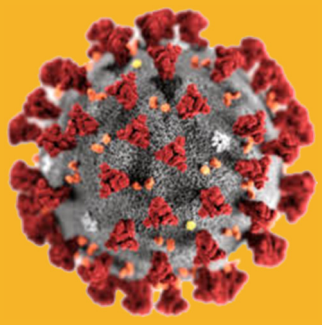
TEAMSTERS SAFETY & HEALTH Coronavirus



Transit Operators
Coronavirus Pandemic (COVID-19, SARS-CoV-2)

(Updated March 25, 2020)

This is a rapidly evolving situation. This fact sheet will be updated online as needed. See links at the end of this fact sheet for the most up-to-date information.

COVID-19 is spreading rapidly within the United States. The outbreak has been declared a national emergency in the United States and a global pandemic by the World Health Organization. Protecting workers who engage in local and suburban passenger transportation by bus, rail, or subway should be a high priority so that they can continue to provide transportation services without getting sick or spreading the infection to their communities.

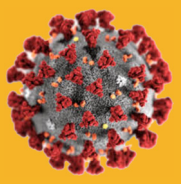
The IBT Safety and Health Department is continuously monitoring the COVID-19 pandemic and is committed to providing Teamsters locals and affiliates with the information they need to protect our members and the communities they serve.

Unions have a key role in standing up for the right of workers to a safe and healthy workplace. Local union representatives can use a variety of means to accomplish this, including making information requests and demanding to bargain on occupational health preparedness plans, infection control protocols, training for workers, and the supply and sufficiency of personal protective equipment.

For more information, contact the IBT Safety and Health Department at (202) 624-6960 or visit our website: https://teamstersafety.org/testing/covid-19/.

WHAT IS COVID-19?

Coronavirus disease 2019 (abbreviated COVID-19) is an infectious disease caused by the most recently discovered coronavirus, named “SARS-CoV-2”. This new virus and disease were unknown before the outbreak began in Wuhan, China, in December 2019. Coronaviruses are a large family of viruses that are common in people and many different species of animals, including camels, cattle, cats, and bats.



In March 2020, the World Health Organization (WHO) declared that due to the global outbreak of disease, COVID-19 is a pandemic[i]. The virus that causes COVID-19 seems to be spreading easily and sustainably in the community (community spread) in affected areas. The virus can cause mild to severe respiratory illness, at times resulting in death, both in healthy adults as well as in elderly people with existing health problems or a weaker immune system.

HOW DOES COVID-19 SPREAD?

New research[ii] has indicated that SARS-CoV-2 may spread by respiratory droplets, environmental contact, as well as by fecal-oral transmission. A person starts being contagious during the "incubation period," the time between catching the virus and beginning to have symptoms of the disease, which is up to 14 days.

Person-to-person spread

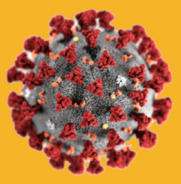
COVID-19 is transmitted most efficiently from direct person to person contact, through:

- Respiratory droplets produced when an infected person coughs or sneezes:
  - These droplets can land in the mouths, noses or eyes of people who are nearby or possibly be inhaled into the lungs;
- Spread is most likely among close contacts (about 6 feet);
  - Close contact[iii] is defined as-
    - being within approximately 6 feet (2 meters) of a COVID-19 case for a prolonged period; close contact can occur while caring for, living with, visiting, or sharing a health care waiting area or room with a COVID-19 case; or
    - having direct contact with infectious secretions of a COVID-19 case (e.g., being coughed on, sneezed on).
- Contact with saliva and fecal matter may also be a route of transmission for the COVID-19 virus as well as viral aerosolization.

SARS-CoV-2 virus has been detected in upper and lower respiratory tract samples from patients, with high viral loads in upper respiratory tract samples. Therefore, virus transmission via respiratory secretions in the form of droplets (>5 microns) or aerosols (<5 microns) appears to be likely.

Spread from contact with infected surfaces or objects

It may be possible that a person can get indirect transmission of the COVID-19 virus by touching a surface or object that has the virus on it and then touching their own mouth, nose, or possibly their eyes, but this is not thought to be the main way the virus spreads.



