

Overview of Proposed Regulation

The Division of Occupational Safety and Health (DOSH) has prepared draft summary sheets to assist interested parties in understanding how proposed Section 5199 would apply in certain operations. These summary sheets are not intended to modify or replace the actual language of the proposed standard and will be changed if the proposed regulation changes. Please send any comments about this summary to dgold@dir.ca.gov.

Aerosol Transmissible Diseases – Homeless Shelters and Drug Treatment Programs

Employees in homeless shelters and drug treatment programs may be exposed to aerosol transmissible diseases (ATDs) because the populations receiving these services are at greater risk of having tuberculosis and some other ATDs. These workplaces may also be at increased risk of transmission due to a lack of adequate ventilation or crowded housing or treatment facilities. Most of these workplaces do not have trained health care providers on-site to determine whether people who are exhibiting ATD symptoms such as persistent coughing pose an infection risk to employees and to other clients of the facility. Proposed Section 5199, Aerosol Transmissible Diseases, would require homeless shelters, drug treatment programs and other work operations that come within the scope of the standard but that do not have health care providers, to establish some basic procedures for reducing the infection risk to their employees, including identification of clients who need further medical evaluation. These employers would be required to:

1. Develop criteria that will be used to identify clients who should be referred to a health care provider. A suggested list of the criteria is included in Appendix F [5199(c)(3)(B)].
2. Establish written procedures that will be used to refer the client to a health care provider (such as on-site health care services, mobile health care vans, public health agencies, or primary care providers) and to receive information back from the health care provider to determine if employees were exposed to an infectious disease and need follow-up care. (Generally referral is required within 5 hours, but an exception is provided for initial encounters that occur after 3:30 p.m.) [5199(c)(3)]
3. Establish written source control procedures for persons who enter the facility who are coughing or otherwise appear to have an ATD. These may include providing the person with a surgical mask, or tissues and hand hygiene materials [5199(c)(2)].
4. While a person is in the facility awaiting referral, use source control and other measures to reduce employee exposure to droplets that may be coughed out or exhaled. These measures include, as available, placing the person in a separate room or area, preferably with a separate or filtered ventilation system. If the person is not using source control measures, and other controls are not available, the employer should provide a respirator to employees who must enter the area, if that is feasible¹ [5199(c)(5)].
5. Establish written communication procedures to inform employees, and other employers whose employees will have contact with the person, of the person's infectious disease status. This would apply to people who transport the client, as well as to the hospital or other facility that will receive him or her. The employer must also establish procedures to receive information from health care providers if the provider determines that a referred patient has a reportable² aerosol transmissible disease [5199(c)(4)].
6. Establish procedures to provide the seasonal flu vaccine to employees covered by this regulation [5199(c)(6)].
7. Establish written procedures for employees who have been exposed at work to a confirmed case of a reportable aerosol transmissible disease. These include medical follow-up and continuation of pay for a period during which an employee is not sick but a physician or other licensed health care professional (PLHCP) recommends removal from the workplace because the employee may be contagious (unless alternate work is available) [5199(c)(6)].
8. Provide training at or prior to an employee's initial assignment to a job covered by this regulation, and at least annually thereafter. [5199(c)(7)].
9. Annually review infection control procedures with employees in their work areas, and correct any problems found [5199(c)(8)].
10. Keep vaccination records, exposure incident records, records of inspection of any ventilation systems or other engineering controls, and if applicable, records for the respiratory protection program [5199(j)].

¹ Section 5144 and subsection (g) of this section requires that respirator users be medically evaluated, fit-tested and trained, and be part of a respiratory protection program.

² Title 17, California Code of Regulations, Section 2500 lists diseases that are reportable to the local health officer.