COVID-19 HARVEST PROTOCOLS WEBINAR
JULY 7, 2020 - FAQ

Answered by:
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Q: ***Can wearing face coverings impact employees who need to enter a tank? This could impose a risk by restricting oxygen in a winery environment with elevated levels of CO2. We've discussed ways of improving ventilation in tanks and the facility. While updating our internal risk register, we identified other harvest activities that need mitigation controls, and the one that has me concerned is safe tank entry, due to the close proximity a team is in while doing this.***

A: First, tank entry should be done under a permit, and one of the criteria that needs to be met is adequate oxygen levels in the atmosphere and all contaminants below allowable limits. The CO2 limit is high, 5,000 ppm, but oxygen deficient atmospheres are far more dangerous, resulting in loss of consciousness within seconds if the O2 level is below 16% in the atmosphere. Adequate testing of the atmosphere before and during entry is critical to assuring adequate oxygen levels. Second, unless the person using the face covering has compromised breathing capacity, the face covering should not impede their ability to function provided there is an adequate O2 level. Regardless of whether you are providing N95 filtering facepieces or non-respirator face coverings, the prudent step would be to consult your medical provider on the question of how to evaluate the employee's ability to wear either a respirator or the face covering. Finally, neither NIOSH-approved respirators nor the face coverings will affect the oxygen level being breathed. What is in the incoming air will be what the worker breathes.

For more Information:

- Article 108. Confined Spaces

Q: ***Are there social distancing measures we need to take into account if we supply housing to interns? For example, is there a limit to how many people can share a room within an employer provided house?***

A: There is no specific OSHA requirement prohibiting a certain number of people who can share a bedroom. State public health orders or guidelines may restrict the number of people who can be in a space; many have limits of 10 or fewer. We are not aware of any guidelines or requirements that limit the number of people based on the amount of space available, so that employers should consider how to craft appropriate policies to allow for people to maintain adequate separation under current guidelines, such as providing limitations on capacity in shared common areas. The CDC acknowledges that shared housing residents could face challenges with social distancing. It recommends that people follow these measures (which do not include any specific advice for the number of people per room). This is not the full list, but a few of CDC's recommendations for shared housing that employers may need to follow. Include plans in your compliance program to address these and other CDC and state public health guidelines.

- Stay six feet apart from others that you do not live with. Use signs, tape marks, or other visual cues placed six feet apart to indicate where to stand in areas where congregation is likely to occur (i.e., clocking in/out, safety trainings, picking up equipment, sorting and destemming activity, rest and meal breaks, etc.)
- Provide sanitary face covers for all workers and monitor that employees are properly-wearing face covers. Employer provided face covers should not be reused without cleaning according to manufacturer recommendations (or at least after each shift in the absence of manufacturer recommendations).
- Arrange for a person in the facility to get the supplies you need.
- Make sure you are up to date on your medications (and contact your healthcare provider to get extra necessary medications to have on hand for a longer period of time).
- Provide adequate sanitation/disinfection supplies in common areas (i.e. hand sanitizer, soap, disinfectants) and encourage liberal use.
- Remind people who use shared kitchens, dining rooms, laundry rooms and bathrooms to schedule use so they can maintain six feet separation to the extent feasible. A system of reservations or other scheduling to limit use to a maximum capacity may be necessary.
- Provide adequate supplies of dishes, cups and utensils so each person can have a dedicated set, and provide ways to identify them.
- Set up procedures and policies so that in shared activity rooms (like pools and exercise rooms) adequate separation can be maintained. A system of reservations or other scheduling to limit use to a maximum capacity may be necessary.

Additional Resources:

- CDC's Advice for Shared Housing
- Shared or Congregate Housing

Q: ***Must all COVID-19 positive cases be recorded in OSHA 300?***

A: Not necessarily. Under OSHA's recordkeeping requirements, COVID-19 is a recordable illness, and therefore employers must record COVID-19 cases if:

- The case is a confirmed case of COVID-19, as defined by the Centers for Disease Control and Prevention (CDC);
- 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. Please be advised, there are differences in recording criteria between Federal and Cal/OSHA.

