

WisCon Words of Wisdom

Volume 2 | Issue 3 | March 1, 2022

WI COVID-19 by the Numbers

Total Positive Cases	1,381,488
Total Deaths	11,921
Total Individuals Hospitalized	58,699

DHS's Wisconsin Summary Data

Numbers Updated 02/28/2022

WI COVID-19 Vaccine Distribution by the Number of Doses

Total Administered	9,287,704
Johnson &Johnson	342,760
Moderna	3,516,834
Pfizer	5,428,110

Check out the <u>latest data about Wisconsin's progress!</u>

Upcoming Webinar Topics

COVID-19 Update	3/7
Ladderway Fall Protection	3/14
OSHA eTools	3/21
HazCom—What are you missing?	3/28

Sign up here for weekly webinar reminders! Click here to view previous webinars!

Safety and Health Achievement Recognition Program (SHARP)

What is SHARP and what does it take to become SHARP? SHARP is an acronym for the Safety and Health Recognition Achievement Program run by OSHA through OSHA's On -Site Consultation Programs like WisCon. Achieving SHARP status means that you have used WisCon's services and execute exemplary safety and health programs in practice and on paper. WisCon has a mission to grow our number of SHARP company participants.

To be eligible for SHARP, your company facility must meet the following criteria:

- Attend a WisCon SHARP webinar,
- Have at least one year of operating history maintaining an injury and illness rates below your industry's national average,
- Have 250 or fewer employees on-site and fewer than 500 employees corporatewide,
- Participate in one comprehensive safety and health-focused visit each including a full evaluation of your safety and health management program,
- Promote employee involvement in the consultation process and safety management processes,
- Correct ALL hazards identified by a consultant within the agreed upon timeframe,
- Maintain all basic elements for managing health and safety.

There are many benefits to becoming SHARP; more than I could fit in this space. Click <u>HERE</u> to visit OSHA's FAQ webpage to learn more about SHARP or contact <u>WisCon</u>.



Spotlight Corner—Danica Harrier

Danica is one of our outstanding field consultants. She has been with WisCon for over 10 years. In addition to her field work, she also serves as our current Safety and

Health Achievement Recognition Program (SHARP) Coordinator. Danica promotes SHARP, guides interested companies on the pathway to becoming SHARP and provides resources to and manages existing SHARP companies. She also serves as IQAP (Internal Quality Assurance Program) Coordinator. Danica has previous work experience in food processing, veterinary medicine, laboratories, and property management. She has a bachelor's degree in biology. Danica is also a published author. She makes use of all her free time, from spending time with her family to crafting and rock hunting.



Do masks work? - By: Veronica Scott

To get a clear answer to that question you need to be more specific in what you are asking. Does community use of quality masks reduce the spread of COVID-19? The answer to that question is yes. If you are asking if you wear a mask will that prevent you from ever catching COVID-19, the answer could be no depending on the number of people wearing masks in your community. The question of whether masks are an effective tool to fight COVID-19 depends on whether or not you are solely concerned for the individual or if you are taking a larger look at the community. We at WisCon are focused on community health.

SARS-CoV-2 (the virus that causes COVID-19) spreads through 3 main routes: (1) inhalation of fine respiratory droplets and aerosol particles, (2) deposition of respiratory droplets in the mouth, nose, and eyes, and (3) touching the mouth, nose, and eyes with hands that have virus-containing respiratory fluids on them. ¹ A large amount of protection to the community comes from infected individuals wearing masks (source control) so that they are not spreading infectious droplets to be breathed in by and deposited on individuals who do not have the virus.² An estimated 40% of infected individuals never experience symptoms and transmission of the virus peaks prior to individuals experiencing any symptoms². This combined information resulted in the CDC and others estimating more than 50% of infections are transmitted from people not exhibiting symptoms.² That leaves about 50% of cases where masks worn after symptom onset would reduce the spread of the disease. Communities are protected and the number of cases is reduced when masks are required to be worn when experiencing symptoms. In addition, when masks are required to be worn at all times the spread of the disease in a community is reduced even further.

Cloth masks reduce the amount of infectious droplets breathed in, deposited on the mouth and nose, and prevent the wearer from touching their mouth and nose (personal protection).³ This

offers the individual a level of protection from exposure to the SARS-CoV-2 virus, but studies do show it is less effective at protecting individuals than an infectious individual wearing a mask.² While some scientific studies have been used as evidence that masks (cloth and surgical) offer no benefit, these studies had small sample sizes and had limited control over the variables in the studies so the results are not viewed as conclusive.³ More studies have shown cloth masks provide protection and the studies are of a higher quality.³ The authors of these studies have tried to identify the best materials and generally agree that tightly woven cotton masks made from several layers of material offer good protection.³ In general, they also agree that single layer masks made from materials that are loosely woven offer less protection (note they do not say offers no protection). Mask protection provided to the wearer is lower than protection provided when infected individuals mask and the level of protection depends on the materials of the mask.

So if masks work, why are communities removing mask mandates? This is a complex issue that is not only driven by science, but by community values, public sentiment, and political discourse. People are tired of wearing masks and public health officials must decide if the benefits of continued mask use outweigh the fatigue individuals feel from continuous government mandates. The removal of the mandates does not mean the measure does not offer protection and never offered protection.

Sources:

- 1. Centers for Disease Control and Prevention. (2021, May 5). *Scientific brief: SARS-COV-2 transmission*. Retrieved February 23, 2022, from LINK
- 2. Centers for Disease Control and Prevention. (2020, November 16). *The science of masking to control COVID-19*. Retrieved February 23, 2022, from <u>LINK</u>
- 3. Centers for Disease Control and Prevention. (2021, December 6). Science brief: Community use of masks to control the spread of SARS-COV-2. Retrieved February 23, 2022, from LINK

March is Ladder Safety Month

March is Ladder Safety Month and this year each week in March has a different focus. Ladder safety is so important because each year more than 100 people die in ladder related incidents and thousands more experience injuries from their use of ladders. This month we want to focus on ladder safety in order to decrease injuries and fatalities caused by ladder misuse and increase awareness and training on ladder safety concerns.

Ladder Safety Month Week Themes

- February 28 March 6: Choosing Your Ladder
- March 7-13: Safety Before the First Step (Inspection and Set Up)
- March 14-20: Safety While Climbing
- March 21-27: Safety at the Top

For more information about Ladder Safety Month and a list of events please visit <u>THIS</u> webpage.

Wisconsin Safety and Health Consultation Program Phone: (800) 947-0553 | Email: wiscon@slh.wisc.edu

http://slh.wisc.edu/wiscon

WSLH COVID-19 Consulting

Phone: (608) 226-5246 | Email: covidconsulting@slh.wisc.edu

Request Services