Title 13 – Department of Labor

***Notice*** *is hereby given in accordance with G.S. 150B-21.2 that the Department of Labor intends to adopt the rules cited as 13 NCAC 07I .0101, .0102, .0201-.0204, .0301, and .0401-.0404.*

**Link to agency website pursuant to G.S. 150B-19.1(c):***https://www.labor.nc.gov/rules-and-regulations*

**Proposed Effective Date:***December 1, 2024*

**Public Hearing:**

**Date:** *January 23, 2024*

**Time:** *1:00 p.m.*

**Location:** *https://call.lifesizecloud.com/20086796 or call +1 (312) 584-2401, 20086796#*

**Reason for Proposed Action:** *The North Carolina Department of Labor received a rulemaking petition. The Commissioner granted the petition. This is the publication of the Notice of Text pursuant to the petition. No fiscal note is required at this time. Placement of the attached proposed rules would be in a new subchapter and sections as follows: SUBCHAPTER 07I - AIRBORNE INFECTIOUS DISEASES; SECTION .0100 - GENERAL PROVISIONS; SECTION .0200 - EXPOSURE CONTROL PLAN; SECTION.0300 - EXPOSURE CONTROLS; SECTION .0400 - EXPOSURE CONTROL PLAN IMPLEMENTATION. The North Carolina Department of Labor also seeks to reserve an additional new subchapter: SUBCHAPTER 07H.*

**Comments may be submitted to:** *Jill F. Cramer, Rulemaking Coordinator, 1101 MSC, Raleigh, NC 27699-1101; email jill.cramer@labor.nc.gov*

**Comment period ends:***March 4, 2024*

**Procedure for Subjecting a Proposed Rule to Legislative Review:** If an objection is not resolved prior to the adoption of the rule, a person may also submit a written objection to the Rules Review Commission. If the Rules Review Commission receives written and signed objections after the adoption of the Rule in accordance with G.S. 150B-21.3(b2) from 10 or more persons clearly requesting review by the legislature and the Rules Review Commission approves the rule, the rule will become effective as provided in G.S. 150B-21.3(b1). The Commission will receive written objections until 5:00 p.m. on the day following the day the Commission approves the rule. The Commission will receive letters via U.S. Mail, private courier service, or hand delivery to 1711 New Hope Church Road, Raleigh, North Carolina, or via email to oah.rules@oah.nc.gov. If you have any further questions concerning the submission of objections to the Commission, please review 26 NCAC 05 .0110 or call a Commission staff attorney at 984-236-1850.

**Fiscal impact. Does any rule or combination of rules in this notice create an economic impact? Check all that apply.**

**[ ]  State funds affected**

**[ ]  Local funds affected**

**[ ]  Substantial economic impact (>= $1,000,000)**

**[ ]  Approved by OSBM**

**[x]  No fiscal note required**

Chapter 07 - Office of Occupational Safety and Health

SUBCHAPTER 07I – AIRBORNE INFECTIOUS DISEASES

SECTION .0100 – PURPOSE

13 ncac 07I .0101 SCOPE AND APPLICATION

(a) The Rules in the Subchapter establish requirements for employers, employees, and places of employment to assess the risk of, prepare for, control, prevent, and mitigate the spread of an airborne infectious disease to and among employees and employers.

(b) The Rules in this Subchapter shall supplement and clarify the rights existing under the Occupational Safety and Health Act of North Carolina and any existing Rules, regulations, or standards applicable to hazards related to airborne infectious diseases, including, but not limited to, those dealing with personal protective equipment ("PPE"), respiratory protective equipment, face masks, and sanitation.

(c) These Rules shall not conflict with requirements and guidelines applicable to businesses set out in any executive order issued by the North Carolina governor or order issued by a government agency related to a public health emergency and shall take into account all applicable federal standards to the extent practicable.