For more Information:

- Recording and Reporting Requirements for COVID-19 Cases

The challenge will be to determine if the case is work-related. A single case in a workplace with no other known positives is unlikely to be work-related, but subsequent cases may well be. Factors like proximity of workstations, overlap of schedules and attendance, use and activity in common areas, the extent of community infection at the time of diagnosis, among numerous other factors, may impact the determination of work relatedness. Unlike the CDC guidance that "no other explanation" is available to explain symptoms, work-relatedness may exist even if there is a plausible alternative explanation.

The conclusion that the case is not work-related depends in effect on excluding work as a potential cause. OSHA intends that a presumption of work-relatedness be applied in the absence of persuasive information that the case was caused by non-work factors. In addition, the California Office of the Governor, similar to other states, issued Executive Order N-62-20, creating a rebuttable presumption that an employee's COVID-19-related illness arose out of the course of employment for workers' compensation purposes provided that the employee tested positive or was diagnosed "within 14 days after a day that the employee performed labor or services at the employee's place of employment at the employer's direction." This presumption does not apply if the employee worked from home.

OSHA is exercising enforcement discretion to assess employers' efforts in determining whether a COVID-19 case is "work related," considering the reasonableness of the employer's investigation, and the evidence available.

Additional Resources:

- Revised Enforcement Guidance for Recording Cases of Coronavirus Disease 2019 (COVID-19)
- Executive Order N-62-20

Q: ***Are temperature checks mandatory or can we require self-assessments? When doing the wellness screening at the start of each shift, is it required that we record information such as thermal temperature? If we request questionnaires be filled out or take temperatures, it sounds like the key thing is to not keep records, otherwise privacy requirements would be hard to adhere to, correct? What is the privacy form needed when monitoring body temp?***

A: There is no specific regulation mandating that employers require temperature checks of employees or that they record the results of temperature checks. Employers should consider the risk of exposure to COVID-19 in the workplace and determine if temperature checks are an appropriate method of prevention for employees. OSHA's general duty clause requires employers keep employees safe from recognized hazards that are likely to cause serious injury or death.

For more information:

- CDC General Business FAQ > "Should we be screening employees for COVID-19 symptoms (such as temperature checks)? What is the best way to do that?"

If an employer performs temperature checks on employees, please be aware that this constitutes a medical examination and the results are subject to confidentiality requirements under the ADA.

Additional Resources:

- EEOC Guidance

OSHA has also said that if an employer takes employees' temperatures and chooses to record the results, these records may qualify as medical records under the Access to Employee Exposure and Medical Records standard (29 C.F.R. 1910.10200), in which case, the employer would be required to retain these records for the duration of the worker's employment + 30 years and follow confidentiality requirements. However, employers can also choose not to make a record of temperatures when they screen workers and instead just acknowledge a temperature reading in real time, in which case, recordkeeping requirements would not be triggered. Also, temperature records do not qualify as medical records under the Access to Employee Exposure and Medical Records standard unless they are made or maintained by a physician, nurse, or other health care personnel, or technician.

Additional Resources:

- OSHA Guidance for Returning to Work

Q: ***If hourly employees are asked to take a survey at home and perform temperature checks, should they be paid for that time?***

A: Employers should consider the possibility that the time an employee takes to check his or her temperature (per the employer's policy mandating temperature checks) or fill out a survey at home may be compensable under the FLSA. This area is unsettled. The FLSA requires that employees be paid for "principal activities" that the employee is employed to perform and includes work of consequence performed for the business and activities that are an integral part of the employee's principal duties.

An employee can argue that the time it takes to take his or her temperature is an integral part of the job if the employer requires temperature checks as a condition for coming into work. Whether an employer must compensate employees for time spent on temperature checks or surveys will be a fact-specific inquiry.

For more information visit:

- DOL FLSA Hours Worked Advisor

Q: ***All my employees are related and live together. Will OSHA require me to enforce a distance of six feet between them and face coverings?***

A: OSHA does not mandate social distancing or cloth face coverings. An employer may institute a policy requiring social distancing and face masks and enforce its policies on its own employees in the workplace. In situations where employees are all related and live together, the employer can decide to not require social distancing or face masks, but institute other measures to prevent customers who may come into the work place, such as requiring masks for when employees interface with customers or installing barriers between employees and customers.

