Date: October 22, 2021

To: All AKOSH Staff

From: William Harlan, Director

Subject: National Emphasis Program – Coronavirus Disease 2019 (COVID-19)

This program directive establishes enforcement procedures to implement the AKOSH National Emphasis Program (NEP) for Coronavirus Disease 2019 (COVID-19).

This program directive will be in effect immediately. Please ensure that all members of your staff receive a copy of this program directive and understand how to implement it.

Attachment: AKOSH COVID-19 Emphasis Program

cc: Arlene Lamont, Area Director, Anchorage, OSHA, Region X
    Abby Lopez, Assistant Regional Administrator for Cooperative and State Programs (ARA of CSP), OSHA, Region X
Executive Summary

This Direction describes policies and procedures for implementing a National Emphasis Program (NEP) to ensure that employees in high-hazard industries are protected from the hazard of contracting SARS-CoV-2 (severe acute respiratory syndrome coronavirus 2), the cause of COVID-19. The NEP augments OSHA’s efforts addressing unprogrammed, COVID-19-related activities, e.g., complaints, referrals, and severe incident reports, by adding a component targeting specific high-hazard industries or activities where this hazard is prevalent. The NEP targets establishments that have workers with increased potential exposure to this hazard. In addition, this NEP includes an added focus to ensure that workers are protected from retaliation and are accomplishing this by preventing retaliation where possible, distributing anti-retaliation information during inspections, and outreach opportunities, as well as promptly referring allegations of retaliation to the Whistleblower Protection Program.
Table of Contents

I. Purpose ................................................................................................................................... 1
II. Scope ..................................................................................................................................... 1
III. References .......................................................................................................................... 1
IV. Cancellations ...................................................................................................................... 2
V. Expiration ............................................................................................................................ 2
VI. Background ....................................................................................................................... 2
VII. National Emphasis Program (NEP) Goal ....................................................................... 3
VIII. Program Procedures ......................................................................................................... 3
     A. General ........................................................................................................................... 3
     B. Site Selection ................................................................................................................ 3
     C. Inspection Scheduling ............................................................................................... 5
     D. Unprogrammed and follow-up Inspections ............................................................ 5
     E. Whistleblower Protections ........................................................................................ 5
     F. Inspection Procedures ............................................................................................... 5
     G. CSHO Protection ......................................................................................................... 8

Appendix A: Target Industries for the COVID-19 NEP
Appendix B: CSHO Pre-inspection Checklist
I. **Purpose.**
This Direction describes policies and procedures for implementing a National Emphasis Program (NEP) to ensure that employees in high-hazard industries are protected from the hazard of contracting SARS-CoV-2 (severe acute respiratory syndrome coronavirus 2), the cause of Coronavirus Disease 2019 (COVID-19). The NEP augments OSHA’s efforts addressing unprogrammed, COVID-19-related activities, e.g., complaints, referrals, and severe incident reports, by adding a component targeting specific high-hazard industries or activities where this hazard is prevalent. The NEP targets establishments that have workers with increased potential exposure to this hazard, and that puts the largest number of workers at serious risk. In addition, this NEP includes an added focus to ensure that workers are protected from retaliation and are accomplishing this by preventing retaliation where possible, distributing anti-retaliation information during inspections and outreach opportunities, as well as promptly referring allegations of retaliation to the Whistleblower Protection Program.

II. **Scope.**
This Direction applies AKOSH-wide.

III. **References.**
B. AKOSH PD, *Field Operations Manual (FOM)*
I. OSHA Safety and Health Topics: Coronavirus Disease (COVID-19) (webpages).

IV. **Cancellations.**
None.
V. **Expiration.**
This Direction is effective for no more than 12 months from the effective date, unless canceled or extended by a superseding directive.