(d) These Rules in this Subchapter shall apply to:

(1) Every employer, employee, and place of employment in North Carolina within the jurisdiction of the OSH Division pursuant to the Occupational Safety and Health Act of North Carolina; and

(2) Any airborne infectious disease designated by the Governor of North Carolina, North Carolina General Assembly, U.S. Department of Health and Human Services, North Carolina Department of Health and Human Services ("DHHS"), World Health Organization, or Centers for Disease Control ("CDC") as presenting a public health emergency.

(e) The Rules in this Subchapter do not apply to any seasonal or endemic infectious disease that has not been designated as a public health emergency as specified in Subparagraph (d)(2) of this Rule.

(f) The Rules in this Subchapter shall not be interpreted as relieving any employer from the requirements of any other state or federal guidance or requirements related to preventing the spread of an airborne infectious disease to employees and third parties such as customers, contractors, and members of the public within the workplace.

History Note: Authority G.S. 95-133;

Eff. December 1, 2024.

13 ncac 07I .0102 DEFINITIONS

In addition to the definitions set forth in the Occupational Safety and Health Act of North Carolina and 29 CFR 1910, 29 CFR 1926, and 29 CFR 1928, the following definitions apply throughout the Rules in this Section:

(1) "Airborne infectious disease" means any infectious viral, bacterial, or fungal disease that is transmissible through the air in the form of aerosol particles or droplets and which is designated by the Governor of North Carolina, North Carolina General Assembly, U.S. Department of Health and Human Services, DHHS, World Health Organization, or the CDC as presenting a public health emergency.

(2) "Authorized employee representative" means any person designated, verbally or in writing, by an employee to serve as their authorized representative.

(3) "CDC" means the Centers for Disease Control and Prevention.

(4) "Face covering" means a surgical mask, a medical procedure mask, a respirator worn voluntarily, or a tightly woven fabric or non-woven material of at least two layers. A face covering has no visible holes or openings and must cover the nose and mouth. A face covering does not include a scarf, ski mask, balaclava, bandana, turtleneck, collar, or single layer of fabric.

(5) "Undue hardship" means a significant difficulty or monetary expense to include an impact on the overall financial resources of the particular employer to include the effect on expenses and resources of the employer, and any other impact on the operation of the business. Aspects that shall be taken into consideration in determining the significant difficulty or monetary expense shall include the overall effect on the financial resources of the covered entity, the number of persons employed by the covered entity, and the number, type, and location of the covered entity's facilities.

History Note: Authority G.S. 95-133;

Eff. December 1, 2024.

SECTION .0200 – EXPOSURE CONTROL PLAN

13 ncac 07I .0201 EXPOSURE CONTROL PLAN

(a) Each employer shall create, implement, and maintain a written exposure control plan that is specific to the workplace and operations.

(b) The exposure control plan shall be designed to eliminate or minimize employee exposure to airborne infectious diseases in the event of an outbreak of an airborne infectious disease.

(c) Each employer shall make the exposure control plan available in English and in the languages identified as a primary language of a majority of employees.

(d) The written exposure control plan shall be made available to all employees.

(e) The written exposure control plan shall be provided, upon request, to employee representatives, collective bargaining representatives, and the OSH Division.

(f) An Exposure Control Plan shall establish the following:

(1) A system for communicating with all employees that is readily understandable by all employees and can be accessed by all employees.

(2) A time frame within which the employer shall notify employees of the existence of an infectious disease in the workplace.

(3) A method of identification and evaluation of airborne infectious disease hazards.

(4) A method for employees to report symptoms of an airborne infectious disease to the employer.

(5) A process for investigating and responding to airborne infectious disease cases in the workplace.

(6) A process for mitigating or correcting unsafe or unhealthy working conditions, work practices, policies and procedures in a timely manner based on how the infectious disease is spread.

(7) A process for review and updating of the exposure prevention plan on at least an annual basis to reflect new or modified tasks and procedures which affect occupational exposure and that reflect new or modified employee assignments.

(8) A procedure to respond effectively and immediately to individuals at the workplace who have contracted an airborne infectious disease to prevent or reduce the risk of transmission of the airborne infectious disease in the workplace.

(g) The Exposure Control Plan's method for employees to report symptoms of an infectious disease to the employer shall include the following:

(1) What symptoms are being experienced.

