



Covid-19

Health Care – Non-Direct Care Jobs

Providing health care requires many different types of jobs. Direct care (doctors, nurses, x-ray technicians, pulmonary technicians and many others) is generally what comes to mind when people think of health care. But there are many other workers who are part of the process of getting people well.

Environmental Services (cleaning)
Laundry
Dietary

For every job that must be done, employers should conduct a hazard assessment with input from the union and from workers who do those jobs. Hazard Assessment is the name for the process of looking at a job and figuring out what about that job could injure someone or make them sick and what are some ways to prevent those injuries or illnesses.

Environmental Services (Housekeepers)

Environmental service workers generally must go into every area of the health care facility. They routinely use chemical products that could cause them harm. Workers should already receive training on chemical use in general, but it may have to be updated if new products are being used for COVID. Additionally, protective equipment may have to be upgraded on units that house COVID patients. An assessment of the hazards in each of the work areas will determine what type of protection and training are needed for environmental services workers.

The role of housekeeping is key to keeping everyone in the facility safe. A recently published study found the following rates of virus found on objects throughout a hospital caring for COVID-19 patients:

Computer mice in the ICU tested positive for the virus in 75% of samples. The rate on computer mice outside of the ICU was 20%.

More information is available at
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Sixty percent of trash cans in the ICU tested positive for the virus.

Nearly 43% of bed handrails in the ICU tested positive for the virus.

More than 8% of doorknobs in units outside the ICU tested positive for the virus.

Levels of contamination were much higher in COVID-19 patient areas. Other areas of the hospital, however, still had some contamination.

Keeping environmental services safe and applying good practices and protections for their work will keep everyone safer.

The following practices should be used to protect environmental service workers:

In rooms with COVID patients where patients have had procedures that generate aerosols (intubation, bronchoscopy, for example), the room should be ventilated with fresh air for several hours before cleaning staff go in. In facilities that have a “closed” ventilation system, HEPA filters should be used either over the vents or in a portable system placed near the patient.

It is a good practice to use disposable cleaning equipment and to throw it away after cleaning each piece of equipment. Cleaning all rooms from the cleanest place to the dirtiest is also good practice.

Environmental workers should be provided the following Personal Protective Equipment (PPE):

- surgical mask
- disposable long-sleeved water-resistant gown

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- gloves (heavy duty are better)
- eye protection

In areas where patients have had procedures that generate aerosols, a filtering respirator (like an N-95) should be used.

When removing gloves, workers should take care to use the proper procedure and wash their hands afterward. Click the following link to watch a short video about how to properly remove gloves. <https://www.facebook.com/steelworkers/videos/599322747595143/>

All waste from a COVID patient room or a PUI (person under investigation for COVID) should be treated as infectious waste and handled according to the facilities' procedures.

Laundry Workers

In the age of COVID, the hazards of laundry work are likely to have changed. For laundry workers, this means that they have to exercise more care than they normally might. It is known that the virus lives on surfaces. While there are no current estimates on how many hours it lives on fabric, it is best to handle the laundry as though it is contaminated.

For home laundry, Consumer Reports recommends wearing gloves and being careful to not shake the clothes. In a health care setting, the volume of laundry is bigger and the risks may be greater, so more care should be taken. Laundry workers should have protective equipment that provides coverage for their clothes, hair and hands. Work may have to be done at a slower than normal pace or more staff may be needed so that linens can be handled more gently with less throwing and tossing of sheets and towels.

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The same care should be applied whether the laundry workers are cleaning linens or cleaning the personal items patients or residents need washed.

It is also a good practice for facilities to launder staff uniforms to ensure hazards are not being brought home to the family laundry. All uniforms should be treated as contaminated and the same guidelines followed.

Dietary Workers

COVID is not known to be transmitted through food. The issue for dietary workers is, where in the facility are they required to go to deliver the food and what protections do they need?

Different facilities may come up with different ways to deliver food. In some places, dietary workers deliver the food to an area right outside the units with COVID patients. This places the food at a convenient place for the COVID unit workers to deliver it to the patients, but keeps the dietary workers at a safer distance.

One study found that in units with COVID patients, the virus was found on nearly all surfaces. If the health care facility chooses to instruct dietary workers to go inside the unit, they must figure out how to keep them safe from the virus.

Patient Transport [<https://ccforum.biomedcentral.com/articles/10.1186/s13054-020-2828-4/tables/1>]

Once in the hospital, patients may need services that require transporting them to other departments. Where possible, it is preferable to keep COVID-19 patients in their room. Portable diagnostic equipment brought to the room can minimize the disruption to the patient and the risk to staff and bystanders.

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If transport is necessary, staff must be provided PPE including an N95 respirator, gown, and gloves. A surgical mask should be worn by the patient.

The route from the patient's room to the destination should be pre-planned to avoid traffic. Security or other personnel should lead the way and clear the path to protect bystanders including staff.

Staff should go through appropriate decontamination once they have completed the transport. Additionally, trained and protected environmental services or housekeeping staff should clean along the route, including elevators that were used.

Because transporting a patient can provide opportunities for spreading the virus, it should be stressed that where transport can be avoided, it is safer for all.

General Tips for Health Care Workers:

COVID-19 is a very contagious disease and must be treated with great care. To protect workers in facilities with COVID cases:

Treat all Persons Under Investigation (PUI) as COVID patients. Treating PUIs as patients protects both the workers and the patients. Do not wait until testing confirms what is already suspected.

In COVID-19 units the virus has been found is found on almost all surfaces.

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- Limit who must go into COVID units. Dietary, laundry and other workers may not need to physically enter these areas risking unnecessary infection.
- If negative pressure (keeping the air inside) in patient rooms is done correctly, everyone on the unit is better protected.
- Virus has been found on multiple surfaces in health care facilities – particularly in COVID units. Because droplets with the virus are heavier than air and fall to the floor, workers should disinfect or change their shoes when they leave work if they have not been protected with booties. This practice can prevent carrying the virus home.

Emergency Departments are particularly vulnerable. Special precautions should be taken to protect both workers and patients from contact in Emergency Departments.

Stress and other psychological risks deserve special attention. A study from Singapore found that non-medical health care workers are at greatest risk of increased distress, anxiety and depression during the COVID-19 outbreak. Reasons for this increase include: less overall support, less training and medical information and less training on infection control. accessibility to formal psychological support, less first-hand medical information on the outbreak, less intensive training on personal protective equipment and infection control measures

Finally, because some facilities have cross-trained workers to perform different tasks, it is important to train and protect workers based on the task being performed – not necessarily just the job title they hold. When giving workers a variety of tasks, consideration must be given to protecting workers from cross-contaminating a facility.

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