

Focus on the "Facility" in Skilled Nursing Facility (SNF)

• "F" in SNF stands for "Facility"

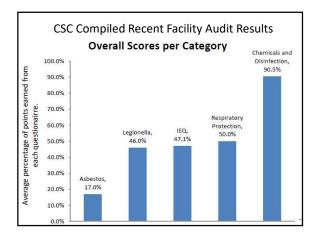
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- "SN" or "Skilled Nursing" seems to get all the attention, the glory & blame.
- But, the "F" has to be on point (Ambient, Comfortable, Compliant, and Safe) or the "SN" cannot be effective.

Summary of the Presentation

- A good indoor environment is everyone's responsibility and requires a holistic or layered approach.
- But, no matter how amazing your clinical, administrative, environmental services, or public relations teams may be, if you ignore the facility, people are in danger.
- Your facilities are complicated and require skill, though, effort and resources.

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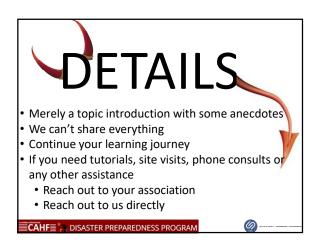


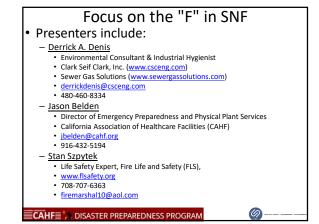


Prepare to learn...

- Tips and tricks to...
 - -Keep you in compliance
 - –Save time
 - -Save money
 - -Save lives
- by focusing efforts on...
 - -Facility design
 - -Facility operation (normal & emergency)
 - -Facility preventative maintenance (PM)

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Building design, construction, maintenance and use can adversely and/or positively affect occupant health.

Let's discuss

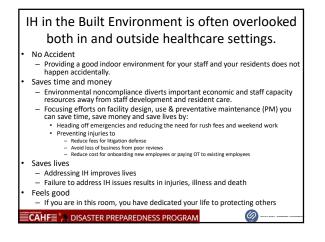
- Terminology associated with good indoor environmental quality (IEQ)
- How all building systems are interconnected

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- Common hazards in the built environment you should know (Legionella, Mold, Asbestos, Sewer Gas, etc.)
- How the built environment & compliance (EPA & OSHA & CMS) are interconnected
 - (e.g. respiratory standards, regulated materials, chemical use & storage laws, etc.)

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It takes a village...

- Call it what you like...
 - -Infection prevention (IP),
 - -Good indoor environmental guality (IEQ), or
 - -industrial hygiene (IH)
- By any name it requires... -a holistic or team approach, and -is everyone's responsibility.

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Verticals in long term care, such as SNFS including, but are not limited to: Outside vendors Administration general contractors, Clinical - HVAC contractors, Building Engineering - plumbers, Occupational Therapy cooling tower maintainers, Custodial - pool maintenance firms, Kitchen etc. **Environmental Services** Landscaping

- (Laundry)
- Residents Infection Prevention • Visitors
- CAHF

But, other verticals have extremely important and often overlooked roles to play in LDB control (1) Administration -

 Needs to promote a culture of safety, to make IEQ (including water quality and LDB control) an emphasis, and to provide budgets

Clinical -

Needs to be tracking atypical pneumonia for patterns and should be recommending lab work for Legionellosis.

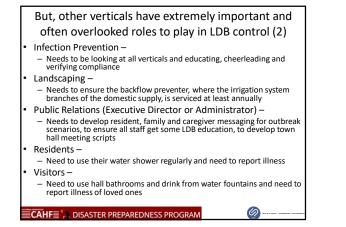
Custodial -

 Needs to be running bathroom faucets & showers, kitchen faucets and showers, custodial mop sinks, etc. for 3-5 minutes regularly in every unit

Kitchen -

- Needs to regularly change coffee maker filter, change ice maker filter, clean ice machines and verify sanitizer temps are 170 F.

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Everything is Connected...

- Everyone (every department/every vertical) —needs to consider and understand
 - how their work affects others, and
 - -needs to see the bigger picture of resident and staff health.

Verticals are often operated as islands or little fiefdoms, when in fact they are all part of a bigger picture.

- Infectious agents or environmental hazards are not limited to any single vertical.
- If fact, hazardous and infectious agents affect, and are affected by, all verticals.
- Often the points of failure are at the interface between verticals
- Plumber/HVAC
- Building Engineer/Custodian

- Environmental Services/Clinical

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Do no harm, Do know harm...

- IPs MUST understand building science.
- Building engineers MUST understand infection prevention.
- Custodians MUST understand aseptic techniques.
- Clinicians MUST understand Environmental Services

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• Administrators MUST understand everything.

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Do no harm, Do know harm...

 "I didn't know" or "It's not my job" are not acceptable responses to HAIs (healthcare- associated infections)



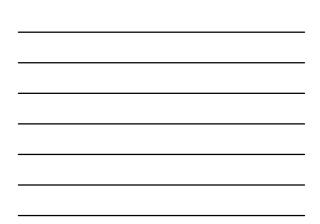
Examples of opportunities for improvement

- Common to find utility sinks called "hoppers" which failed to drain or are inoperable.
- This becomes a sanitary issue and a legionella issue because the fixture cannot be effectively flushed.



 When did you last flush, clean and/or disinfect your portable eye wash?

 Image: Comparison of the second s











Tan Water

- Does your cold or hot water supply look like hot chocolate?
- Off color does not mean LDB.

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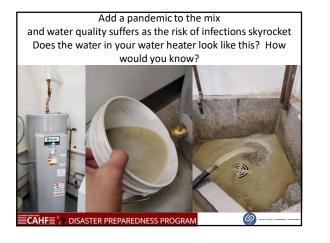
- Clear does not mean an absence of LDB.
- But, tan water is indicative of a lack of PM or a water supply problem.

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De facto Dead Leg. Simply and unused or underused plumbing run or fixture. Example: 15 Year old fixture. Never even used once.