VI. **Background.**
This NEP focuses on COVID-19-related hazards and provides procedures for planned/programmed and follow-up inspections in workplaces where unvaccinated employees have a high frequency of close contact exposures. This NEP also reaffirms AKOSH’s adherence to longstanding inspection policy that relies predominantly on on-site (in person) presence for most inspections. Modifications to that policy (i.e., performance of remote-only COVID-19 inspections) are reserved for limited circumstances and subject to the Chief of Enforcement’s approval.

In May of 2021, approximately two months following the issuance of the COVID-19 NEP, the CDC issued updated guidance to align its COVID-19 recommendations with the increasing availability of COVID-19 vaccinations across the United States. This precipitated a review of OSHA’s COVID-19 enforcement posture, including the COVID-19 NEP. Based on preliminary observations from the initial review of COVID-19 NEP inspections approximately three months following the initiation of the program, OSHA made appropriate adjustments to the NEP targeting scheme to better align with the changing environments and overall reduction of COVID-19-related risks in many industries.

VII. **NEP Goal.**
The goal of this NEP is to significantly reduce or eliminate worker exposures to SARS-CoV-2 by targeting industries and worksites where unvaccinated employees may have a high frequency of close contact exposures and therefore, controlling the health hazards associated with such exposures. This goal will be accomplished by a combination of inspection targeting, outreach to employers, and compliance assistance.

The goal is to continue performing a high percentage of COVID-19 inspections (at least 5%) of the AKOSH total inspection goal (which is approximately 300 inspections statewide), by focusing Agency resources on workplace exposures to SARS-CoV-2 in certain critical industries. Unprogrammed COVID-19-related inspections will continue to be prioritized for worksites where employees have potential exposures to COVID-19-related hazards. AKOSH anticipates that the majority of the inspections covered under this NEP will continue to occur in general industry, particularly in healthcare, based on current OSHA enforcement data showing higher COVID-19-related complaints, referrals and severe incident reports at healthcare worksites.

To ensure abatement and to monitor the effectiveness of AKOSH’s enforcement and guidance efforts, certain follow-up inspections from worksites previously inspected for COVID-19-related hazards will be included as part of the targeting strategy.

VIII. **Program Procedures.**
A. **General.**
Area Offices or Regional Offices are not required to develop a Local Emphasis Program (LEP) or Regional Emphasis Program (REP) for SARS-CoV-2. Appendix A of this Direction provides lists of affected industries by their North American Industry Classification System (2017 NAICS) codes. The lists in Appendix A include industries where workers may be at increased potential exposure to SARS-CoV-2, based on OSHA’s 2020 and 2021 COVID-19 enforcement activities. See Appendix A for more detailed information about the sources OSHA used to identify affected industries.

Establishments with fewer than 10 workers shall be included in this NEP. See CPL 02-00-051, Enforcement Exemptions and Limitations under the Appropriations Act.

B. Site Selection.
   1. Master List Generation.
      For programmed inspections, the NEP will generate one Master List for site selection. The Master List will be comprised of establishments identified as having a NAICS code listed in Appendix A. Master List 2 will be comprised of establishments having a NAICS code listed in Appendix A and having an elevated illness rate as indicated by Form 300A data. AKOSH will use Program Directive 21-04, High Hazard Targeting System (HHT) to generate a Master List to fulfill the NEP’s Programmed Inspection goal.

   2. Additions.
      AKOSH may add establishments to the generated master list based on information from appropriate sources (e.g., local knowledge of establishments, commercial directories, referrals, or previous AKOSH inspection history.

   3. Deletions.
      AKOSH may delete from their target list any establishment that has had a comprehensive or partial health inspection that addressed COVID-19 hazards with an Opening Conference date occurring within the twelve previous months and resulted in one of the following outcomes:

      (a) Serious citations related to COVID-19 hazards which are under contest or for which the abatement period has not yet expired; or No serious citations were issued for hazards related to exposure to SARS-CoV-2; or

      (b) Serious citation(s) were issued for hazards related to exposure to SARS-CoV-2, but a follow-up inspection documented appropriate and effective efforts by the employer to abate the serious hazards cited (e.g., work practice or administrative controls in place, engineering controls installed).
The AKOSH Chief of Enforcement may use discretion to delete establishments from the targeting lists based on local knowledge of the community and/or industry (i.e., low rate of infection, high vaccination percentage, or work operations that have been modified to eliminate close contact exposures for unvaccinated employees).