As discussed above, employers should be aware that employees could allege violations of OSHA's general duty clause for the employer failing to require face masks or social distancing. The General Duty Clause generally requires that employers keep employees safe from recognized hazards that are likely to cause serious injury or death. If an employee can demonstrate that social distancing and face coverings are a "feasible and useful method to correct the hazard" of COVID-19, then an employer could be liable under the General Duty Clause. However, whether an employee would be successful in making such a claim is highly fact specific—particularly in the context of a workplace where all of the employees live together and are family members, and in consideration of the other protective measures the employer implements to abate the hazard. Please note, employers must also adhere to state and local public health orders which may require masks or further health and safety precautions.

Q: ***Are there any studies available regarding employee breathing (oxygen uptake) during manual work in hot conditions while wearing face masks?***

A: Based on a quick search, we have found a few studies online (please note we have not reviewed them and cannot confirm their accuracy), but there are studies on the subject publicly available:

- Effects of wearing N95 and surgical facemasks on heart rate, thermal stress and subjective sensations
- Protective Facemask Impact on Human Thermoregulation: An Overview"

California has a heat stress standard requiring employers to take steps to mitigate risk of heat illness where temperatures exceed 95°F. Employers should consider incorporating the requirements to wear face coverings into their heat stress program.

Consistent with CDC guidelines below, employees should be encouraged to remove the face coverings if they can maintain separation in hot environments, and employers should take additional steps to implement heat stress control such as providing breaks in shaded areas, adequate water supplies and adequate breaks in work schedules.

CDC has released some information on its webpage "Considerations for Wearing Cloth Face Coverings" to address heat stress. The CDC states that people who "work in a setting where cloth face coverings may increase the risk of heat-related illness may consult with an occupational safety and health professional to determine the appropriate face covering for their setting.

Outdoor workers may prioritize use of cloth face coverings when in close contact with other people, like during group travel or shift meetings, and remove face coverings when social distancing is possible."

The CDC states that if cloth face coverings cannot be used, then employers can use other measures to reduce the risk of COVID-19 spread, including social distancing, frequent hand washing, and cleaning and disinfecting frequently touched surfaces.

Q: ***If we required handwashing at regular intervals and an employee develops a rash from the hand washing, would we be at fault?***

A: There is no specific OSHA standard that would be violated if an employer implemented such a rule, however, employers need to make sure that mitigation of one hazard does not create another. Employers who have employees experiencing health issues from hand-washing, such as a rash or eczema, can provide hand lotions or hand creams in restrooms to help prevent the side effects of over-washing skin. The employer can also provide hand sanitizers if employees experience issues with hand washing.

Q: ***How can we manage sampling vineyards in trucks with multiple employees? Is there a way to keep our employees safe and still travel in vehicles together? What if transportation was not provided by an employer (e.g. employee carpool)?***

A: If employees are traveling in vehicles together (hence, unable to social distance), there are other protective measures that can be implemented such as requiring face masks, leaving windows down to increase air flow in the car, disinfecting the inside of the vehicle, or requiring a limited number of employees per car.

The CDC has issued guidance for cleaning and disinfecting non-emergency vehicles. If employees carpool using their own cars as part of their job duties (during the work shift), the employer still must require that these precautions be taken in an employee's vehicle.

For more information visit:

- Cleaning and Disinfection for Non-Emergency Transport Vehicles

Q: ***Do we need to assign a specific employee to look out for sick employees or those who appear to be sick, or can anyone report it to HR anonymously?***

A: There are no federal requirements that one individual needs to be responsible for monitoring sick persons in the workplace. This responsibility can be shared by all employees or it can be assigned to a supervisor.

Q: ***Is there any consideration to do pool testing? How frequent should it be done?***

A: FDA guidance about pooled testing is under development. Recently, the FDA gave emergency authorization to Quest Diagnostics to pool samples from up to four individuals. The FDA has stated that this testing strategy is most efficient in areas with low prevalence (meaning most results are expected to be negative).