• Legionellosis refers to 2 disease presentations:

- Pontiac Fever
 - Flu-like symptoms
 - Self-resolving
 - Affects healthy adults
- Legionnaire's Disease (LD) Bacterial pneumonia
 - Can be fatal
 - 10% fatality rate general population
 - 40% fatality in healthcare settings
 - Affects vulnerable populations

 Immunocompromised , elderly, smokers, people with lung disease, etc.
 - Healthcare Associated Legionnaires Disease (HCALD)

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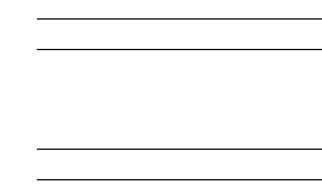
What Causes Legionellosis • Legionnaire's Disease & Pontiac Fever

- Both caused by inhalation of water droplets (mist) containing viable common waterborne bacteria called Legionella pneumophila
- Typically serogroup 1, but 2-14 and nonpneumophila species can cause the disease
- Collectively these bacteria are commonly referred to as Legionella Disease Bacteria (LDB)

A Disease of the Built Environment

- Naturally occurring LDB in freshwater LDB is at insufficient quantities to cause disease
- The water reaching your facility or your home IS NOT STERILE, municipalities merely control microbes at delivery
- Pool example:



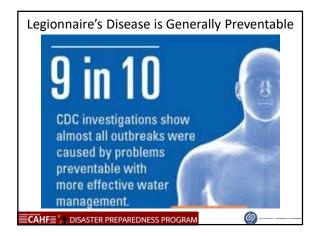


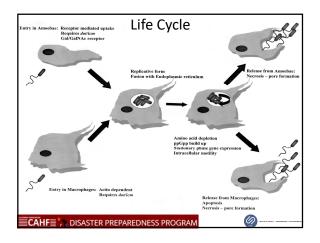
Indoors factors in the built environment can promote amplification and colonization such as:

A Disease of the Built Environment

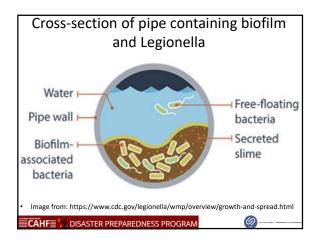
- Large complex built water systems
- Warm Temperature (77 to 108 °F)
- Stagnation
- Scale
- Sediment
- Biofilm
- Protozoa
- Absence of disinfectant
- You have some or complete control over all of these factors

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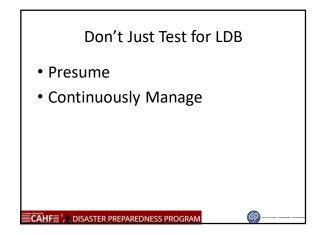










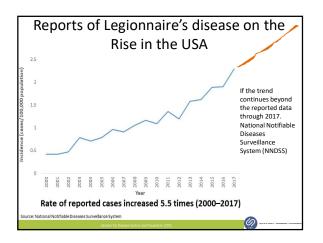


Legionnaires' Disease

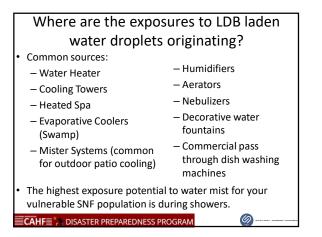
- CDC says health departments reported ~ 10,000 cases of Legionnaires' disease in the US in 2018.
- But, Legionnaires' disease is likely underdiagnosed & therefore underestimated.
- A recent study estimated the true number of Legionnaires' disease cases may be 1.8–2.7 times higher than reported.

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• Atypical pneumonia can often be Legionnaires' Disease







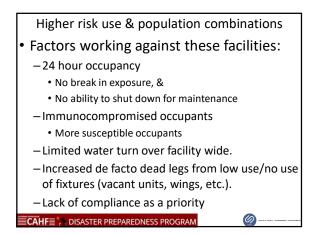


Higher risk use & population combinations

- Examples
 - -Healthcare settings
 - Healthcare Associated Legionnaires Disease (HCALD)

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- Hospitals
- Senior living
- Skilled Nursing
- -Institutions
 - Prisons,
 - Mental health facilities,
 - Boarding schools



Federal Compliance

- 42 CFR §483.80 Infection Control for Skilled Nursing Facilities & Nursing Facilities:
- "The facility must establish and maintain an infection prevention and control program designed to provide a safe, sanitary, and comfortable environment and to help prevent the development and transmission of communicable diseases and infections."

CMS Compliance

- Facilities receiving Medicare & Medicaid funding are required to incorporate Legionella controls in a WMP
- Per the CMS memo QSO-17-30-Hospitals/CAHs/NHs, released on June 2, 2017 (Updated July 6, 2018), titled, "Requirement to Reduce Legionella Risk in Healthcare Facility Water Systems to Prevent Cases & Outbreaks of Legionnaires' Disease (LD)",
- "Facilities must develop and adhere to policies and procedures that inhibit microbial growth in building water systems that reduce the risk of growth and spread of Legionella and other opportunistic pathogens in water."
- This memo references the ASHRAE Standard 188-2015: Legionellosis: Risk Management for Building Water Systems June 26, 2015

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LDB are ubiquitous, so what should we do?

- In LDB that causes Legionellosis is omnipresent in our water supply
- So, we must take proactive & recurring steps in line with the general infection control guidelines.
- Be in compliance with ASHRAE Standard 188-2015: Legionellosis: Risk Management for Building Water Systems June 26, 2015 (ASHRAE 188):
 - -to manage incoming LDB,
 - to make plumbing systems less hospitable, &
 to reduce the likelihood of LDB colonization
 - fuce the likelihood of LDB colonizatio

General IC Principles Apply to LDB Control

- Germs (bacteria, viruses & molds) are all around us. (LDB is with us)
- What are some ways to prevent exposure to germs?
 - You use disinfectants like had sanitizer? (Maintain Chlorine Levels)
 Using hand sanitizer does not make you hands sterile.
 Hand sanitizers reduce the concentration of viable germs.
 - You wash your hands right? (Flush & clean lines & fixtures)
 The washing your hands does not make them sterile.
 - Hand washing reduces concentration of germs on our hands, and thereby reduces the exposure potential.
 - We wash our food? (Replace filters)
 - The washing of food does not make it sterile.
 Food washing reduces concentration of germs on the food (lettuce, celery, etc.) reduces the exposure potential.
 - We cook our food. (Maintain control temperatures in water heaters)
 But cooking food does not make your food sterile either.
- It reduces the number of germs that are viable and thereby reduces your risk of becoming ill
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Controlling Legionella pneumophila

What is generally done to control Legionella pneumophila?