**NOTE:** The Chief of Enforcement may use discretion in scheduling an inspection at a previously cited establishment, inspected within the previous twelve (12) months, even though other-than-serious citations, Hazard Alert Letters or Notification Letters were issued related to exposure to SARS-CoV-2 as a result of the previous inspection.

AKOSH shall maintain documentation supporting any deletions made under this paragraph.

4. **Cycle Generation.**
   Program Directive 21-04 assigns random numbers and provides the Master List in random number order. List cycles may be created all at once or as necessary, and need not be of the same size.

5. **Maintaining Inspection List/Cycles and Documentation.**
   The Chief of Enforcement has overall responsibility for maintaining documentation necessary to demonstrate that the AKOSH has used the NEP inspection list and cycles in accordance with this Direction, including documenting all deletions, deferrals, or other modifications. AKOSH shall maintain all such inspection lists, cycles, and documentation for a period of three years after all inspections conducted under this NEP plan are closed.

C. **Inspection Scheduling.**
   Within a specified cycle, inspections will be scheduled in accordance with the FOM, Chapter 2, IV Enforcement Program Scheduling. AKOSH may schedule follow-up inspections related to COVID-19 hazards to contribute to meeting the goals of this NEP where unprogrammed activities have decreased enough to allow them to do so. A Programmed inspection cycle will be completed before another cycle is started. Some establishments selected for inspection under this NEP may also be selected under other Emphasis Programs. Inspections under this NEP may be carried out concurrently with other programmed inspections.

D. **Unprogrammed and follow-up Inspections.**
   Unprogrammed and follow up inspections will be conducted in accordance with the AKOSH FOM, Chapter 2, IV Enforcement Program Scheduling. Additionally, unprogrammed inspections shall be inspected using either on-site or a combination of on-site and remote methods, except under circumstances where an on-site inspection cannot be conducted safely. This will be fully documented in the case file.
E. **Whistleblower Protections.**
AKOSH will process all whistleblower complaints in accordance with AKOSH FOM, chapter 9, II, B. as well as AS 18.60.089.

F. **Inspection Procedures.**
AKOSH will conduct a 90-day outreach, as similarly required for NEPs and REPs in accordance with OSHA Memorandum on Procedures for Local and Regional Emphasis Programs, December 3, 2014.

Inspections under this NEP shall only be conducted by CSHOs who have reviewed the appropriate safety and health precautions as outlined in the FOM Chapter 3, General Inspection Procedures, as well as Appendix B of this Direction.

Once an inspection has been scheduled for an identified establishment, and prior to opening the inspection, CSHOs shall conduct a search of the employer’s citation and fatality/accident history in OSHA’s Establishment Search Page or by using OIS.
1. The CSHO shall also determine whether the identified establishment is scheduled for any other programmed inspection.

2. At the opening conference, the CSHO will verify the correct NAICS code for the establishment with the employer and determine whether work practices that may result in worker exposures to SARS-CoV-2 are conducted at the facility or worksite. The CSHO shall review the establishment’s injury and illness logs (OSHA 300 and OSHA 300A) for calendar years 2020 and 2021 to date to identify work-related cases of COVID-19.