A recent laboratory study by researchers at the National Institutes of Health (NIH), the Centers for Disease Control and Prevention (CDC) and other academic institutions found that viable SARS-CoV-2 virus could be detected:

- in aerosols up to 3 hours post aerosolization,
- up to 4 hours on copper,
- up to 24 hours on cardboard, and
- up to 2-3 days on plastic and stainless steel.

WHAT ARE THE SYMPTOMS OF COVID-19?

According to the World Health Organization (WHO), "Most patients (80%) experienced mild illness…approximately 14% experienced severe disease and 5% were critically ill." Older people and those with underlying medical problems like high blood pressure, heart problems, diabetes, lung disease, or cancer are more likely to develop serious illnesses.

The following symptoms[iv] may appear 2-14 days after exposure. These symptoms are usually mild and begin gradually:

- Fever
- Cough
- Shortness of breath

Emergency warning signs include:

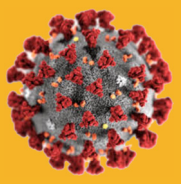
- Difficulty breathing or shortness of breath
- Persistent pain or pressure in the chest
- New confusion or inability to arouse
- Bluish lips or face

IS THERE A VACCINE, DRUG, OR TREATMENT FOR COVID-19?

To date, there is no vaccine and no specific antiviral medicine to prevent or treat COVID-2019. Possible vaccines and some specific drug treatments to prevent and treat COVID-19 are under investigation but will take months of clinical trials to become safely available. Antibiotics do not work against COVID-19 because antibiotics only work on bacterial infection. People with serious illnesses should be hospitalized where supportive care (IV Fluids) is administered to support the body's immune system.

WHAT ARE THE MOST EFFECTIVE WAYS TO PROTECT WORKERS?

Measures for protecting workers from exposure to, and infection with, the novel coronavirus, depend on the type of work being performed and exposure risk, including potential for interaction with infectious people and contaminated environments (e.g., worksites) or materials (e.g., laboratory samples, waste) that are contaminated with the virus.



OSHA Guidance

OSHA has developed planning Guidance on Preparing Workplaces for COVID-19[vii], based on traditional infection prevention and industrial hygiene practices. It focuses on the need for employers to implement engineering, administrative, and work practice controls and personal protective equipment (PPE). Employers and workers should use this planning guidance to help identify risk levels in workplace settings and to determine any appropriate control measures to implement.

Employers should establish comprehensive workplace plans – in consultation with workers – to identify potential exposure routes, establish controls to mitigate risk and implement training procedures. OSHA standards, including those for PPE (personal protective equipment)(29 CFR 1910.132) and respiratory protection (29 CFR 1910.134), require employers to assess the hazards to which their workers may be exposed. In assessing potential hazards, employers should consider whether their workers may encounter someone infected with COVID-19 in the course of their duties.

Employers should also determine if the tasks being performed could expose workers to fomites (objects or materials which are likely to carry infection) harboring the COVID-19 virus.

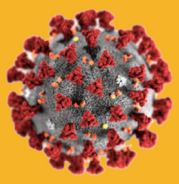
Employers should adopt infection control strategies based on a thorough hazard assessment, following the '*hierarchy of controls*"[viii] recommended by OSHA. These controls include using appropriate combinations of:

- **Engineering controls** involve isolating employees from work-related hazards. Where they are appropriate, these types of controls reduce exposure to hazards without relying on worker behavior and can be the most cost-effective solution to implement.

- **Administrative Controls** require action by the worker or employer. Typically, administrative controls are changes in work policy or procedures to reduce or minimize exposure to a hazard, such as:
    - Protocols to clean and disinfect frequently touched objects and surfaces.
    - Training and education.

- **Safe work practices** are types of administrative controls that include procedures for safe and proper work used to reduce the duration, frequency, or intensity of exposure to a hazard, such as:
    - Emphasis on personal hygiene practices, hand-washing, and respiratory etiquette.

