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DEPARTMENT OF BUSINESS AND INDUSTRY
DIVISION OF INDUSTRIAL RELATIONS
OCCUPATIONAL SAFETY & HEALTH ADMINISTRATION

July 22, 2021

To: Nevada Businesses

**Re: Updated COVID-19 Guidance for Nevada Businesses and New OSHA COVID-19
Healthcare Emergency Temporary Standard**

This guidance supersedes previous Nevada Occupational Safety and Health Administration (NV OSHA) COVID-19 guidance released on June 24, 2021.

COVID-19 Healthcare Emergency Temporary Standard

NV OSHA adopted the COVID-19 Emergency Temporary Standard for healthcare workplaces effective on July 1, 2021. Employers must comply with most provisions within 14 days of the effective date, and with the remaining provisions within 30 days. This document provides an overview of the ETS and links to resources to help businesses comply.

Updated NV OSHA COVID-19 Guidance for Other Businesses

This document also includes updated NV OSHA guidance for businesses not covered by the ETS. New requirements for face coverings were put in place by Clark County for the period of July 22, 2021 to August 17, 2021. In addition, Declaration of Emergency Directives #024, #028, #044, and #045 require Nevada businesses to comply with guidelines promulgated by NV OSHA to minimize the risk of spread of COVID-19. NV OSHA is also responsible for enforcing all violations of its guidelines, protocols, and regulations promulgated pursuant to the Governor's Directives and local directives affecting employees.

Need Safety Consultation Assistance?

Complying with COVID-19 safety standards can be complex. The Division of Industrial Relations Safety Consultation and Training Section (SCATS) offers free consultations to businesses to help them understand and implement the requirements in order to comply with the health and safety guidance and directives for all businesses, and specific requirements for each industry. SCATS can be reached by calling 1-877-4SAFENV.

NV OSHA COVID-19 guidance is subject to revision. Please check back frequently for updates.

If you have questions about this guidance, please call NV OSHA at 702-486-9020.

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Overview of OSHA COVID-19 Healthcare Emergency Temporary Standard

The text of OSHA COVID-19 Healthcare Emergency Temporary Standard (ETS) is available at: https://www.osha.gov/laws-regs/regulations/standardnumber/1910#1910_Subpart_U.

Summaries, fact sheets, FAQs, and other resources are available at: [COVID-19 Healthcare ETS | Occupational Safety and Health Administration \(osha.gov\)](#). The information below provides an overview of the ETS. It is important to read the full standard to ensure compliance.

Types of Businesses Covered by the ETS

The health care emergency temporary standard is aimed at protecting workers facing the highest coronavirus hazards—those working in health care settings where suspected or confirmed coronavirus patients are treated. This includes employees in hospitals, nursing homes, and assisted living facilities; emergency responders; home health care workers; and employees in ambulatory care settings where suspected or confirmed coronavirus patients are treated. A flow chart to help determine if a workplace is covered is available at: [Is Your Workplace Covered by the ETS?](#)

Requirements for Covered Workplaces

The main section of the ETS (1910.502 – Healthcare) requires employers to develop and implement effective COVID-19 plans. Controlling COVID-19 requires employers to use multiple overlapping controls in a layered approach to better protect workers. The key requirements of the ETS are:

COVID-19 plan: Develop and implement a COVID-19 plan (in writing if more than 10 employees) that includes a designated safety coordinator with authority to ensure compliance, a workplace-specific hazard assessment, involvement of non-managerial employees in hazard assessment and plan development/implementation and policies and procedures to minimize the risk of transmission of COVID-19 to employees.

Patient screening and management: Limit and monitor points of entry to settings where direct patient care is provided; screen and triage patients, clients, and non-employees; and implement patient management strategies.

Standard and Transmission-Based Precautions: Develop and implement policies and procedures to adhere to Standard and Transmission-Based precautions based on CDC guidelines.

Personal protective equipment (PPE): Provide and ensure each employee wears a facemask when indoors and when occupying a vehicle with other people for work purposes; provide and ensure employees use respirators and other PPE for exposure to people with suspected or confirmed COVID-19, and for aerosol-generating procedures on a person with suspected or confirmed COVID-19.

Aerosol-generating procedures on a person with suspected or confirmed COVID-19: Limit employees present to only those essential; perform procedures in an airborne infection isolation room, if available; and clean and disinfect surfaces and equipment after the procedure is completed.