The CSHO may verify an employer’s assertions regarding workplace conditions or worker exposures to SARS-CoV-2 by interviewing employee(s) at the site and use the following guidance:

a. If a healthcare employer claims exemptions from the COVID-19 ETS and CSHOs are able to verify the employer’s claim of either the exemption (based on any of the provisions in section 29 CFR § 1910.502(a)(2); (a)(3) and (a)(4)), or

b. If a non-healthcare employer has not implemented control measures because all employees are vaccinated, and the CSHO is able to verify the employer’s claims that all employees under its control (or all employees in well-defined portions of the workplace), are fully vaccinated, and

c. For both healthcare and non-healthcare employers, it is determined through a review of the injury and illness log, COVID-19 log (for healthcare), and employer or employee interviews that no such work assignments, recorded cases or reports of recent or active
work-related COVID-19 infections resulting in lost work time, hospitalizations or fatalities occurred, and the inspection was initiated as a programmed inspection, then the CSHO shall not proceed with the inspection. No walkaround inspection will be conducted. Such inspections shall be coded “COVID-19” and closed as a “no inspection”. However, if a CSHO is only able to obtain verification of the employer’s exemption after initiating a walkaround inspection, then that inspection shall be closed as “in compliance”.

d. However, if the inspection was initiated by an unprogrammed or follow-up activity, or the establishment is targeted under another LEP or NEP, then the CSHO should proceed with the inspection in order to address additional items alleged or those covered by another emphasis program. The CSHO will inform the employer of their rights and responsibilities under Section 11(c) of the OSHA Act. If the unprogrammed activity that initiated this inspection included an allegation of retaliation, the CSHO shall refer this allegation to the AKOSH Whistleblower Protection Program.

e. If the CSHO determines that unvaccinated workers may be performing tasks which include a high frequency of close contact exposures with increased potential exposure to COVID-19 hazards, then the CSHO shall proceed with the inspection following the procedures in this NEP and Chief of Enforcement discretion for conducting remote inspections.

3. All health hazards observed in the course of any inspection conducted under this NEP shall be appropriately addressed and may be referred for a later inspection as resources permit. For healthcare establishments, a concurrent LEP for Healthcare facilities may be conducted in accordance with AKOSH Program Directive 19-01. During inspections, where safety violations have also been alleged or when they are observed in plain view during the walkaround, CSHOs must address and cite where appropriate. Safety referrals may be made, subject to any current exemptions or limitations on such activity.

4. Citation Guidance: CSHOs shall consult references within this Direction, any internal guidance on Enforcement for COVID-19, the ETS for COVID-19, and current CDC recommendations and guidelines in evaluating whether any OSHA standards or the General Duty Clause, Section 5(a)(1), have been violated and if a citation is warranted. CSHOs will also follow the citation guidance in the AKOSH FOM, chapter 4. Where all the elements for a General Duty Clause violation can be established, the Chief of Enforcement, in consultation with the Director of Labor Standards and Safety (LSS) and the Alaska AG’s office, shall consider issuing a citation.
In all cases where the Chief of Enforcement and the Director determine that an OSHA standard has been violated, AKOSH shall follow current LSS guidance pertaining to issuing a General Duty citation.

5. The CSHO will inform workers of their right to file a whistleblower complaint if they experience retaliation for providing assistance to AKOSH during an inspection, filing a safety and health complaint with AKOSH, reporting a work-related injury or illness, or complaining about SARS-CoV-2 exposure or any other workplace hazards to management, and must promptly refer any complaint of alleged retaliation to the AKOSH Whistleblower Protection Program.

G. CSHO Protection.
1. Where CSHOs are performing an on-site inspection, they must observe all appropriate precautions for distancing, PPE use, hygiene, etc., as described in the ETS CPL and any AKOSH policies. AKOSH’s internal policies relative to CSHO protections during inspections may be updated based on further updates to CDC guidance and COVID-19 vaccination status.
2. All personnel engaged in on-site inspection-related activities must wear appropriate respiratory protection where they are needed.
3. Respirators shall be selected and used in accordance with the respirator selection procedures in AKOSH PD 01-02, Respiratory Protection Program Guidelines.
4. Additional CSHO precautionary guidance and inspection tools are provided in Appendix B of this Directive.