- We add chlorine (hand sanitizer) to reduce the bacteria in our water supply.
 - Chlorination does not make water sterile.
 - Chlorine (or bromine, chlorine dioxide, etc.) reduces bacteria concentrations and inhibits bacterial growth in the water supply, which reduces potential for illness.
- We purge (wash) our water supply to remove accumulated bacterial populations and to introduce water with higher free chlorine concentrations (chlorine gets used up in stagnant and hot pipes).
- But flushing water supply lines and water heaters alone does not sterilize the water
- We cook our water to inhibit bacteria in our hot water supply.
 We cook our water by using water heaters to heat the water to a temperature that
 - inhibits or kills bacteria which reduces potential for illness.
 - But this cooking via water heater does not sterilize the water.

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What Do You Need

- A Water Management Plan (WMP) for Legionella is a risk assessment.
- Most will follow ANSI/ASHRAE Standard 188-2015 Legionellosis: Risk Management for Building Water Systems
- It helps **control** LDB to protect clients and staff
- It keeps your facility in compliance.
- The Department of Health & Human Services Centers for Medicare & Medicaid Services (CMS) now requires Medicare certified healthcare facilities have a water management plan (WMP) to reduce risks associated with Legionella and other waterborne pathogens.

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What Do You Need • A Water Management Plan (WMP) – Designates a team (in-house & external members) – Identifies/Inventories • All water storage and distribution components – (pipes, tanks, etc.),

- Treatment locations
- (water heaters, filters, expansion tanks, etc.)
- Flow control points – (shut off valves, mixing valves

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- Distribution points
 - (faucets, shower heads, spigots, cooling towers, evaporative coolers, water fountains, etc.).

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What Do You Need

- A Water Management Plan (WMP)
- Assigns
 - Set points (temperature, chlorine concentration, bromine concentration, pH range, flow rates, flow times)
 - Maintenance schedules (flushing, cleaning, replacing)
- Dictates accountability processes & schedule
 - Method and frequency of challenges to set points
 - Method and frequency to verify PM activities (filter changes, cleaning calendars, etc.)
 - Provides for testing (LDB, THB, temp, pH, Oxidizers, etc.)
 LDB testing is a part of the WMP, but IS NOT the crux.
- Creates a response plan for the various verification outcomes.
- Has mechanisms to evaluate and update the WMP

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 The purpose of this standard is to establish minimum Legionellosis risk management requirements for building water systems.
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SCOPE of This Standard...

 Provides minimum Legionellosis risk management requirements for the:

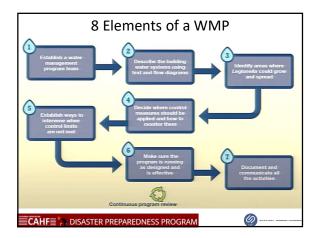
- design,
- construction,
- commissioning,
- operation,
- maintenance,
- repair,
- replacement, and
- expansion
- of new and existing buildings & their associated
- (potable & nonpotable) water systems & components.

SCOPE of This Standard...

- Applies to human-occupied commercial, institutional, multiunit residential, & industrial buildings.
- Does not include single-family residential buildings.
- Is intended for use by owners and managers of human-occupied buildings.
- Also intended for those involved in the design, construction, installation, commissioning, operation, maintenance, & service of centralized building water systems & components.

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8 Elements of a WMP

1. Program Team

- a) Identify persons responsible for Program development and implementation.
- 2. Describe Water System/Flow Diagrams
 - a) Describe the potable and nonpotable water systems within the building and on the building site and develop water system schematics.

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8 Elements of a WMP

3. Analysis of Building Water Systems

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 a) Conduct a systematic evaluation of hazardous conditions in the building water systems and determine where control measures shall be applied.

4. Control Measures

a) Determine locations where control measures shall be applied and maintained in order to stay within established control limits.

5. Monitoring/Corrective Actions

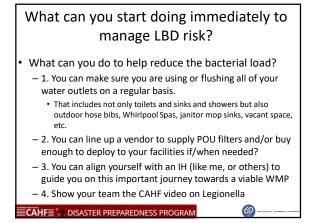
 a) Establish procedures for monitoring whether control measures are operating within established limits, and if not, take corrective actions.

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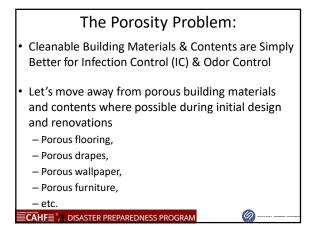
8 Elements of a WMP

6. Confirmation

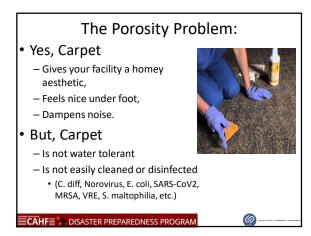
- a) Establish procedures to confirm that:
 - the Program is being implemented as designed
 - The Program controls the hazardous conditions throughout the building water systems - {validation}
- 7. Documentation
 - a) Establish documentation and communication procedures for all activities of the Program.
- 8. Continuous Program Review & Management of Change







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Vinyl-Backed Carpet Squares

- · Easier to maintain than rolled goods
- Less waste
- Can easily replace only damaged or contaminated carpet squares without an installer (permanently tacky adhesive).
- Water based glue is used to reduce odors and VOC emissions during installation.
- But this material yields some additional hurdles you should know.

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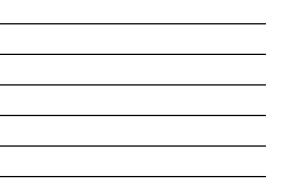














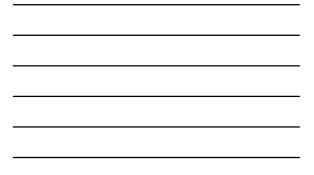












Possible standing policies for use of vinylbacked carpet squares

- Not allowed period
- Not allowed over existing vinyl floor tile
- Allowed only on 2nd floor and above
- Allowed if 18"x18" or smaller
- Allowed if using corner tabs instead of glue
- Allowed only if backed with felt
- Allowed only with a vapor barrier
- Allowed only with independent slab moisture testing

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Request extended warranty from installer and manufacturer









Mercury

- Get mercury out of your buildings ASAP
- EPA has a special kind of hell for you if it is spilled at your facility
- Substitutes are inexpensive, reliable and readily available (barring COVID supply chain issues)

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Mercury (Hg)



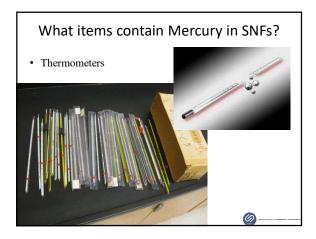
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- Heavy, shiny, silver-white, odorless, nonflammable liquid at room temperature
- Low vapor pressure (evaporates slowly), but produces significant vapor at room temperature.
- If you have a mercury amalgam filling your mouth will not pass the EPA clearance criteria
- EPA is taking mercury seriously.