(2) What other employees the potentially infected employee may have been in contact with.

(3) Whether a non-exposed employee needs an accommodation in relation to any pre-existing medical or physical condition that puts them at increased risk should they contract the airborne infectious disease.

(4) How an employee may access testing for an airborne infectious disease.

History Note: Authority G.S. 95-133;

Eff. December 1, 2024.

13 ncac 07I .0202 EDUCATION OF EMPLOYEES

The employer shall communicate information about airborne infectious diseases and the employer's airborne infectious disease policies and procedures to employees upon hiring and when an order has been issued regarding the designation of an airborne infectious disease as a public health emergency.

History Note: Authority G.S. 95-133;

Eff. December 1, 2024.

13 ncac 07I .0203 ACTIVATION OF THE EXPOSURE CONTROL PLAN

(a) Implementation of the exposure control plan during an outbreak of an airborne infectious disease shall occur when an airborne infectious disease is officially designated by the Governor of North Carolina, North Carolina General Assembly, U.S. Department of Health and Human Services, DHHS, World Health Organization, or the CDC as a public health emergency.

(b) Upon issuance of an order, each employer shall:

(1) Immediately review their worksite's exposure control plan and update the plan, if necessary, to ensure that the plan incorporates current information, guidance, and mandatory requirements issued by federal, state, or local governments related to the airborne infectious disease.

(2) Activate the worksite exposure control plan, no later than 15 days from the date of the designation of an airborne infectious disease by a governmental entity.

(3) Provide each employee with a copy of the exposure control plan in English or in the languages identified as the primary languages of a majority of employees.

(4) Post a copy of the exposure control plan in English and in the languages identified as the primary languages of employees in a visible and prominent location at the worksite.

(5) Provide electronic access of the exposure control plan to those employees who do not work in the same physical location on a daily basis or who work shifts.

(6) Retain all versions of the exposure control plan implemented to comply with this section while the remains in effect.

(c) The employer shall communicate information about the airborne infectious disease policies and procedure to other employers, persons, and entities that are operating in the same physical space or operating in contact with the employer's workplace when any employee has been confirmed positive for an airborne infectious disease.

(d) The employer shall:

(1) Allow for employee and authorized employee representative participation in the identification and evaluation of airborne infectious disease hazards.

(2) Develop and implement a process for screening employees. If the employer conducts screening indoors at the workplace, the employer shall require:

(A) Face coverings are used during screening by both screeners and employees being screened.

(B) Non-contact thermometers are used if employee temperatures are measured.

(3) Develop and implement a process for responding to employees with symptoms of the airborne infectious disease, to include asking employees to evaluate their own symptoms before reporting to work.

(4) Conduct a workplace-specific identification of all interactions, areas, activities, processes, equipment, and materials that could potentially expose employees to airborne infectious disease hazards. Employers shall treat all persons, regardless of symptoms or negative test results, as potentially infectious.

(e) The workplace-specific identification shall include:

(1) Identification of places and times when people may congregate or come in contact with one another, regardless of whether employees are performing an assigned work task or are taking a break.

(2) Evaluation of employees' potential workplace exposure to all persons at the workplace or who may enter the workplace, including coworkers, employees of other entities, members of the public, customers or clients, and independent contractors. Consideration shall be given to how employees and other people enter, exit, and travel through the workplace, in addition to addressing stationary work.

(3) Evaluation of indoor locations and implementation of increasing air flow in the workplace to include:

(A) Maximizing ventilation with outdoor air;

(B) Available levels of filtration efficiency compatible with the existing ventilation system; and

(C) Whether the use of portable or mounted High Efficiency Particulate Air (HEPA) filtration units, or other air cleaning systems, would reduce the risk of airborne infectious disease transmission.

(4) Review of applicable executive orders and published guidance from the State of North Carolina, local health departments, or the CDC related to airborne infectious disease hazards and prevention.

(5) Evaluation of existing airborne infectious disease prevention controls at the workplace.