For more information visit:

- COVID-19 Update: Facilitating Diagnostic Test Availability for Asymptomatic Testing and Sample Pooling
- COVID-19 Update: FDA Issues First Emergency Authorization for Sample Pooling in Diagnostic Testing

Q: ***Every time the State or local authority updates its protocols for COVID-19 do we have to update our IIPP?***

A: As a best practices, employers should ensure their Injury and Illness Prevent Program ("IIPP") is consistent with updated guidelines and regulations promulgated by Cal/OSHA, Fed/OSHA, and the CDC. For example, Cal/OSHA and Fed/OSHA have instructed employers that it is mandatory to adopt changes to their IIPP that implement infection control measures to curb employees' exposure to COVID-19. Cal/OSHA also generally recommends that employers review applicable and relevant CDC guidelines related to workplace safety. Therefore, we recommend updating your IIPP to remain consistent with the new protocols.

Q: ***Is it ok to provide each vineyard worker with a gallon jug for their own use to bring drinking water?***

A: It is generally fine for an employer to provide (free of charge) each employee with a reusable water bottle in lieu of using shared water stations or dispensers. However, Cal/OSHA's July 2, 2020 guidance for the agriculture industry states that employers should "consider providing individual water bottles instead of water containers and cups to prevent repeated contact with the dispense nozzle." Accordingly, employers should not permit their employees to fill up the reusable water bottles at the worksite, and instead should require employees fill up their water bottles ahead of time at home. Employers may also want to provide additional single use, recyclable water bottles in the event an employee drinks all of the water they brought from home.

Q: ***What timeframe should we consider as the potential infection, once we have been notified an employee is ill and/or has tested positive. Additionally, the concern is how to stop the spreaders from the time of notification until receiving the test results?***

A: 48 hours prior to the onset of symptoms. Employees exhibiting symptoms of COVID-19 should self-quarantine at home while awaiting testing results and for a period of 14 days.

Q: ***Is there a roadmap on how to develop a worksite safety plan?***

A: Cal/OSHA's website provides a tool to develop a generic IIPP. With respect to developing a worksite safety plan related to COVID-19, there is not a template. As a result, employers are advised to work with their worksite safety and employment legal counsel to adopt a plan that addresses their specific worksite.

For more information visit:

- COVID-19 Employer Playbook - For a Safe Reopening

Q: ***For your labor crews they all share the orange/yellow water jugs, should we also require individual ones?***

A: Employers should discontinue the use of shared/common water jugs/dispensers. In lieu of using shared water jugs/dispensers, employers should provide single-use, recyclable water bottles, or reusable water bottles that the employee can fill at home.

Q: ***Can you name the privacy form now needed when monitoring body temp?***

A: Employers do not typically need to obtain written consent to take employees' temperatures during a pandemic, assuming the test is not invasive. That being said, some employers are asking their employees sign acknowledgment/consent forms for the temperature checks. Additionally, in California, businesses covered by the California Consumer Privacy Act (CCPA) may be required to provide a disclosure called a "Notice at Collection." This Notice must describe at the time of collection, what information is being collected (body temperature) and the purpose(s) for which the information will be used (to maintain a safe work environment). This may be done through a general notice to all employees or by posting a disclosure at the site where temperatures are being taken.

Q: ***We had a positive case and stopped business, we asked all employees to take the test and are therefore not working. Are the employees eligible for the family first act protection (80 hours of sick) until they get their results back?***

A: If the employees were scheduled to work but are instructed to stay out until they are tested and received test results, the employees are likely entitled to paid sick leave under the Families First Coronavirus Response Act.

Q: ***Please clarify, should employers notify other possibly exposed employees after a positive test or while waiting for results of the potential case?***

A: Yes. Ask the infected employee or the employee that is awaiting test results who he or she has come in contact with or worked in close proximity to (within six feet) during the previous 14 days. These employees may or may not be required to be sent home to self-quarantine (based on the 4/8/20 CDC guidelines). Speak with potentially impacted employees on an individual basis (without identifying the employee who has tested positive or is awaiting test results) and ask about their symptoms (if any). Best practices dictate that employees who came into close proximity to the positive COVID-19 employee should be sent home for 14 days. While quarantined, employees should self-monitor themselves for symptoms, avoid contact with high-risk individuals, and seek medical attention if symptoms develop.