Physical distancing: Keep people at least 6 feet apart when indoors.

Physical barriers: Install cleanable or disposable solid barriers at each fixed work location in non-patient care areas where employees are not separated from other people by at least 6 feet.

Cleaning and disinfection: Follow standard practices for cleaning and disinfection of surfaces and equipment in accordance with CDC guidelines in patient care areas, resident rooms, and for medical devices and equipment; in all other areas, clean high-touch surfaces and equipment at least once a day and provide alcohol-based hand rub that is at least 60% alcohol or provide readily accessible handwashing facilities.

Ventilation: Ensure that employer-owned or controlled existing HVAC systems are used in accordance with the manufacturer's instructions and design specifications for the systems and that air filters are rated Minimum Efficiency Reporting Value (MERV) 13 or higher if the system allows it.

Health screening and medical management:

- Screen employees before each workday and shift;
- Require each employee to promptly notify the employer when the employee is COVID-19 positive, suspected of having COVID-19 or experiencing certain symptoms;
- Notify certain employees within 24 hours when a person who has been in the workplace is COVID-19 positive; and
- Follow requirements for removing employees from the workplace.

Medical Removal Protection Benefits: Employers with more than 10 employees are required to provide medical removal protection benefits in accordance with the standard to workers who must isolate or quarantine. Covered employees who have coronavirus or who may be contagious must work remotely or otherwise be separated from other workers if possible, or be given paid time off up to \$1400 per week. For most businesses with fewer than 500 employees, tax credits in the American Rescue Plan may be reimbursed through these provisions.

Vaccination: Provide reasonable time and paid leave for vaccinations and vaccine side effects.

Training: Ensure all employees receive training so they comprehend COVID-19 transmission, tasks and situations in the workplace that could result in infection, and relevant policies and procedures.

Anti-Retaliation: Inform employees of their rights to the protections required by the standard and do not discharge or in any manner discriminate against employees for exercising their rights under the ETS or for engaging in actions required by the standard.

Costs: Requirements must be implemented at no cost to employees.

Recordkeeping: Establish a COVID-19 log (if more than 10 employees) of all employee instances of COVID-19 without regard to occupational exposure and follow requirements for making records available to employees/representatives.

Reporting: Report work-related COVID-19 fatalities and in-patient hospitalizations to OSHA.

Exemptions for Vaccinated Workers: The ETS exempts fully vaccinated workers from masking, distancing and barrier requirements when in well-defined areas where there is no reasonable expectation that any person will be present with suspected or confirmed coronavirus.

Mini Respiratory Program

The mini respiratory program is a component of the ETS. It applies when health care workers are not exposed to suspected or confirmed sources of COVID-19 but where respirator use could offer enhanced worker protection. It includes provisions for the safe use of respirators that can be implemented more quickly and easily than the more comprehensive respiratory protection program required by the Respiratory Protection standard (e.g., medical evaluation, fit testing). More information is available here: [Mini Respiratory Protection Program \(osha.gov\)](https://www.osha.gov/mini-respiratory-protection-program)

Effective Date

NV OSHA is adopting the ETS identical to the language shown in the following link: [https://www.osha.gov/laws-regs/regulations/standardnumber/1910#1910 Subpart U](https://www.osha.gov/laws-regs/regulations/standardnumber/1910#1910_Subpart_U). The ETS is effective in Nevada on July 1, 2021. Employers must comply with most provisions within 14 days and with the remaining provisions within 30 days. NV OSHA will use its enforcement discretion to avoid citing employers who miss a compliance deadline but are making a good faith effort to comply with the ETS.

NV OSHA Guidance for Businesses Not Covered by the COVID-19 Healthcare Emergency Temporary Standard

NV OSHA COVID-19 requirements will continue to evolve as state and federal guidance change. Current NV OSHA requirements include, but are not limited to, the following:

Vaccination:

- Employers should encourage employees to receive a COVID-19 vaccine and may implement incentives such as:
 - Providing onsite vaccination clinics,
 - Providing paid leave for employees to get vaccinated,
 - Using promotional posters/flyers to advertise locations offering COVID-19 vaccination, and
 - Posting articles in employer communications about the importance of COVID-19 vaccination and where to get the vaccine in the community.
- (Recommended/CDC [FAQs about COVID-19 Vaccination in the Workplace: For Employers \(cdc.gov\)](https://www.cdc.gov/workplace/faq-covid-19-vaccination))

Face Coverings and Personal Protective Equipment:

- All requirements regarding the use of face coverings and personal protective equipment can be more restrictive at the local and county levels but must at least meet the requirements listed in this section.