(6) Evaluation of the need for additional airborne infectious disease prevention controls.

(f) The employer shall conduct periodic inspections as needed to identify hazardous conditions, work practices, and work procedures related to the airborne infectious disease and to ensure compliance with employers' airborne infectious disease policies and procedures.

(g) The employer shall maintain contact with employees who have tested positive for an airborne infectious disease in the workplace and allow them to return to the workplace when they are no longer contagious.

(h) The employer shall implement a procedure to investigate airborne infectious disease cases in the workplace. This includes procedures for seeking information from employees regarding cases and close contacts, test results, and onset of symptoms, and identifying and recording cases.

(i) The employer shall perform the following when an employee has contracted the airborne infectious disease at the place of employment:

(1) Determine the day and time the infected employee was last physically present at the workplace and, to the extent possible, the date of the positive test and/or diagnosis, and the date the employee first had one or more symptoms, if any were experienced.

(2) Determine with whom the infected employee may have had close contact with other employees. This requires an evaluation of the activities of the case and all locations at the workplace which may have been visited by the infected employee during the high-risk exposure period as defined by the CDC.

(j) The employer shall give written notice of exposure to an airborne infectious disease at the worksite to employees within one business day of the date the employer has confirmed knowledge of an employee who was physically present at the place of employment and was confirmed positive for an airborne infectious disease.

(1) The notice shall be in a form and in the languages readily understandable by employees.

(2) The notice shall not include any of the following information:

(A) Identification of the confirmed employee.

(B) Any personal identifying information of the confirmed employee.

(3) The notice shall be provided in the manner the employer normally uses to communicate employment-related information. The method of providing written notice may include, but is not limited to, personal service, email, or text messages if the notice can reasonably be anticipated to be received by the employee within one business day of sending.

(4) The notice shall include either the cleaning and disinfection plan for the location where the employees work or immediate access to the plan.

(5) The notice must be sent to the following:

(A) All employees who were on the premises at the same worksite as the case during the high-risk exposure period. If the employer should reasonably know that an employee has not received the notice or has limited literacy in the language used in the notice, the employer shall provide verbal notice, as soon as practicable, in a language understandable by the employee.

(B) Independent contractors and other employers on the premises at the same worksite as the case during the high-risk exposure period.

(6) Notice must include information to potential exposed employees that they must either test for the airborne infectious disease or stay out of the workplace until the return-to-work criteria in this Subchapter are met.

History Note: Authority G.S. 95-133;

Eff. December 1, 2024.

13 ncac 07I .0204 CORRECTION OF HAZARDS

Employers shall implement policies and procedures for correcting workplace conditions or work practices that result in employee exposure from other employees to an airborne infectious disease. The policies and procedures shall be implemented in a timely manner based on the severity of the airborne infection disease.

History Note: Authority G.S. 95-133;

Eff. December 1, 2024.

SECTION .0300 - EXPOSURE CONTROLS

13 ncac 07I .0301 EXPOSURE CONTROLS

(a) The employer shall select and obtain appropriate exposure controls based on the types of exposure and levels of exposure risk that employees have during all work-related activities performed at the worksite.

(b) The following exposure controls shall be included in the employer's exposure prevention plan to be used at all worksites where occupational exposure to an airborne infectious disease may exist:

(1) Face Coverings.

(A) The employer shall select and provide at no cost to employees, face coverings deemed appropriate and in accordance with applicable guidance from DHHS or the CDC.

(B) The employer shall require that employees wear appropriate face coverings when physical distancing cannot be maintained. Appropriate face coverings shall be worn in accordance with applicable guidance from the DHHS or the CDC.

(2) Physical Distancing.

(A) Physical distancing shall be used to keep employees apart from other employees.

(B) Specific physical distancing shall be based on recommendations of the DHHS or the CDC during an airborne infectious disease outbreak, unless such physical distancing would constitute an undue hardship on the employer.

(3) Hand-Washing Hygiene Facilities.

(A) The employer shall, to the extent practicable and feasible, provide handwashing facilities with an adequate supply of tepid or warm potable water, soap, and single-use towels or air-drying machines.