Q: ***What is the maximum number of workers allowed at this time for safety trainings? It was 10 or less, has that changed?***

A: In California, indoor gatherings are currently capped at 10 people. Therefore, if the safety trainings are taking place indoors, then employers should continue to limit those trainings to 10 people at a time.

Q: ***What is my responsibility to ensure third-party contractors follow these protocols?***

A: Businesses are encouraged to speak with companies that provide their business with contract or temporary employees about the importance of sick employees staying home and encourage them to develop non-punitive leave policies. Operationally, this means a business should engage in an active dialog regarding COVID-19 workplace safety and health measures with their third-party service providers.

Businesses should also consider informing their third-party service providers of updated guidance issued by Cal/OSHA, the CDC, local health authorities, and other entities and encourage third-party service providers to follow all applicable guidance and best practices. Businesses may even consider inquiring about the measures that third-party service providers are taking regarding COVID-19. However, businesses must remain mindful of not overstepping legal boundaries in these discussions, which could cause joint employment or independent contractor misclassification concerns.

Additionally, once businesses have assessed their own policies, and started engaging in a dialogue with these third-parties, businesses should review their contracts with each third-party service provider to determine whether modifications should be made in light of the COVID-19 pandemic.

Q: ***How do we prevent employees from attending social gatherings and doing irresponsible things when it is on their own time?***

A: An employer generally cannot prohibit what an employee does when they are "off-the-clock" and employees have a protected right under California law to engage in lawful, off-duty conduct (including political activism/speech) and cannot be retaliated against for doing so.

However, employers have a right (and are, in fact, required) to adopt and enforce workplace safety rules to prevent the spread of COVID-19 in the workplace. That could include barring employees who are not complying with federal, state, and local health and safety orders and guidance from the workplace.

To that end, rules need to be applied and enforced equally. In other words, employers cannot choose to bar only those employees who have attended mass protests and/or include a question on a screening questionnaire aimed only at determining whether employees have attended such gatherings, but not ask about attendance at other types of large gatherings, such as church services.

Q: ***We have had a few employees who had contact outside of work with someone who tested positive. They had no symptoms, were ordered to quarantine and underwent testing. Our process was to conduct meetings with other employees as soon as we were notified. The interview were geared to determine if there was close direct contact or not. All employees in separate interview confirmed that there was no direct contact. Also kept 6' distance, did not share tools and wore masks at all times. Our response was to provide thermometers and have them self-monitor health symptoms. The employee ended up testing positive and we communicated that to their co-workers. Do you see any gaps or issues with this protocol?***

A: a.) Yes, there are a few things that we recommend changing and implementing:

(1) After learning that one or more employees has been diagnosed with COVID-19, you should act quickly to have the infected employee identify all other employees and/or third parties who might have been exposed during the infectious period, in the last 14 days.

a. Ask the infected employee to identify all individuals who fall in the "6-15-48" zone: those who worked in "close proximity" (within six feet) for a prolonged period of time (15 minutes or more) with the infected employee during the 48-hour period before the onset of symptoms. Employers should also ask what shared spaces the employee may have visited.

(2) You should also ask the employee if the employee will consent to disclosure of their name when notifying other workers and secure a signed authorization. If the employee does not consent to the employer releasing their identity, then employers should maintain confidentiality and not disclose the person's identity to others.

(3) Notify the identified workers who were in close proximity to the positive COVID-19 employee and send them home for 14 days. While quarantined, you should instruct employees to self-monitor for symptoms, avoid contact with high-risk individuals, and seek medical attention if symptoms develop.