Spills are a problem

- Spills require atypical cleanup procedures & specialty equipment
- (high pressure mercury vacuum, mercury respirator cartridges, amalgamating powders, special vapor measuring equipment, specific & expensive disposal, etc.)
- The Reportable Quantity (RQ)
- RQ for mercury is 1 pound

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- Because mercury is heavy, only two tablespoons of mercury weigh about one pound.
- Any time one pound or more of mercury is released to the environment, it is mandatory to call the National Response Center (NRC).

Take home lessons

- Remove mercury from your facilities where feasible.
- Store & dispose of CFLs and Fluorescent Lamps appropriately
- Have emergency release plan

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 Have a mercury spill kit and remediation vendor



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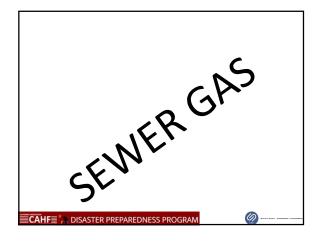


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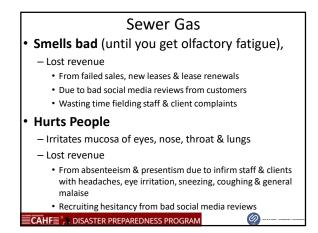
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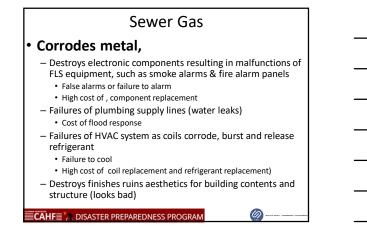
- Methane,
- Methyl mercaptan,

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- Carbon dioxide,
- Sulfur-dioxide
- Water vapor
- Etc.

SEWER GAS REALLY STINKS A problem for hospitals, SNFs, property managers, facility engineers, facility engineers, sellers, sellers, schools, Snowbirds business owners Etc. Decause it:





Sewer Gas

Smells like the additive to natural gas,

- Methyl mercaptan from sewers in the living space = false claims of a natural gas leak,
 - Unnecessary building evacuations
 - Hospital evacuation at 3:00am
 - "Cry wolf" culture, where people will not take an actual natural gas leak seriously.
- It wastes the time and resources of public and private life and safety first responders.
 - Firefighters, police and gas company emergency response teams, who are called to respond to inadvertently false reports of natural gas leaks or toxic gas leaks.

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Sewer Gas

- Is combustible,
 - Build-up of combustible gasses can lead to fires and explosions and the associated loss of life and property.
- Means there's unrestricted access for sewer critters,
- Dry traps = unhindered access to the living space for cockroaches, sewer flies, etc.
- and more.



Causes of Sewer Gas Infiltration

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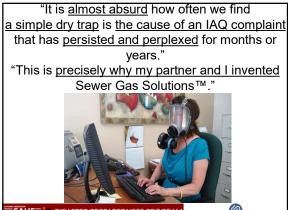
Cause is Simply a Dry Trap Most of the Time • Primary cause of sewer gas infiltration indoors is the evaporation of the water in unused, underused or unserviced sewer drain traps (p-trap, u-trap, s-trap), • This results in the creation of an air pathway between the living space & the sanitary

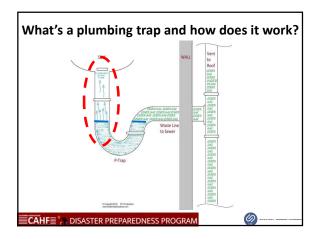
between the living space & the sanitary sewer

- (municipal system or local septic system).

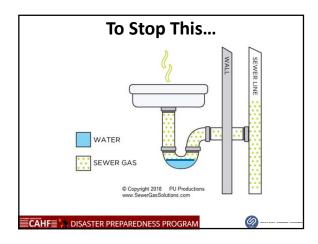
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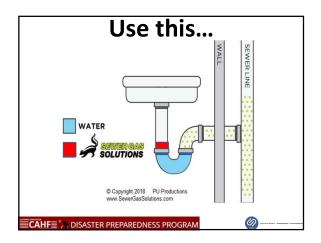






















Fun With Flashlights (Visually Dry Trap + Critters)











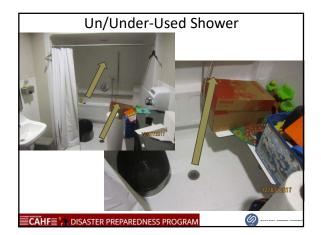
























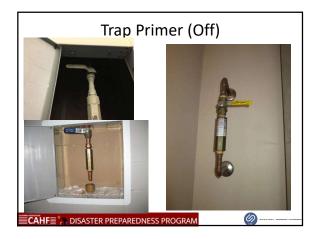












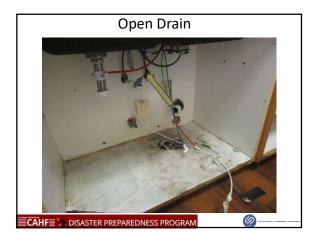


















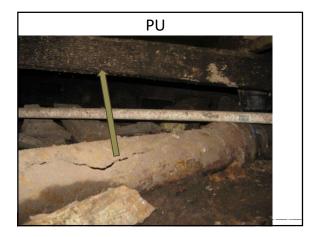


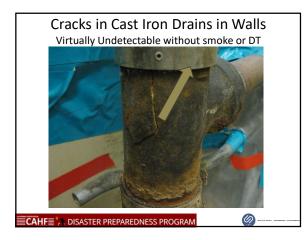
















Toilet Seals

- Compressed Wax Ring on Floor Mount Toilets, or
- Damaged Neoprene Rings on Saddle (wall) Mounted Toilets





























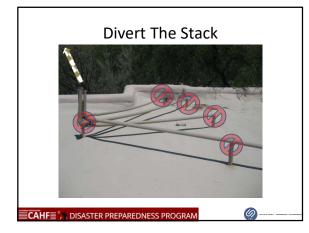








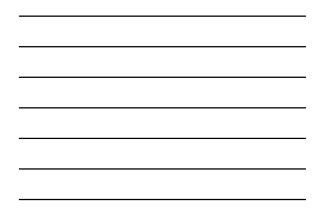






























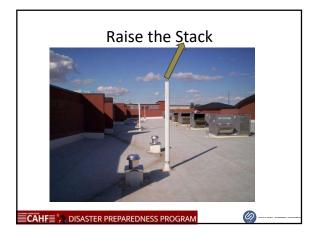








































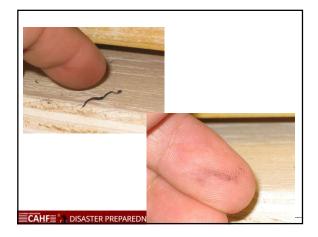






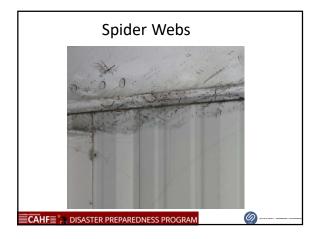














Wildfire Smoke (Combustion by-Procut Residues)

- Wildfire smoke is a by-product of the combustion of forest fuels, as well as any homes/structures in the path of the wildfire.
- The type of materials burned and the temperature at which the materials burned generally determine the types of chemicals generated in smoke.