(B) When providing handwashing facilities is not practicable and feasible, the employer shall provide hand sanitizing facilities and supplies.

(C) Hand sanitizers provided by the employer shall be effective against infectious diseases that are spread by contact with an airborne infectious disease.

(D) Hand sanitizers shall contain at least 60% alcohol or other composition determined to be appropriate by the DHHS or the CDC for the airborne infectious disease.

(4) Cleaning and disinfection of work premises.

(A) The employer shall implement an appropriate plan for cleaning and disinfection of the work premises that includes appropriate methods of decontamination based upon the location, facility type, type of surfaces to be cleaned, type of material present, tasks or procedures being performed in the area, and as otherwise directed by the DHHS or the CDC for the airborne infectious disease outbreak.

(B) Surfaces known or confirmed to be contaminated with potentially infectious matter shall be cleaned and disinfected immediately or as soon as feasible, unless the area and surfaces can be isolated for a period of time prior to cleaning.

(C) Surfaces contaminated with dust or other loose materials shall be wiped clean prior to disinfection, and the cleaning methods used should minimize dispersal of the dust or loose materials into the air.

(D) Frequently touched surfaces, such as handrails, doorknobs, and elevator buttons, shall be disinfected throughout the workday as recommended by the DHHS or the CDC.

(E) Shared tools, equipment, and workspaces shall be cleaned and disinfected prior to sharing or as recommended by the DHHS or the CDC.

(F) Common areas, such as bathrooms, dining areas, break rooms, locker rooms, vehicles, and sleeping quarters, shall be cleaned and disinfected at least daily or as recommended by the DHHS or the CDC.

(c) Ventilation. This section does not require installation of new HVAC systems to replace or augment functioning systems. Employers who own or control buildings or structures with an existing heating, ventilation, and air conditioning (HVAC) systems must review their HVAC systems and implement a plan that:

(1) The HVAC systems are used in accordance with the HVAC manufacturer's instructions and the design specifications of the HVAC systems.

(2) The amount of outside air circulated through the HVAC systems and the number of air changes per hour are maximized to the extent appropriate.

(3) All air filters are rated Minimum Efficiency Reporting Value (MERV) 13 or higher, if compatible with the HVAC systems. If MERV–13 or higher filters are not compatible with the HVAC systems, employers must use filters with the highest compatible filtering efficiency for the HVAC systems.

(4) All air filters are maintained and replaced as necessary to ensure the proper function and performance of the HVAC systems; and

(5) All intake ports that provide outside air to the HVAC systems are cleaned, maintained, and cleared of any debris that may affect the function and performance of the HVAC systems with the frequency recommended by the manufacturer.

(d) Personal Protective Equipment.

(1) Employers shall evaluate the need for employee use of personal protective equipment (PPE) to prevent exposure to hazards related to the airborne infectious disease. Personal protective equipment may include gloves, goggles, and face shields. The employer shall provide such equipment as necessary.

(2) Upon request, employers shall provide respirators to all employees for voluntary use in compliance with OSH Division's respiratory standard. PPE and respirators that are identified as necessary for the protection of the employee, shall fit the employee, and the PPE shall be provided, used, and maintained in a sanitary and reliable condition at the expense of the employer.

(3) The employer shall:

(A) Provide and require employees to use the PPE and any other protective equipment deemed necessary or recommended, as applicable, by the DHHS or the CDC.

(B) Provide appropriate training and information to each employee required to use PPE.

(C) Where employee-owned PPE is used at the worksite, the employer shall be responsible for ensuring that the employee-owned PPE is adequate and functions properly.

(D) All PPE, including employee-owned PPE used at the worksite, shall be stored, used, and maintained in a sanitary and reliable condition in order to be used at the worksite.

(E) Equipment must be maintained and disposed of according to manufacturer specifications and shall not be reused after the time when it is supposed to be disposed of.

(e) Vaccination. The employer must support vaccination against airborne infectious diseases for each employee by providing reasonable time and paid leave, such as paid sick leave or other administrative leave, if the employer has a policy and practice of providing such leave, to each employee for vaccination and any side effects experienced following vaccination.