H. OSHA Information System (OIS) Coding Instructions.

All enforcement activities (i.e., inspections, complaints, and referrals, etc.) and compliance assistance interventions conducted under this revised NEP shall continue to be coded as “COVID-19” under the appropriate Code field. Under the former EP this code replaced the previous “N-16-COVID-19” in the Additional Code field for Federal inspections and inspections by State Plan offices that adopted the EP. This EP code shall be applied even if the establishment was not among the targeted NAICS listed in the appendices, as long as COVID-19-related hazardous conditions were investigated.

Since State Plans are required to adopt this revised NEP, upon adoption they shall discontinue use of the “N-16-COVID-19” in the Additional Code field. Additionally, inspections conducted under this NEP are to be coded under Inspection Category as a “Health” inspection unless the inspection was initiated as an unprogrammed safety inspection where no COVID-19 related hazards were initially alleged but were later found during the course of the inspection. In such a case, the inspection should be coded under Inspection Category as a “Safety” inspection.

Whenever a consultation request/visit is made related to this EP, the EP code “COVID-19” shall be recorded in the appropriate field on the Consultation
request/visit forms.

CSHOs should identify any COVID-19 violations or HALs using the Related Event Code (REC) field under the Additional Information Section in the violation screen. CSHOs should select “COVID-19” in the Related Event Code section. If applicable, other Related Event Codes should also be selected to relate the violation or HAL to the fatality, complaint, referral, etc. The COVID-19 Related Event Code is in addition to the other COVID-19 coding required.

**NOTE:** Until further notice, AKOSH will continue to track inspections conducted entirely remotely for COVID-19-related complaints, referrals, or fatalities. When an inspection is conducted entirely remotely, CSHOs shall enter the code “N-10-COVID-19 REMOTE” under the Additional Codes section in OIS for all COVID-19 related inspections that are conducted completely offsite, in addition to the code, COVID-19, for the EP. In addition, AKOSH shall also retroactively code (if not previously done) all COVID-19-related remote inspections conducted since February 1, 2020.

Table 1, below, provides a summary of all COVID-19-related OIS codes including additional codes to be used by On-Site Consultation programs during the Pandemic.
Table 1. List of OIS codes for COVID-19-related inspections/activities

<table>
<thead>
<tr>
<th>OIS Field</th>
<th>OIS Codes</th>
<th>Activity Type</th>
</tr>
</thead>
<tbody>
<tr>
<td>NEP</td>
<td>COVID-19</td>
<td>All enforcement and compliance assistance activities conducted under this NEP (complaints, fatalities, referrals, inspections, etc.)</td>
</tr>
<tr>
<td>Additional Code</td>
<td>N-16-COVID-19</td>
<td>Code will continue to be used only by those State Plans that did not implement the former NEP, but after adoption of this revised NEP, it should not be used by SP</td>
</tr>
<tr>
<td>Additional Code</td>
<td>N-10-COVID-19 REMOTE</td>
<td>Code used for COVID-19-related inspections that are conducted completely off site</td>
</tr>
<tr>
<td>Additional Code</td>
<td>N-10-ABATEMENT DEFERRED*</td>
<td>Inspections of establishments where there were hazards that would normally have been cited, but enforcement discretion was used to defer issuance of violation for COVID-19-related hazards</td>
</tr>
<tr>
<td>Related Event Code (REC)</td>
<td>COVID-19</td>
<td>All COVID-19-related violations and HALs</td>
</tr>
<tr>
<td>Additional Code:</td>
<td>N-30-Abatement Suspension Virus</td>
<td>On-Site Consultation should use this code when abatement cannot be verified due to suspension of activity as a result of the Pandemic</td>
</tr>
<tr>
<td>On-Site Consultation</td>
<td>N-30-Virtual</td>
<td>On-Site Consultation programs should use this code for visits that are conducted virtually as a result of the Pandemic.</td>
</tr>
<tr>
<td>Additional Code:</td>
<td>N-30-SHARP/TEMP CLOSURE</td>
<td>On Site Consultation programs should use this code for SHARP sites, at which their approval period cannot be reevaluated and extended due to the Pandemic.</td>
</tr>
<tr>
<td>On-Site Consultation</td>
<td></td>
<td></td>
</tr>
</tbody>
</table>

*NOTE:* This code was implemented in the early stages of the pandemic and should no longer be used to address enforcement discretion for cases where recently rescinded respiratory protection discretion memoranda were used.
1. **Outreach.**

AKOSH will conduct outreach in accordance with OSHA Memorandum on *Procedures for Local and Regional Emphasis Programs*, December 3, 2014.