Clark County

- For the period of July 22, 2021, to August 17, 2021, all employers in Clark County are required to ensure employees, regardless of vaccination status, wear face coverings while working indoors, either with members of the public or in close contact with coworkers. Employees who have separate offices and workspaces need not wear masks while in those spaces.
 - Reference: Amendment to the June 1, 2021 Clark County Local Mitigation and Enforcement Plan effective July 21, 2021.
 - See: [Amendment to Clark County Local Mitigation Plan.pdf \(clarkcountynv.gov\)](https://www.clarkcountynv.gov/Amendment%20to%20Clark%20County%20Local%20Mitigation%20and%20Enforcement%20Plan.pdf)

All other counties in Nevada

- Pursuant to CDC guidance released on May 13, 2021, “fully vaccinated people no longer need to wear a mask or physically distance in any setting, except where required by federal, state, local, tribal, or territorial laws, rules, and regulations, including local business and workplace guidance.” See: <https://www.cdc.gov/coronavirus/2019-ncov/vaccines/fully-vaccinated-guidance.html>
- Private entities and organizations may have mask policies that are more restrictive than the CDC guidance. Employers will need to conduct a job hazard analysis to determine if

face coverings need to be worn by vaccinated employees to prevent the spread of COVID-19. See the Job Hazard Analysis section of this guidance for more information.

- All employers must provide face coverings¹ for unvaccinated employees and shall require these employees to wear the face coverings in all instances where required by emergency directives and associated guidance issued on the NVHealthResponse website or by Nevada OSHA. (Required/Ref. Declaration of Emergency Directive #021, section 12; Declaration of Emergency Directive #044, section 6; Declaration of Emergency Directive #045, section 6)
- All employers shall require unvaccinated employees to wear a face covering¹ in any space visited by the general public, even if no one else is present. (Required/Ref. NVHealthResponse Guidance on Directive 024: Face Coverings, Declaration of Emergency Directive #044, section 6; Declaration of Emergency Directive #045, section 6)
- All employers must require unvaccinated employees to wear a face covering¹ in any space where food is prepared or packaged, for sale, or generally distributed to others. (Required/Ref. NVHealthResponse Guidance on Directive 024: Face Coverings)
- Ensure that any identified first responders in the labor force are provided and use the needed Personal Protective Equipment (PPE) and equipment for protection from communicable or infectious disease. (Required/29 CFR 1910.1030)
- Post signage with the latest CDC mask guidance for vaccinated and unvaccinated employees and customers. (Recommended/Nevada Health Response Press Release 5/13/2021)

Congregation of Employees

- Stagger break times in high-population workplaces, or provide temporary break areas and restrooms to avoid groups of unvaccinated workers congregating during breaks. Unvaccinated workers should maintain at least 6 feet of distance from others at all times, including on breaks. (Recommended/ Ref. [Protecting Workers: Guidance on Mitigating and Preventing the Spread of COVID-19 in the Workplace | Occupational Safety and Health Administration \(osha.gov\)](#))

Sanitation

- Clean surfaces with products containing soap or detergent to reduce germs by removing contaminants and decreasing the risk of infection from surfaces.
 - 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 viruses that may be on surfaces and help maintain a healthy facility.
- Disinfect using [U.S. Environmental Protection Agency \(EPA\)'s List N disinfectants](#) to kill any remaining germs on surfaces, which further reduces any risk of spreading infection.

¹ Section 4 of Nevada Declaration of Emergency Directive #024 states “For the purposes of this Directive, “face covering” is defined as a covering that fully covers a person’s nose and mouth, including without limitation, cloth face masks, surgical masks, towels, scarves, and bandanas.” For employees, Nevada OSHA does not recognize face shields as an alternative to or as an effective “face covering.” The face covering must effectively control the breathing zone and restrain any expelled or exhaled water droplets within the covering.