History Note: Authority G.S. 95-133;

Eff. December 1, 2024.

SECTION .0400 – EXPOSURE CONTROL PLAN IMPLEMENTATION

13 Ncac 07I .0401 TRAINING

(a) During the time of a designation of an airborne infectious disease as a public health emergency by the Governor of North Carolina, North Carolina General Assembly, U.S. Department of Health and Human Services, DHHS, World Health Organization, or the CDC, employers shall provide training to each employee in a language and at a literacy level the employee understands.

(b) The training shall include:

(1) How the airborne infectious disease is transmitted (including presymptomatic and asymptomatic transmission), the importance of hand hygiene to reduce the risk of spreading infections, ways to reduce the risk of spreading the airborne infectious disease through the proper covering of the nose and mouth, the signs and symptoms of the disease, risk factors for severe illness, and when to seek medical attention.

(2) Employer-specific policies and procedures on patient screening and management.

(3) Tasks and situations in the workplace that could result in infection.

(4) Workplace-specific policies and procedures to prevent the spread of the airborne infectious disease that are applicable to the employee's duties to include:

(A) Policies on Standard and Transmission-Based Precautions;

(B) Physical distancing;

(C) Physical barriers;

(D) Ventilation; and

(E) Aerosol generating procedures.

(5) Employer-specific or multi-employer workplace agreements related to infection control policies and procedures, the use of common areas, and the use of shared equipment that affect employees at the worksite.

(6) Employer-specific policies and procedures for PPE worn to comply with this section, including:

(A) When PPE is required for protection.

(B) Limitations of PPE for protection against the airborne infectious disease.

(C) How to properly put on, wear, and take off PPE.

(D) How to properly care for, store, clean, maintain, and dispose of PPE.

(E) Any modifications to donning, doffing, cleaning, storage, maintenance, and disposal procedures needed to address the airborne infectious disease when PPE is worn to address workplace hazards other than the airborne infectious disease.

(F) Workplace-specific policies and procedures for cleaning and disinfection of PPE.

(7) Employer-specific policies and procedures on health screening and medical management.

(8) Available sick leave policies, any airborne infectious disease-related benefits to which the employee may be entitled under applicable federal, state, or local laws, and other supportive policies and practices to include telework or flexible hours.

(9) The identity of the safety coordinator(s) specified in the Airborne Infectious Disease Plan.

(10) How to notify the business or operation of any symptoms of the airborne infectious disease or a suspected or confirmed diagnosis of the airborne infectious disease.

(11) How and to whom to report unsafe working conditions related to the airborne infectious disease, as well as the protocol for responding to such reports.

(12) The anti-retaliation and anti-discrimination provisions of Section of this Subchapter.

(13) How the employee can obtain copies of this section and any employer specific policies and procedures developed under this section, including the employer's written Airborne Infectious Disease Plan, if required.

(c) Employers may rely on training completed prior to the effective date of this section to the extent that it meets the relevant training requirements under this paragraph.

(d) The employer shall provide each employee with additional training whenever the following occurs:

(1) Changes occur that affect the employee's risk of contracting the airborne infectious disease at work to include new job tasks;

(2) Policies or procedures change; or

(3) There is an indication that the employee has not retained the necessary understanding or skill.

(e) The employer shall implement training that is either overseen or conducted by a person knowledgeable in the covered subject matter as it relates to the employee's job duties.

(f) The employer shall provide training that provides an opportunity for interactive questions and answers with a person knowledgeable in the covered subject matter as it relates to the employee's job duties.

History Note: Authority G.S. 95-133;

Eff. December 1, 2024.

13 Ncac 07I .0402 TEMPORARY MEDICAL REMOVAL FROM THE WORKPLACE

(a) If the employer knows an employee has a confirmed positive test for an airborne infectious disease or has been diagnosed by a licensed healthcare provider, then the employer must immediately remove that employee from the workplace and keep them removed until they meet the employer's established return-to-work criteria.