Products and activities may include the following:

a. Letters and news releases can assist with disseminating information about this NEP.

b. Conduct outreach activities such as seminars/informational sessions for employer groups, trade associations, as well as worker groups.

c. Working with existing cooperative programs, such as partnerships and alliances, including disseminating information on the NEP and sharing successes and technical information on effective means to control and reduce or eliminate worker exposure to SARS-CoV-2.

d. Forming new working relationships, including partnerships and alliances, and more informal working relationships with organizations that can help disseminate information to small businesses and other employers.

e. Working with On-Site Consultation programs, local Small Business Development Centers (SBDC), and other organizations to reach small businesses.

f. Sharing information on the rights of workers and responsibilities of employers for maintaining a workplace free from retaliation. This includes whistleblower protections and anti-retaliation principles.
Appendix A provides lists of NAICS codes in general industry from the public COVID-19 Enforcement Data (e.g., complaints, FAT/CAT, referrals, inspections, COVID-19-related violations and HALs) where OSHA data shows the highest amount of workers expected to perform tasks associated with exposure to SARS-CoV-2. Tables 1 and 2 in this appendix comprise the NAICS codes for top healthcare and non-healthcare industries, respectively, with OSHA enforcement activities related to COVID-19 over the past year.

NOTE: Employee exposures to COVID-19-related hazards may occur in industries not listed in this Appendix. Similarly, it should not be assumed that employee exposure to COVID-19 occurs in all establishments within the industries listed in the tables below.

For certain industries not included in ListGen (e.g., NAICS 491110, 621111, 621210, 621610, 722511, 722513, and 922140), alternative sources may be utilized (e.g., ReferenceUSA).

### Table 1. Targeted Industries in Healthcare by 2017 NAICS

<table>
<thead>
<tr>
<th>NAICS Code</th>
<th>Industry</th>
</tr>
</thead>
<tbody>
<tr>
<td>621111</td>
<td>Offices of Physicians (except Mental Health Specialists)*</td>
</tr>
<tr>
<td>621210</td>
<td>Offices of Dentists*</td>
</tr>
<tr>
<td>621610</td>
<td>Home Health Care Services*</td>
</tr>
<tr>
<td>621910</td>
<td>Ambulance Services</td>
</tr>
<tr>
<td>622110</td>
<td>General Medical and Surgical Hospitals</td>
</tr>
<tr>
<td>622210</td>
<td>Psychiatric and Substance Abuse Hospitals</td>
</tr>
<tr>
<td>622310</td>
<td>Specialty (except Psychiatric and Substance Abuse) Hospitals</td>
</tr>
<tr>
<td>623110</td>
<td>Nursing Care Facilities (Skilled Nursing Facilities)</td>
</tr>
<tr>
<td>623210</td>
<td>Residential Intellectual and Developmental Disability Facilities</td>
</tr>
<tr>
<td>623310</td>
<td>Continuing Care Retirement Communities</td>
</tr>
<tr>
<td>623312</td>
<td>Assisted Living Facilities for the Elderly</td>
</tr>
</tbody>
</table>
### Table 2. Targeted Industries for non-Healthcare by 2017 NAICS

