



ELECTRONIC MAIL

June 29, 2021

James Frederick
Acting Assistant Secretary of Labor for
Occupational Safety and Health
Occupational Safety and Health Administration
200 Constitution Ave NW
Washington, DC 20210

Re: COVID-19 Health Care Emergency Temporary Standard (ETS)

Dear Acting Assistant Secretary Frederick,

Thank you for the opportunity to comment on the COVID-19 Health Care Emergency Temporary Standard (ETS). The Alaska State Hospital and Nursing Home Association (ASHNHA) represents more than 65 hospitals, skilled nursing facilities, home health agencies and other health care organizations. Our membership is distributed across Alaska's vast expanse of over half a million square miles, from PeaceHealth Ketchikan Medical Center in Southeast Alaska to Samuel Simmonds Memorial Hospital in Utqiagvik, north of the Arctic Circle. Our diverse association unites every small rural hospital, nursing home, and large hospital system in the state around common goals. For over 60 years, ASHNHA members have worked together to improve health care in Alaska.

We would like to ask for an extension on the effective date of at least six months. Many of our facilities operate in extremely rural locations with immense workforce challenges. They simply do not have the resources to digest a long and complex rule while responding to a pandemic. Our healthcare heroes are immersed in caring for our patients and residents while putting their lives on the line. In addition, the logistical planning to implement the requirements of this rule will take time, especially in Alaska where contractors and supplies are not readily available.

Because of the extreme challenge of recruiting an adequate workforce to Alaska, it will be difficult to designate a new COVID-19 workplace safety coordinator position. **We ask that OSHA extend implementation deadlines for this new role.**

OSHA's intent to enhance workplace safety for employees is applauded. However, some elements of these standards simply are not feasible to meet in long-term care. For example, our long-term care members do not have airborne isolation rooms, nor is it feasible to add them. **We strongly encourage OSHA to recognize situations where these options are not feasible and recognize providers for their good faith efforts to meet the standards.**

Although we support OSHA's efforts to improve workforce safety, many of the elements of the new rule are already in place based on the CDC's infection control and clinical guidance. **We recommend that rather than re-stating any clinical or infection control standards, OSHA point to CDC guidance. For new standards, we ask that OSHA provide consultation and training resources so our members can understand how to implement them.**

It will be challenging to identify all contractors and visitors in our hospitals and nursing homes and provide notification of any exposure within 24 hours. Overall, notification of other employer without providing the name of the individual will not provide necessary information for the other employer to act or respond. **We ask that the standard be modified to allow “as feasible” and remove the requirement to notify the other employer.**

Please consider extending the comment period by at least 30 days. This will give our facilities adequate time to thoughtfully respond to help you better understand how the rule directly impacts Alaska’s healthcare providers.

Thank you again for the opportunity to provide feedback. I am happy to answer any questions about the impact this rule will have in Alaska.

Sincerely,



Jared C. Kosin, JD, MBA
President & CEO

CC: U.S. Senator Lisa Murkowski
U.S. Senator Dan Sullivan
Congressman Don Young