Each business needs to evaluate if disinfection is needed in shared spaces when the following conditions exist:

- High traffic area;
 - High transmission of COVID-19 in the community;
 - Low vaccination rates in the community;
 - Infrequent use of other prevention measures, such as mask-wearing (among unvaccinated people) and hand hygiene; and/or
 - The space is occupied by people at increased risk for severe illness from COVID-19. (Required/Ref. Centers for Disease Control and Prevention <https://www.cdc.gov/coronavirus/2019-ncov/community/disinfecting-building-facility.html>)
- If there has been a sick person or someone who tested positive for COVID-19 in your facility within the last 24 hours, clean and disinfect the spaces they occupied. (Required/Ref. Centers for Disease Control and Prevention <https://www.cdc.gov/coronavirus/2019-ncov/community/disinfecting-building-facility.html>)

Monitoring Health Status of Employees

- Instruct any workers who are infected, unvaccinated workers who have had close contact with someone who tested positive for COVID-19, and all workers with COVID-19 symptoms to stay home from work to prevent or reduce the risk of transmission of the virus that causes COVID-19.
- Ensure that absence policies are non-punitive.
- Eliminate or revise policies that encourage workers to come to work sick or when unvaccinated workers have been exposed to COVID-19.

(Recommended/ Ref. [Protecting Workers: Guidance on Mitigating and Preventing the Spread of COVID-19 in the Workplace | Occupational Safety and Health Administration \(osha.gov\)](#))

Further, any guidance, protocol, plan, or regulation that is produced by the State of Nevada or a local government, if more restrictive, shall be enforced by Nevada OSHA per Section 7 of Declaration of Emergency #044. Following these guidelines does not constitute, and is not a substitute for, compliance with all laws and regulations applicable at any particular time. Individuals and businesses are responsible for ensuring that they comply with all laws and regulations that apply to them, including, but not limited to, federal and state health and safety requirements. Additionally, compliance with this guidance does not ensure prevention of spread of infections from COVID-19 or any other cause.

COVID-19 Prevention Plan:

Nevada OSHA considers COVID-19 a recognized hazard. Nevada OSHA will continue to require all businesses to protect employees from all recognized hazards, which includes COVID-19. Employers shall implement COVID-19 Prevention Programs in the workplace. The most effective programs engage workers and their union or other representatives in the program's development and include the following key elements: conducting a hazard assessment; identifying a combination of measures that limit the spread of COVID-19 in the workplace;

adopting measures to ensure that workers who are infected or potentially infected are separated and sent home from the workplace, and implementing protections from retaliation for workers who raise COVID-19 related concerns.

The COVID – 19 Prevention Program will be recognized by and added to the Written Workplace Safety Program (WWSP) required by Nevada Revised Statutes 618.383 and Nevada Administrative Code 618.538 for businesses with more than 10 employees. Businesses with 10 or fewer employees are highly encouraged to have a written COVID – 19 Prevention Program.

Job Hazard Analysis:

- For higher-risk workplaces, such as manufacturing, meat and poultry processing, high-volume retail and grocery, and seafood processing, a Job Hazard Analysis (JHA) should be completed for each task or procedure that could be affected by the hazard of COVID-19. Any JHA drafted for this purpose must be equivalent in detail and scope as identified in Federal OSHA publication 3071. <https://www.osha.gov/Publications/osha3071.pdf>
- A JHA developed for this purpose must identify the task being addressed, the hazard being addressed (spread of COVID-19), and controls to be used to address the hazard.
- Engineering controls, administrative controls, and PPE identified and developed through the JHA to address the hazard must be supplied by the employer.
- Training must be provided to staff for any policy, practice, or protocol that is used to address the hazard via a JHA.

Training must be provided to staff for any equipment, engineered process, administrative control, or PPE that was identified and developed through the JHA to address the social distancing requirements or alternative policies, practices, or protocols implemented when social distancing is infeasible/impractical.

Additional Resources

For further guidance, please see the following links:

- Federal OSHA COVID – 19 Prevention Program resources-
 - <https://www.osha.gov/coronavirus/safework>
 - <https://www.osha.gov/coronavirus/guidance/industry>
- Centers for Disease Control and Prevention - <https://www.cdc.gov/coronavirus/2019-nCoV/index.html>
- State of Nevada- <https://nvhealthresponse.nv.gov/>
- Mine Safety and Health Administration: <https://www.msha.gov/coronavirus>
- NV OSHA Information: <http://dir.nv.gov/OSHA/Home/>
- Clark County Covid-19 Information:
 - https://www.clarkcountynv.gov/top_services/covid19/index.php
- Amendment to Clark County Local Mitigation Plan:
 - [Amendment to Clark County Local Mitigation Plan.pdf \(clarkcountynv.gov\)](#)