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Wildfire Smoke (Combustion by-Procut Residues)

Smoke is a complex mixture of particles, liquids and gaseous compounds including, but not limited to:

- Polynuclear aromatic hydrocarbons (PAHs)
- Carbon monoxide
- Aldehydes
- Organic acids
- Semi-volatile organic compounds (SVOC)
- Volatile organic compounds (VOCs)
- Free radicals
- Ozone
- Particulate matter (PM), including soot, ash & char $% \left({{{\rm{PM}}} \right)$

— Inorganic fraction of particles
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Wildfire Smoke

Many of the wildfire smoke constituents are reactive or easily dispersed into the atmosphere.

- Present for mere hours or days
- (e.g. polynuclear aromatic hydrocarbons (PAHs), carbon monoxide, aldehydes, organic acids, semi-volatile and volatile organic compounds (VOCs), free radicals and ozone).
- Some wildfire smoke constituents are persistent
 Weeks or months
- (e.g. particulate matter (PM), including soot, ash and char and/or inorganic fraction of particles).

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Smoke particulates eventually settle out of the air

- Deposit on horizontal surfaces
- Plate out on vertical surfaces,
- Penetrate upholstery, drapes, insulation
- Electrostatically adhere to electronic components or other charged surfaces,
- Impact on surfaces in the path of air currents

Deposited particulates can be re-entrained into the air

- Deposition and retention of smoke particles on surfaces inside homes, schools, businesses
 - -Building ventilation systems

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- Unoccupied spaces such as duct chases and attics
- Indoor inhalation exposures are possible because of re-suspension from even small disturbances

In summary

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- Wildfire smoke can degrade indoor air quality, even after the outdoor smoke has cleared
- Fine smoke particulates can penetrate homes and businesses, even when the buildings are closed and the HVAC is turned off.

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Examples of Actions to Control Wildland Smoke Infiltration When Sheltering in Place An ounce of prevention

- Limit exposure to the bulk of wildfire residues
- Temporarily changes can be made BUT DON'T FORGET to switch back after the smoke has cleared.

An ounce of prevention • Limit exposure to the bulk of wildfire residues

 Temporarily changes can be made BUT DON'T FORGET to switch back after the smoke has cleared.

An ounce of prevention

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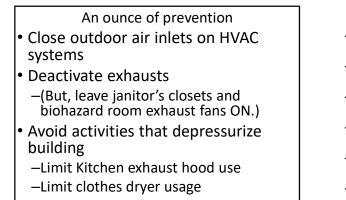
• Keep windows shut

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- Keep doors closed where possible (no propping)
- Get testing of the indoor air quality and indoor surface quality at your site.

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An ounce of prevention • Change HVAC filters to the highest MERV rating allowed by the manufacturer's specs

 Deploy free standing HEPA equipped air filtration devices(AFDs)

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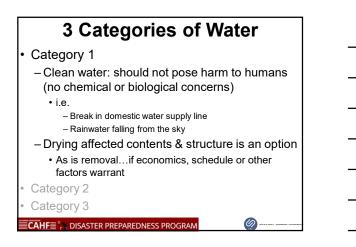
Appropriate Flood Response

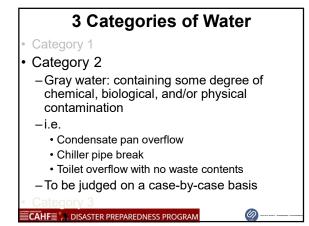
- When to dry?
- When to remove & replace?
- Determining factors?
 - Severity of saturation
 - Time constraints



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- Internal capabilities
 Cost effectiveness
- Population (IL, SNF, Memory Care, Hospice, etc.)
- Room type (office or resident room)
- Category of water (Category 1, 2 or 3)
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3 Categories of Water

Category 1Category 2

Category 3



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 Previously called "Black Water": considered grossly unsanitary water, presumed to contain pathogenic agents and/or chemicals of concern

• i.e.

Sewage backflow

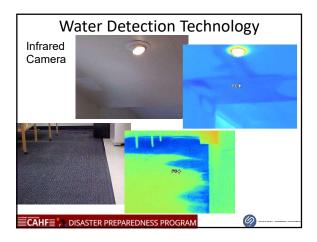
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- Water main break (Cat 1) that contacts soil & enters the structure
 Disinfection is not enough to kill potential pathogens
- or neutralize chemical contaminants
- Drying porous materials is not an option
- Remove affected porous contents & structure

What are moisture assessment tools & techniques?



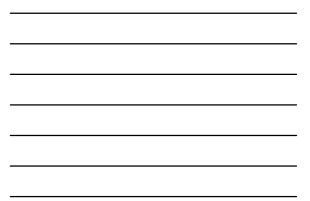






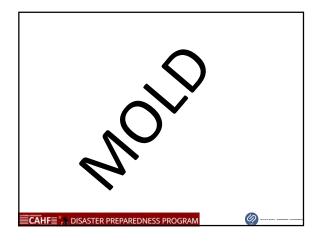


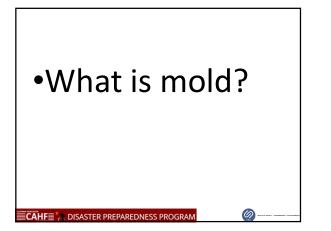


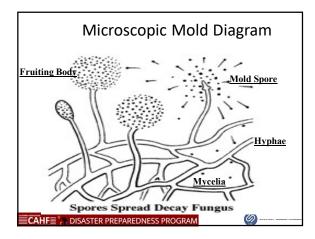




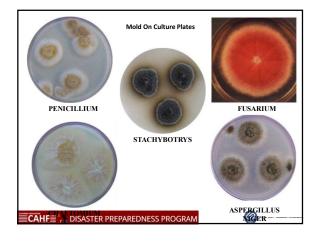










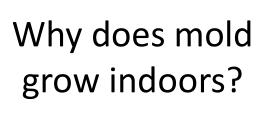












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Three basic requirements for mold growth

