA regulations require that employees who use respirators be included in a respiratory protection plan that includes a medical evaluation, training, and fit testing to ensure that the respirator provides an adequate seal to the employee’s face. However, these requirements should not be construed as preventing employers from providing respirators as an interim measure in this emergency to employees, such as health care workers, who are at increased risk of exposure to H1N1 flu. Employers who have not yet provided medical evaluations, fit tests, and training should make all reasonable efforts to get employees evaluated, fit-tested and trained as soon as possible, so that they can achieve maximum protection from the respirator. For more information on respirator use, see www.dir.ca.gov/title8/5144.html or www.osha.gov/SLTC/etools/respiratory. For more information on the use of respiratory protection for use against H1N1, see http://www.osha.gov/Publications/respirators-vs-surgicalmasks-factsheet.html.

For more information please call the Cal/OSHA Consultation Service at: (800) 963-9424, or e-mail: infocons@dir.ca.gov.