We also direct you to the following Legal Alerts and free forms which have additional guidance:

- An Employee Has COVID-19 Now What? An Employer's Quick 7-Step Guide
- 6-15-48:
  These 3 Numbers Offer A Simple Way To Understand Contact Tracing In The Workplace
- Authorization To Disclose COVID-19 Diagnosis or Exposure
- Model Announcement to Employees about Positive Tests

Q: ***How would a confirmed COVID-19 case for an employee that wasn't working for the last 10 days for non COVID-19 reasons be handled for reporting?***

A: Under Cal/OSHA's guidance on recording and reporting COVID-19 cases, evidence suggesting transmission at or during work would make a positive case of COVID-19 reportable. Employers should consider the following factors to determine if there was a transmission at the work-site: (1) multiple cases in the workplace; (2) the type, extent and duration of contact the employee had at the work environment with other people, particularly the general public; (3) physical distancing and other controls that impact the likelihood of work-related exposure; and (4) whether the employee had work-related contact with anyone who exhibited signs and symptoms of COVID-19.

Even if you cannot confirm that the employee contracted COVID-19 at work, employers should report the illness to Cal/OSHA if the illness results in in-patient hospitalization for treatment and if there is substantial reason to believe that the employee was exposed to COVID-19 in their work environment. Where there is uncertainty about the work-relatedness of an injury or illness, employers should refer to CCR §14300.5 and CFR §1904.5 for determination criteria.

In this hypothetical, the employee has not worked for the last 10 days, and therefore may not have had any work-related exposure given the lack of contact with other employees or customers prior to developing COVID-19. As such, based on the information you have provided, this is likely not a reportable case of COVID-19.

For more information see:

- § 1904.4 - Recording criteria
- § 14300.5 - Determination of Work Relatedness

Q: ***With COVID-19, can you now require employees to not congregate during rest and meal breaks?***

A: Employers can require that employees follow all physical distancing protocols and procedures to prevent the spread of COVID-19. This includes staying six-feet apart at all times and limiting use of common areas to one employee at a time.

Q: ***When an employee shares that they are ill and have gone to get tested, what does an employer do? Notify all employees, and when? What timeframe do we consider the "infection" time? Do we wait until the sick employee's test results are in (which is now up to eight days later)?***

A: The answer to your question depends on if the employee reports having COVID-19 symptoms, or if the employee is simply getting tested to see if they've had COVID-19 in the past.

If the employee was in the workplace within 48 hours of the onset of symptoms, then employers must do contact tracing and notify any employees that came into close contact with the potentially infected employee.

Q: ***Employees should be paid to fill out forms before a shift (i.e clock in, then filling out the form), right?***

A: Although no case law or Department of Labor guidance is directly on point regarding this topic, we recommend the employers err on the side of paying employees throughout the screening process. This should be done to avoid any wage and hour issues relating to the non-payment of de minimis time. As such, employers should require employees to clock-in before they begin the screening process.

Q: ***Do you recommend us having crews self-quarantine if someone from the crew comes out positive?***

A: If a worker has a confirmed positive case of COVID-19, employers should determine which other workers may have been exposed to the virus. Those individuals who are determined to have been in close contact with the positive employee should follow the public health guidance for close contact. Critical infrastructure workplaces should follow this guidance for workers who may have had exposure to a person with suspected or confirmed cases of COVID-19.

For more information see:

- Public Health Guidance for Community-Related Exposure
- Implementing Safety Practices for Critical Infrastructure Workers Who May Have Had Exposure to a Person with Suspected or Confirmed COVID-19

COVID-19 HARVEST PROTOCOLS F.A.Q. DISCLAIMER

In an effort to increase health and safety awareness amidst the COVID-19 crisis and to improve health and safety practices, California Sustainable Winegrowing Alliance, Wine Institute and California Association of Winegrape Growers (collectively referred to as "Organizations") offered protocols and a webinar related to winegrape harvest. As a follow up to those resources, Organizations are proud to offer this Frequently Asked Questions ("FAQ") document. Prior to the use of this document, please review with your company legal department or outside counsel.

The FAQ document offers a series of general responses to frequently asked questions related to winegrape harvest and COVID-19. The information contained in this document was drawn from guidance from state and federal governmental agencies, including CDC, OSHA, and FDA, and legal experts.

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Users of the COVID-19 Harvest Protocols FAQ document should be aware that the information contained may be superseded at any time by the issuance of new editions, guidance from governmental organizations or may be amended from time to time through the issuance of amendments, updates or corrections. All documents include the date of last revision, information contained in the documents is relevant to the date of last revision located at the top right corner of page 1.

Other Websites

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