(b) Nothing in this Rule shall prohibit an employer from permitting a worker known or suspected to be infected with the airborne infectious disease from engaging in teleworking or other forms of offsite work that would not result in exposing other employees to the airborne infectious disease.

(c) If the employer knows an employee is experiencing symptoms of the airborne infectious disease as identified by the CDC, then the employer must immediately remove that employee and either:

(1) Keep the employee removed until they meet the return-to-work criteria in Paragraph (f) of this Rule; or

(2) Keep the employee removed and provide an airborne infectious disease polymerase chain reaction (PCR) test at no cost to the employee.

(A) If the test results are negative, the employee may return to work immediately.

(B) If the test results are positive, the employer must comply with the Rules on Recordkeeping in this Section.

(d) Any time an employee is required to be removed from the workplace for any reason under this section, the employer may require the employee to work remotely or in isolation if suitable work is available.

(e) Where the employer has a policy or a practice of making such payments, employers must use sick leave in order to pay the employee their same regular pay when an employer removes an employee under this Section, in accordance with state law. This subsection does not apply where the employee received disability payments, is covered by workers' compensation, or receives temporary disability.

(f) The determination of when an employee may return to work after an airborne infectious disease-related workplace removal must be based on and be in accordance with guidance from a licensed healthcare provider or the CDC.

(g) When an employee returns to work after temporary medical removal, the employer shall return the employee to his or her former job status. This requirement is not intended to expand upon or restrict any rights an employee has or would have had, absent temporary medical removal, to a specific job classification or position under the terms of a collective bargaining agreement.

History Note: Authority G.S. 95-133;

Eff. December 1, 2024.

13 Ncac 07I .0403 RECORDKEEPING

(a) Small employer exclusion. Employers with 10 or fewer employees on the effective date of this section are not required to comply with the Recordkeeping requirements.

(b) Employers must establish and maintain a log to record each instance identified by the employer in which an employee is positive for an airborne infectious disease, regardless of whether the instance is connected to exposure to the airborne infectious disease at work.

(c) The log must contain, for each instance, the employee's name, one form of contact information, occupation, location where the employee worked, the date of the employee's last day at the workplace, the date of the positive test for, or diagnosis of, the airborne infectious disease, and the date the employee initially had one or more symptoms, if any were experienced.

(d) The information in the log must be recorded within 24 hours of the employer learning that the employee is positive and must be maintained as a confidential medical record and must not be disclosed except as required by this Rule or other federal or state law.

(e) The log must be maintained and preserved while this Rule remains in effect.

(f) Availability of records. By the end of the next business day after a request, the employer must provide, for examination and copying:

(1) The individual log entry for a particular employee to that employee and to anyone having written authorized consent of that employee.

(2) A version of the log that removes the names of employees, contact information, and occupation, and only includes, for each employee in the log, the location where the employee worked, the last day that the employee was at the workplace before removal, the date of that employee's positive test for, or diagnosis of, the airborne infectious disease, and the date the employee first had one or more symptoms, if any were experienced, to any employees, or their authorized representatives.

(g) Employers shall record all work-related confirmed cases of the airborne infectious disease on their OSHA Forms 300, 300A, and 301, or the equivalent forms, if required to do so under 29 CFR part 1904.

History Note: Authority G.S. 95-133;

Eff. December. 1, 2024.

13 ncac 07I .0404 REPORTING FATALITIES AND HOSPITALIZATIONS

All employers shall report to the OSH Division the following:

(1) Each fatality that is the result of an airborne infectious disease within 8 hours of the employer learning about the fatality.

(2) Each airborne infectious disease employee inpatient hospitalization within 24 hours of the employer learning about the inpatient hospitalization.

(3) When reporting airborne infectious disease fatalities and in-patient hospitalizations to the OSH Division in accordance with this section, the employer must follow the requirements in 29 CFR 1904.39, except for 29 CFR 1904.39(a)(1) and (2) and (b)(6).

History Note: Authority G.S. 95-133;

Eff. December 1, 2024.