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- 1. <u>Atmosphere</u> (temperature, oxygen)
- 2. <u>Nutrient Source</u> (anything organic)
- 3. <u>Water</u> (the key to all life)

Mold Hides

- Shy mold
- Dark and wet preferred

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- Shy mold in the Southwest (e.g. Palm Springs)
 - AC on frequently, so exposed surfaces dry
 - Fans on frequently, so exposed surfaces dry

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- Low RH%, so exposed surfaces dry
- Structure "prepped" for appearance
- Contents obstruct visual assessment



















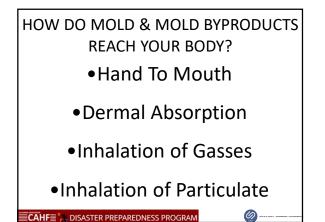
To Air is Human

- Mold air samples are merely snapshots of airborne mold.
- They may indicate a hidden mold reservoir,
- But cannot be considered definitive on the presence or absence of mold in inaccessible areas
- wall cavities,
- cabinet bases,
- ceiling cavities,
- etc.

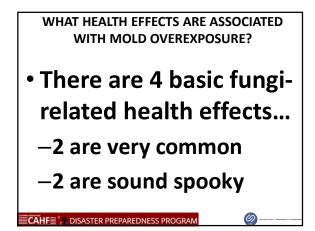




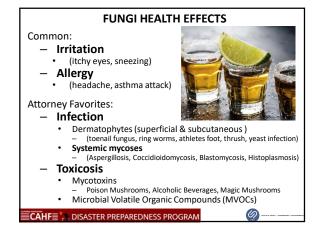








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Moldy Environments are Known Hazards

- U.S. Centers for Disease Control & Prevention (CDC), the Institute of Medicine of the U.S. National Academy of Sciences, the World Health Organization (WHO), Health Canada, IICRC, AIHA, IAQA, etc. all agree
 - Living or working in a building with mold damage results increases risk of respiratory disease.

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•What are the regulatory obligations for mold?

What is an Acceptable Environment When it Comes to Mold? No international mold laws No Federal "mold" laws. –US OSH 1970 General Duty Clause –Case Law

- State "mold" laws CA
- -(but there are in some states like FL & TX)
- Some municipal mold ordinances (NYC)

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What's an Acceptable Environment When it Comes to Mold?

- There are many state-of-theart guidelines & consensus standards:
 - -EPA, IICRC, ACGIH, AIHA, CDC, WHO, etc.

What is an Acceptable Environment When it Comes to Mold?

• All generally accepted guidelines essentially say the "same" thing

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- -Visible mold growth is unacceptable indoors in both accessible & inaccessible areas
- Airborne mold concentrations indoors should be both qualitatively & quantitatively similar to outdoors

What are some important mold resources?

Examples of references you should know...

OSH 1970 General Duty Clause

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- US EPA "Mold Remediation in Schools and Commercial Building"
- IICRC "S500 Standard and Reference Guide for Professional Mold Remediation"
- AIHA "Recognition, Evaluation, and Control of Indoor Mold"

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What are some common myths surrounding mold?

Mold Myths

- Mold free?
 - -No such thing. Molds are ubiquitous.
- Dangerous mold/ Safe mold?
- All molds can be allergens, so no molds are "safe"
- Black mold?
 - -Color is not an indicator of potency or impotency.

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Mold Myths

• Dead mold vs. live mold

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- -Why not just Heat, Desiccate, Bleach, etc.?
- -Dead molds are still allergens and toxic properties can still exist independent of a mold's viability.

Mold Myths

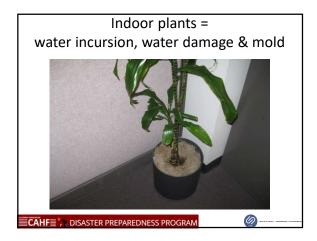
- How long until visible mold develops? -48 to 72 hours
 - -But drying takes days and days, what gives...?)
- Growth inhibitors?
 - -Only work at the surface.

What are some common mold prevention strategies?

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Vinyl Wallpaper

- Looks Fancy
- Protects drywall from abrasion
- Easy to clean since it prevents water from reaching the drywall
- But.....it also prevents water in the wall from escaping/drying.

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Get water heater off the floor. Get a secondary containment. Replace water heaters BEFORE they fail.





















Protect the Facility & Occupants After Mold is Discovered. Interim Controls.

- Restrict access
- Identify the water source and stop the water
- Isolate the damaged area
 - (cover the mold affected areas with plastic sheeting and tape OR close and cover the door to the room with plastic sheeting and tape)
- Isolate the HVAC
- (turn local units off, close doors, seal supply registers, seal return grills, cover transfer vents, modify VAV box)
- Depressurize the room if possible
- (turn on restroom exhaust fans, turn on exhaust hoods, etc.)
 Call a professional

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IICRC Mold Conditions

Condition 1

 – Normal Fungal Ecology (settled & airborne mold-related dust with the normal concentration of mold particulate (BACKGROUND)

Condition 2

 – Abnormal Fungal Ecology (settled & airborne mold-related dust with an elevated amount of mold particulate (ABOVE BACKGROUND REQUIRING A RETURN TO CONDITION 1 BY COMPATIBLE CLEANING)

Condition 3

 – Visible Fungal Growth (Colonies of mold visible to the naked eye in exposed and obstructed areas) (CLEANING OR DEMOLITION REQUIRED AS SURFACE TYPES DICTATE TO RETURN TO CONDITION 1)

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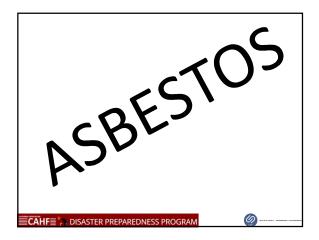
Mold Abatement Abridged Is there VISIBLE mold growth on it?

