

Adapting Field and Site Work during a Pandemic

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National and Regional Efforts

- Region 5 has developed framework and guidance to how and when a response will be approached
- Nationally - the Safety, Health and Environmental Managers work group discussing regularly how to approach site work, field work, emergency response and deployments
- Both are a dynamic and evolving process
- Workgroups, Health Community, Medical Community, SHEMs, and others discussing every aspect of this pandemic and its impact on operations for SFD, emergency responses, deployments, office and other site work



Framework for Region 5

- “Deployments are separated into tiers with Tier 1 comprising CERCLA/OPA Emergency Responses or Stafford Act Emergency Support Function Mission Assignments. All other deployments including Time Critical Removal Action (TCRA), Site Assessments, Inspections, and Exercises are considered Tier 2 and will be presumptively suspended as described in the “Guidance for Emergency Response and Removal Activities” memorandum (March 20, 2020). Any currently active TCRA will continue to be evaluated per ERB guidance and this Framework.”



This
Framework is
driven by two
overarching
priorities:

(1) Life Safety

- public
- response personnel

(2) Environmental impact if no EPA response is
activated

- Short term
- Long term



Region 5 Priority Questionnaire

- Developed a series of questions to determine if/how a response will proceed
- Decision protocols will be made by branch chiefs/management in coordination with the responders



Risk/Benefit Analysis Questions

“In cases where EPA receives information indicating a potentially urgent need for a response, ERB managers should consider the following factors/questions listed below on a case-by-case basis. This analysis is intended to promote a discussion for decision makers to evaluate the unusual aspects of responding during the COVID-19 pandemic. All decisions to deploy will be made in accordance with evolving guidance and directives from EPA, the CDC, and local health agencies in the affected community. Furthermore, in some cases, consultation with Regional Safety Office, Human Resources Office, Office of Regional Counsel, and Contracting Officers may be warranted.”



Life/Safety

- Consider situational awareness of current COVID-19 characteristics in the response area? Should be evaluated daily.
 - Epidemiological picture?
 - High transmission zone?
 - Are there more restrictive social distancing rules in place?
- Can response personnel (EPA, START, ERRS) be protected from exposure if mobilized?
- Are we confident of START/ERRS determination that workers have been or can pre-screened and willing to respond?



Life/Safety

- Is it likely that EPA response personnel will introduce /exacerbate virus transmission in the area or place strain on medical system?
- Will there be pre-screening and post mobilization monitoring available for EPA and contractor response personnel upon completion of a response tour? Where would they isolate or quarantine if there are documentations of either first or second degree suspected or actual exposures? How would they be supported and monitored while in isolation or quarantine status?



Life/Safety decision framework Continued

- Can EPA responders be logistically supported if mobilized?
 - Food
 - Lodging
 - Medical Treatment Availability
 - Transportation
 - PPE
 - Equipment
 - COVID-19 testing
 - Rotational relief



Life/Safety decision framework Continued

- Will public health in the response area be potentially degraded by introduction of EPA responders?
- What is the nature of the imminent threat to human health or the environment?
- Is there a clear and immediate Life/Safety threat posed to the public by the release/discharge that can only be eliminated by EPA response action?
- What is the availability of state programs or local responders to address the threat? Did the state or a locality specifically request EPA assistance?
- Can the threat be addressed through means other than a response, (e.g., telephone calls, off-site monitoring activities, increased frequency of follow-up, reporting, other entities, etc.)?



Environmental Impact

- Are state, local or tribal responders able to stabilize?
- What will be the immediate, short term impact to natural resources if EPA does not respond?
- What are likely long-term impacts if EPA does not respond?