<table>
<thead>
<tr>
<th>NAICS Code</th>
<th>Industry</th>
</tr>
</thead>
<tbody>
<tr>
<td>311612</td>
<td>Meat Processed from Carcasses</td>
</tr>
<tr>
<td>311611</td>
<td>Animal (except Poultry) Slaughtering</td>
</tr>
<tr>
<td>311615</td>
<td>Poultry Processing</td>
</tr>
<tr>
<td>445110</td>
<td>Supermarkets and Other Grocery (except Convenience) Stores</td>
</tr>
<tr>
<td>452210/452311</td>
<td>Discount Department Stores**</td>
</tr>
<tr>
<td>491110</td>
<td>Postal Service*</td>
</tr>
<tr>
<td>493110</td>
<td>General Warehousing and Storage</td>
</tr>
<tr>
<td>561320</td>
<td>Temporary Help Services***</td>
</tr>
<tr>
<td>722511</td>
<td>Full-Service Restaurants*</td>
</tr>
<tr>
<td>722513</td>
<td>Limited-Service Restaurants*</td>
</tr>
<tr>
<td>922140</td>
<td>Correctional Institutions (Public Administration Sector)*</td>
</tr>
</tbody>
</table>

**NOTE:** For certain industries such as Home Health Care Services NAICS 621610, Offices of Physicians (except Mental Health Specialists) NAICS 621111, Offices of Dentists NAICS 621210, Postal Service NAICS 499110, Full-Service Restaurants, NAICS 7224511, Limited-Service Restaurants NAICS 722513, and Correctional Institutions (Public Administration Sector) NAICS 922140, some of which have had a large number or high rate of COVID-19-related complaints in some communities during 2020, Area Directors should use discretion based on local information pertaining to COVID-19-related workplace exposures, to determine whether they should be considered in the generating of their master lists of establishments. These industries are not automatically included in the Office of Statistical Analysis (OSA) targeting lists for programmed inspections. Additionally, the private and contractor-run sectors that are equivalent for Correctional Institutions fall under NAICS 561210 and can similarly be targeted based on local knowledge.

**NOTE:** For Discount Department Stores, the 2012 NAICS, 452112, has changed. Area offices should be aware that these establishments may now be classified under either of two new 2017 NAICS, 452210 (Department Stores) or 452311 (Warehouse Clubs and Supercenters), depending on whether they have significant perishable grocery sales.

**NOTE:** Establishments within the Temporary Help Services (NAICS 561320) industry should not be automatically included in the targeting list for programmed inspections. Although this industry has been among the top industries with OSHA enforcement activities related to COVID-19, this has primarily occurred where services occurred at host healthcare facilities and other high-hazard workplaces. Therefore, to effectively address SARS-CoV-2 hazards for Temporary Help Services, where OSHA is conducting an inspection for other purposes, a COVID-19-related inspection shall be opened for all hazardous conditions observed in plain view (such as, for example, temporary employees working in high exposure areas without adequate PPE).

Appendix A-2
APPENDIX B: CSHO Pre-Inspection Checklist

Here are some things to consider before proceeding with any inspection:

- Ensure the availability and use of all necessary and appropriate respiratory protection or face coverings.
- Ensure all PPE, inspection equipment, and media are retrievable and ready for use.
- Review any relevant cleaning procedures for equipment and the vehicle or state.
- For all COVID-19 inspections, the manager/supervisor/CSHO, in consultation with designated AKOSH staff, will develop and document a risk assessment that includes an exposure control plan, Job-Hazard Analysis, and PPE hazard assessment prior to entry and update it as necessary for each inspection, to include individual inspection risks that may not otherwise be captured in a general or overall worksite assessment. Individual inspection risks may be based on factors such as industry type, on-site hazard location, or local infection rate.
- Ensure AKOSH vehicle is road-ready to include gas/fuel, first aid kit, hand sanitizer, disinfecting wipes, or other cleaning and/or disinfecting agents (as required), and bags to dispose of contaminated PPE and used disinfecting wipes.
- Develop a document request letter in advance of the opening conference (e.g. programs, OSHA Form 300/300A, and summaries) to be provided to the employer during the opening conference if needed.

**NOTE:** AKOSH’s internal policies relative to CSHO protections during inspections may be updated based on further updates to CDC guidance and COVID-19 vaccination status.