- **Personal protective equipment (PPE)** includes gloves, goggles, face shields, face masks, and respiratory protection, when appropriate. During an outbreak of an infectious disease, such as COVID-19, recommendations for PPE specific to occupations or job tasks may change depending on geographic location, updated risk assessments for workers, and information on PPE effectiveness in preventing the spread of COVID-19. Employers should check the OSHA



and the Centers for Disease Control and Prevention (CDC) websites regularly for updates about recommended PPE."[ix]

Centers for Disease Control and Prevention (CDC) Guidance:

The CDC has developed interim guidance for businesses and employers to plan, prepare and respond to help prevent workplace exposures to acute respiratory illnesses, including COVID-19, in nonhealthcare workplaces and to provides planning considerations if there are more widespread, community outbreaks of COVID-19. Healthcare workers and employers should consult CDC guidance specific to them. For all workers, regardless of specific exposure risks, it is always a good practice to:

- Frequently wash your hands with soap and water for at least 20 seconds. When soap and running water is unavailable, use an alcohol-based hand rub with at least 60% alcohol. Always wash hands that are visibly soiled.
- Avoid touching your eyes, nose, or mouth with unwashed hands.
- Avoid close contact with people who are sick.

Your Rights Under OSHA

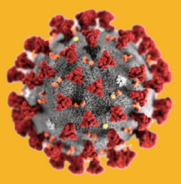
OSHA does not have a specific standard covering COVID-19. The IBT, along with other unions, has petitioned[v] OSHA for an emergency temporary standard for infectious diseases, including COVID-19. OSHA provides *'Guidance on Preparing Workplaces for COVID-19'*[vi] to help employers and workers identify risk levels in workplaces and to determine appropriate control measures to implement.

California OSHA (Cal/OSHA) is the only state that has an *Aerosol Transmissible Diseases (ATD)* standard[vii], which contains requirements for protecting employees from diseases and pathogens transmitted by aerosols. COVID-19 is an airborne (among other routes of transmission) infectious disease covered by the ATD standard. California's *'Workplace Guide to Aerosol Transmissible Diseases'*[viii] provides information on how an employer would meet the requirements of the standard.

Various OSHA requirements may apply, depending on the specific work task and occupational exposure to COVID-19, and any other biological or chemical agents. These are described on the OSHA COVID-19 website.[ix] Among the most relevant are:

- **OSHA's Personal Protective Equipment (PPE) standards**[x] (in the general industry) require using gloves, eye and face protection, and respiratory protection.

- **OSHA's Hazard Communication standard**[xi] (in the general industry), requires employers to protect their workers who are exposed to hazardous chemicals. Employers should be aware that products used for cleaning and disinfection of surfaces could contain hazardous chemicals.[xii]



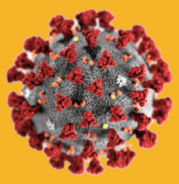
- **The Centers for Disease Control and Prevention (CDC)** recommends using disinfectants that meet the Environmental Protection Agency's (EPA) criteria for use against SARS-CoV-2.

- **OSHA's Bloodborne Pathogens standard**[xiii] applies to occupational exposure to human blood and other potentially infectious materials that typically do not include respiratory secretions that may transmit COVID-19. However, the provisions of the standard offer a framework that may help control some sources of the virus, including exposures to body fluids (e.g., respiratory secretions) not covered by the standard.

- **OSHA's recordkeeping**[xiv] requirements at 29 CFR Part 1904 mandate covered employers record certain work-related injuries and illnesses on their OSHA 300 log. COVID-19 can be a recordable illness if a worker is infected as a result of performing their work-related duties.