Preparedness Actions Taken during Covid-19

- Process, contact, access, controls, etc are all being considered and implemented
- EPA in coordination with other federal, state and local entities have developed specific considerations that we are implementing for responses, inspections, field and office work



All site work personnel must be properly cleared for field work

- Current medical and respiratory clearance - One year medical and respiratory clearances are temporarily extended to 18 months.
- Current field safety/HAZWOPER refresher training - within past 18 months
- Not currently sick, ill, presumptive positive for COVID-19 or experiencing symptoms (cough, fever, shortness of breath, etc).
- Have not been diagnosed, presumptive positive.
- No close contact within 14 days, with someone diagnosed, or being tested for COVID-19 (family, friend, co-worker, etc.)
- No recent deployment to areas of high community spread in past 14 days



Health and Safety Plans with Covid-19 precautions



- Moving forward, HAPS will need an appendix or section that addresses all aspects of Coronavirus precautions, mitigation and response
- HASP should now address:
 - On-site personnel numbers, numbers of contracts working on shifts, split shifts, contractor HASP with covid appendix
 - How to distance and approach operations
 - Meetings- tailgate huddles and meeting with the local Fire Chief for a face to face brief...
 - PPE needs- not just for the purpose of the site but for precautions of Covid
 - Logistics – extra materials, lodging, food, handwashing stations,
 - Operations- vehicles, machinery, tools, trailers, decon
 - Site safety – what to do when someone gets sick, identify a hospital/clinic that can treat covid if needed and one for other occupational injuries
 - Define masks v. respirators v. face coverings
 - Signage
 - Community interaction

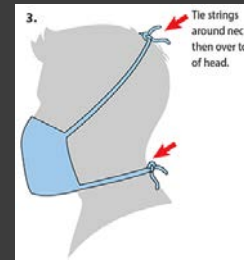
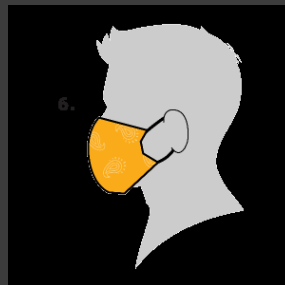
The following safety practices should be followed by EPA personnel going into the field:

- Prior to mobilizing, assess the prevalence for COVID-19 cases in the area(s) you are deploying to or performing Site work.
 - State COVID-19 information can be found on State Government and Health Department websites.
- Consider both occupational and non-occupational risks in the community
 - If crew lives in the local area or if hotel stays are needed
- Evaluate employees individual risk factors
 - (e.g., older age; chronic medical conditions, diabetes, heart disease, lung disease, immunocompromising conditions; pregnancy,).
- Controls necessary to address those risks
 - limit personnel, practice social distancing,
 - Tailgate meetings on phones or in vehicles
 - Shared tools or equipment
- In areas with sustained community spread, take precautions to maximize personal safety.
 - Bring hand sanitizer, soap and water. Practice good hygiene, wash hands regularly, use hand sanitizer, social distancing and Personal Protective Equipment.



Proper Personal Protective Equipment (PPE) must be selected to address all hazards including COVID-19

- Follow CDC, NIOSH & OSHA guidance for protection related to COVID-19 for any consideration of voluntary use PPE if needed
 - (N-95, filtering face mask, face covering, etc.) during travel, meetings, entering homes, etc.
- Nitrile or similar disposable gloves when hand sanitizer is not available, or when hand washing is not feasible
- Take care not to touch your face, and at any time you may have touched a contaminated surface



Site Safety Program

- Every effort should be made to ensure that there is a Site Safety Officer (SSO) onsite who has Emergency Medical Technician (EMT) training or access to an EMT on site.
 - Possible sources of personnel with EMT training include response contractors, the USCG Strike Team and local fire departments. The Site Safety Officer shall make daily observations of all staff on the response.
- If an EMT trained Safety Officer is not available, an effort should be made for an EMT to be contracted locally. For a large response conducted during this COVID-19 Pandemic, a Paramedic support unit should be requested from local emergency services, if available.
- all response personnel are continuously monitored and strictly follow the site Health and Safety Plan (HASP)
- Find hospitals that meet site needs that can handle covid and those where it will not burden them for non covid injuries



Illness and Injuries on Site that are Covid related

- If someone becomes ill or is injured while deployed, he/she must follow the site HASP.
- If experiencing symptoms related to COVID-19, contact the nearest hospital
- Contact your Supervisor and SHEMP manager to report your illness status.
- Call 911 immediately, if difficulty breathing or symptoms become severe.
- Self-isolate at home or hotel room until given medical instructions to do otherwise. Do not return to work if ill.
- EPA personnel, who require medical treatment from a workplace exposure are covered by DOL's Fed program while on Official Travel
- If you have returned home prior to feeling ill, contact your primary care physician for instructions. Self-isolate at home. Do not report to an FOH clinic.