Material Type	Amplification (Visible Mold Growth) (Condition 3)	
Porous (DW, Millwork, Carpet, Upholstery)	Remove and discard	
Semi-porous (Wood framing, OSB, Plywood)	Evaluate structural integrity. If sound, then abrade to mm. If unsound, replace.	
Non-Porous (Glass, Metal, Porcelain)	HEPA vacuum and/or wet wipe clean	

Mold Abatement Abridged In proximity of visible mold growth

Material Type	Accumulation (Excessive Settled Mold Dust) (Condition 2)
Porous (DW, Millwork, Carpet, Upholstery)	HEPA vacuum and/or launder
Semi-porous (Wood framing, OSB, Plywood)	HEPA vacuum and wet wipe clean (can also opt to disinfect)
Non-Porous (Glass, Metal, Porcelain)	HEPA vacuum and/or wet wipe clean





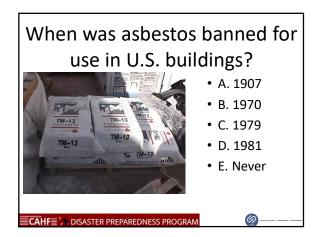


Asbestos

 Group Participation Question:
 –When was asbestos banned for use in the USA?

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Asbestos was never truly banned in the U.S.

- U.S. bans are not what you think

 For more detail see
 <u>www.epa.gov/asbestos/pubs/asbbans2.pdf</u>
- Asbestos was & is used in building materials to this day
- Over 3,000 different asbestoscontaining products are imported & used in the U.S. annually

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Many Americans assume Asbestos is a problem of the past.

PAST

- Asbestos fibers are present in a majority of U.S. structures built before 1981, this is generally known
- PRESENT
 - What is not common knowledge is that asbestos can be found in many buildings constructed AFTER 1981

FUTURE

 By all indications, no changes in asbestos policy are forthcoming in the foreseeable future



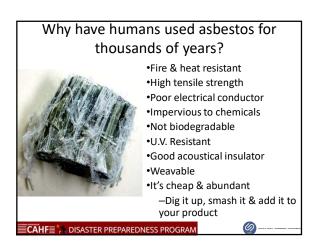
Asbestos is highly regulated

- Compliance is Complicated
 - -Federal US Laws
 - -California State Laws
 - -California Air Pollution Control Districts

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- -California Cities
- -California Fire Departments

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What are some examples of building materials in your buildings that are suspect for asbestos content?

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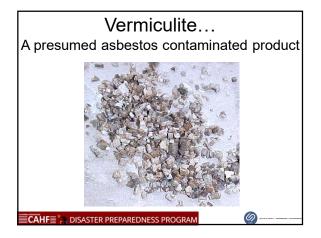












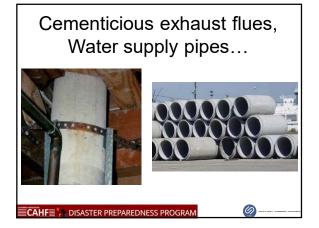












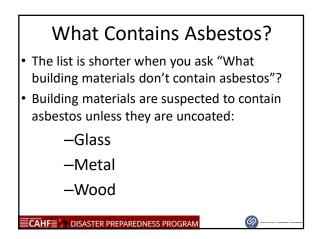












Applicability of Federal Asbestos Regulations					
	OSHA (Any% Asb, <0.01 f/cc)	NESHAPS (≥1% Asb, Threshold Quantity)	AHERA		
School	Х	X	X		
Public (Commercial, Industrial, 2 or more single family dwellings at same site, apartments of >4 units)	Х	Х			
Residential	Х				
OSHA always applies					

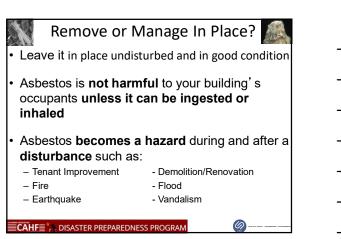


Violations Abound

Asbestos violation costs ASU \$96,000.00

- Arizona General Contractor cited \$28,000.00
- Arizona Flooring Subcontractor cited \$3,800.00
- EPA Fines Five Phoenix Charter Schools for Asbestos Violations
- Asbestos Violations the **#1 OSHA Fine in Hospitals**
- Two Construction Contractors Cited By OSHA For Alleged Asbestos Violations At Brookville Campus Of C.W. Post College; **\$370,900** In Penalties Proposed Long Island University Also Cited
- Company pays \$227,700 penalty for asbestos violations
- Asbestos Hazards Bring OSHA Citations and **\$115,500** Fine To Newark, N.J. Building Partnership
- New Hampshire man faces felony charges for illegal asbestos removal
- Washington Prison Fined Over Asbestos Violations
- DEQ Resolves Asbestos Violations with Aspen Square Mgt, Inc.

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What should you do?

- Preemptively test materials you disturb during regular PM activities.
- Preemptively test materials you would likely impact in a flood, fire or vehicle strike.
- Sample the following materials at your site:
 - Drywall,
- Spray Applied Acoustic Ceiling,

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- Lay-In Ceiling Panels
- Cove Base & Adhesive
- Flooring Finishes

What should you do?

- Inventory all suspect materials on site.
- Presume all unsampled suspect materials.
- Sample these materials when an incident arises.
- Sample these materials in conjunction with the planning of any capital improvements

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Isolating biohazard accumulation room

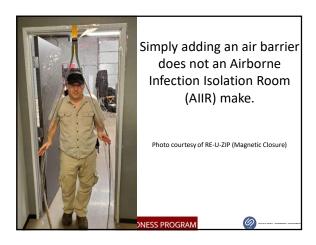
- Positive pressure in greater building
- Negative pressure in biohazard rooms, bathrooms, kitchens & janitors closets
- Consequences of Inadvertent depressurization of areas
- Tight buildings pros and cons



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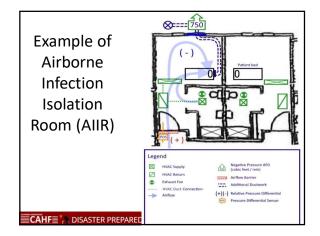
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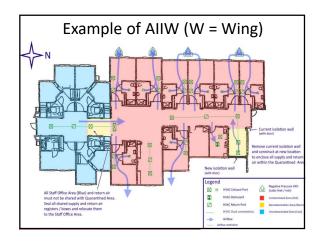
















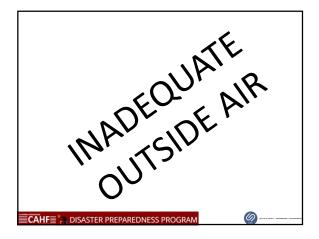




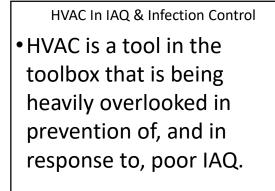
- Normal support mechanisms are severed
 Stigma
 Staff appears to avoid the normal healthcare worker compassion and kindness
 Less check ins by custodians and nurses
 Staff in PPE look like Darth Vader and seem impersonal and faceless
 Stagnation
 No exercise due to sequestration promoting atrophy and bedsores
- Whose job is mental and spiritual health? Who checks on emotional wellness? Does your AIIR design consider the resident experience?