Recording workplace exposures to COVID-19 (provided by OSHA)

- “OSHA recordkeeping requirements at [29 CFR Part 1904](#) mandate covered employers record certain work-related injuries and illnesses on their OSHA 300 log.
- COVID-19 can be a recordable illness if a worker is infected as a result of performing their work-related duties. However, employers are only responsible for recording cases of COVID-19 if all the following are met:
- The case is a confirmed case of COVID-19 (see [CDC information](#) on persons under investigation and presumptive positive and laboratory-confirmed cases of COVID-19);
- The case is work-related, as defined by [29 CFR 1904.5](#); and
- The case involves one or more of the general recording criteria set forth in [29 CFR 1904.7](#) (e.g. medical treatment beyond first-aid, days away from work)”.



Travel Related Recommendations

- Prior to departing, obtain EPA registered disinfectants and hand sanitizers
- Encourage all personnel to drive as opposed to taking a flight.
- Disinfect vehicles (wipe down the steering wheel, door handles, touchpoints, etc.)
- Hotel accommodations that have in-room kitchens.
 - Responders should avoid breakfast buffets and only consume unopened food items (yogurt, fresh fruit that is personally washed, etc.)
- While at hotels, disinfect your own room – do not use hotel cleaning services to limit access



General Response Recommendations

- Increase social distancing – Use the “6-foot rule”.
- Alternate lunches and breaks
- Avoid sharing items with others as much as possible.
- Initial check-in/screening.
 - Use one person to log in personnel or do it electronically. **Do not pass around a clipboard and pen. Ask the reporting personnel as to their previous travel/health and activities. Note lack of symptoms even.**
- Increase the frequency of handwashing not just hand sanitizer.
 - wash hands upon arrival at the site, after exiting the exclusion zone, prior to taking a break, prior to eating lunch, after use of the bathroom, upon leaving the site for the day, etc.



Response Recommendations

- Keep Site meetings to a minimum, update via conference calls/emails rather than Site visits.
- Do not hold Public Meetings
- Use multiple office trailers/command posts;
- Disinfect Site trailers, command post, porta johns, handwash stations, equipment and tools
- Disinfect vehicles (wipe down the steering wheel, door handles, touchpoints, etc.)



Site Decon

- Increase Site decontamination protocols. Respiratory aerosols, secretions, perspiration and other potentially infected body fluids accumulate PPE
- Attempt to don PPE without an attendant. If an attendant is necessary, the attendant should don an APR with P100 cartridges and nitrile exam gloves.
- Do not share respirators
- Conduct thorough decontamination and disinfection, following manufacturer recommendations
- CMAD has developed additional information on precautions, PPE, decontamination, cleanup and waste management: SARS-CoV-2 Information for OSCs https://response.epa.gov/site/site_profile.aspx?site_id=14650.



Take-away Considerations Moving Forward

- Start and end planning with Covid precautions and exposures as a part of the plan
- Find controls and methods to mitigate and minimize exposures
- Less face to face meetings and working closely in trailers
- PPE for non response related hazards (face coverings, masks, gloves, sanitizers)
- Monitor all on site staff for both those not presenting symptoms as well as those that are exhibiting symptoms
- Open lines of communication with the teams and managers
- What to do if there is a potential or confirmed positive case



Helpful Links



- <https://www.osha.gov/Publications/OSHA3990.pdf>
- <https://www.epa.gov/pesticide-registration/list-n-disinfectants-use-against-sars-cov-2>
- https://response.epa.gov/site/site_profile.aspx?site_id=14650.
- <https://www.cdc.gov/coronavirus/2019-ncov/prevent-getting-sick/diy-cloth-face-coverings.html>

Questions?

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Recent Experiences to responding during the pandemic

Andy Maguire, Crawford Power Plant Demo