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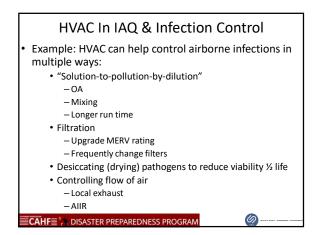
CAHE CAHE TO DISASTER PREPAREDNESS PROGRAM







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HVAC for IC (recognize the penalties) • Energy penalty • Comfort penalty • Site equipment may not be able to keep up with demands temperature and humidity demands in extreme weather (monsoon, summer, winter, etc.)

Positive Pressure & Solution by Dilution

- Q: How do you prevent infiltration of undesirable gasses and particulates into your building from undesirable locations?
 - A1: Bring in OA at controlled filtered conditioned locations
 - A2:Pressurize the building and leak outwards
- How do you control non-point source pollutants such as body odor, paper dust, communicable airborne infections, humidity?
 - A1: Exhaust "used" air and bring in "fresh" air

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Filters 101

- HVAC filters do not directly improve indoor air quality, they protect the coils
- They catch grasshoppers and tumbleweeds before they reach the cooling coils or heating elements
- Junk that bypasses the filter indirectly degrades IAQ

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Nuisance Birds

- Over 60 diseases are attributed to birds
- Routes of exposure:
- Food and water contaminated with feces.
- Inhalation of contaminated dust.

- Transference by parasites
- Direct contact with feces.
- Over Hazards



- Reduced Ventilation System Lifespan
- Fire Hazard
- Corrosion

















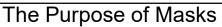
 Misunderstanding of PPE capabilities and use requirements are prevalent



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 Masks are merely "Coughy" Filters or Mobile Sneeze Guards

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like the ones you are required to wear for this event

- Are not respirators
- Do not filter out particles or gasses
- Generally designed to protect others from you.
- Help reduce/capture your spewed respiratory droplets at the source (your nose & mouth).
- Can keep large respiratory droplets emitted by others from landing directly on your covered/shielded face.



Compliance with U.S. Federal Respiratory Protection Standard 29 CFR 1910.134 is mandatory, even for the use of N95

- This Standard includes a variety of required tasks,
 - -some are one-time,
 - -some are annual, &

-some are subject to policy or changes in the employee.

In brief you must have:

- RPP
 - A written Respiratory Protection Program (RPP)
- Medical Release
- A completed OSHA Respirator Medical Evaluation Questionnaire for each employee who will wear a respirator (e.g. an N95)
- Signed Medical Release from a Physician or Licensed Healthcare Professional (PLHCP), who reviewed the Questionnaire (and sometimes examined the employee)
- Fit Test (annual)
- Annual Fit Testing of each employee on every make/model/size respirator they will wear
- Training (annual)
- Annual Respirator Training for each employee with focus on the limitations, obligations, hazards, care and use of the respirator they will wear

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Citations Are Common

- As of 2020, violations of the Respiratory Protection Standard violations were the #3 issued OSHA citation (#5 in 2019)
- >2,000 citations & >\$4 million in fines
- Avoid bad press, embarrassment, diversion of mission-critical funds and, of course, hazardous conditions to employees.
- Citations hurt by diverting important resources away from resident or occupant care
- Recent example: October 14, 2021, SNF in Bloomingdale, Illinois – OSHA proposes \$83,000 in fines.
- SNF required employees to wear N95 filtering face piece respirators while entering the quarantine area and providing care to suspected coronavirus positive residents.
- However, it failed to ensure proper use of respirators and fit test all employees to ensure an effective seal, as required.





There is no "Fit Test Guru" Certification

- Federal respiratory protection standard (29 CFR 1910.134) standard requires:
 - Employer shall to provide effective, comprehensive & understandable training to employees, who are required to use respirators at least annually.
 - Implies individual conducting training must be competent in teaching the standards, use, care, limitations & other aspects of chosen respirators & use in their particular workplace

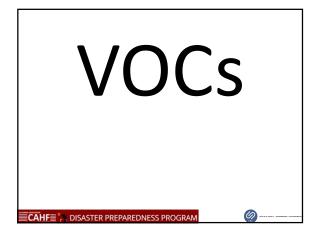
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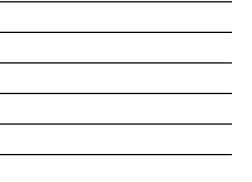












Protecting occupants takes a village... Everything is Connected...

- Everyone (every department, / every vertical) needs to:
 - -Consider & understand how their work affects the indoor environment
 - -See the bigger picture of occupant & staff health
 - -Dedicate time & resources to IEQ

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Hungry for more info?...

- There are resources developed by CAHF Emergency Preparedness and Physical Plant Services that are available at no cost to call participants
- And, there are plans to continue to deliver even more content and services

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Websites

- <u>CAHF Disaster Preparedness Program |</u> Sacramento, CA
- <u>https://www.cahfdisasterprep.com/</u>

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or

- California Association of Health Facilities (CAHF)
- https://www.cahf.org/

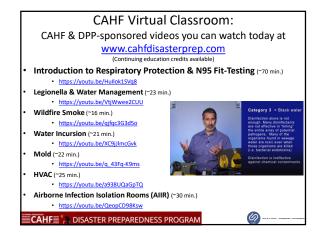
Live Events

 Attend CAHF's Really Ready! Disaster Preparedness Conference

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-April 2022



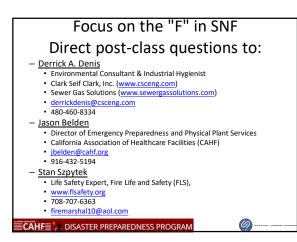


Still Want More?...

- Ask, because the squeaky wheel gets the grease
 - -How about private EH&S audits?

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- -How about Fit Test Parties?
- -How about review of Water Management Plans?





Every Day is A Gift

- Health and life are momentary.
- No tomorrow is promised to you.
- Whatever you think you need to do with the time you have been gifted, get busy doing it.

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• Don't wait; do it now.