SPECIFIC GUIDANCE FOR TRANSIT OPERATORS

- **Regularly perform proper hand hygiene:**
  - **Hand hygiene** is one of the single most important infection control measures.
  - Wash your hands with **soap and water**, when available, for 20 seconds, particularly when hands are visibly soiled.
  - If soap and water are not available regularly, use **an alcohol-based hand sanitizer** containing at least 60% alcohol. Cover all surfaces of your hands and rub them together until they feel dry.
  - **Key times to clean** hands include:
    - Before beginning a work break and at the end of the shift.
    - After touching other commonly touched surfaces, such as fareboxes and handrails.
    - After assisting a passenger.
    - After blowing one's nose, coughing, or sneezing.
    - After using the restroom.
    - Before eating or preparing food.
- **Avoid touching your eyes, nose, and mouth** with unwashed hands or when wearing gloves.
- **Avoid close contact** (i.e., within 6 feet) with transit passengers; consider allowing transit passengers to enter and exit the bus through rear entry doors, requesting passengers to avoid standing or sitting within 6 feet of the bus driver.
- **Avoid touching surfaces** often touched by **transit passengers**.
- **Do not touch surfaces** contaminated by **body fluids**.
- **Use gloves** if touching surfaces contaminated with body fluids or if required to physically contact a transit passenger. Gloves should be carefully removed and discarded after each use, and you should immediately wash your hands.
- **Use disposable disinfectant wipes** on surfaces in the driver cockpit commonly touched by the operator.



What Steps Should My Employer Take?

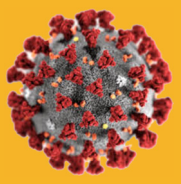
Your employer should develop a COVID-19 **health and safety plan** to protect employees. This plan should be shared with you and your coworkers and should:

- Actively encourage **sick employees** to stay home. Employees should stay home until they are free of fever (100.4° F [38° C] or greater), and any other symptoms for at least 24 hours, without the use of fever-reducing or other symptom-altering medicines (e.g. cough suppressants). If sick, call your primary care physician before visiting their office.
- Provide information on **who to contact** if you become sick.
- **Designate a person** who is responsible for responding to COVID-19 concerns. You should know who this person is and how to contact them.
- Providing you with the **right information** about COVID-19, how it spreads, and your risk of exposure.
- Conduct **worksite assessments** to identify COVID-19 prevention strategies.
- To keep riders and operators at a safe social distance, consider establishing a rear-door boarding policy[xv] that would require passengers to enter and exit through rear doors.
- **Provide gloves** if you may touch surfaces contaminated with body fluids or if you are required to physically contact a transit passenger. Gloves should be carefully removed and discarded after each use, and you should immediately wash your hands.
- Provide **training on good hand-washing practices** and other routine infection control precautions. This will help reduce the spread of many diseases, including COVID-19.
- Show you where you can **access soap** and clean running water or alcohol-based hand sanitizers containing at least 60% alcohol.
- Provide **disposable disinfectant wipes** so that surfaces commonly touched by the bus operator can be wiped down.
- Provide **tissues and no-touch disposal receptacles** for use by employees.
- Place **posters** that encourage staying home when sick[xvi], cough and sneeze etiquette[xvii]and good hand hygiene[xviii] practices at the entrance to the workplace and in other work areas where they are likely to be seen.
- Reach out to **local public health officials** to establish ongoing communications to facilitate access to relevant information before and during a local outbreak.

What Are the Requirements for the Use of Personal Protective Equipment (PPE)?

Transit agencies and workers should follow the CDC's recommendations for personal protective equipment (PPE).

Gloves should be provided and worn if touching surfaces contaminated with body fluids or if required to physically contact a transit passenger. Gloves should also be worn if there is a risk of exposure to chemical hazards from using products for cleaning and disinfection of surfaces. Gloves should be carefully removed and discarded after each use, and you should immediately wash your hands.



The CDC does not recommend that people who are well wearing a facemask to protect themselves from respiratory diseases, including COVID-19. Facemasks should be used by people who show symptoms of COVID-19 to help prevent the spread of the disease to others.

Are There Any Protections Against Retaliation for Health and Safety Activities?

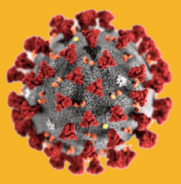
Under the *National Transit Systems Security Act of 2007* (NTSSA), protects public transportation agency employees who engage in whistleblowing activities on public transportation safety or security. An employee who believes he/she has suffered workplace retaliation must file a complaint with the Occupational Safety and Health Administration (OSHA). OSHA will investigate the complaint, filed within 180 days of the alleged retaliation, and can order remedies. Under the NTSSA, an employer may not discharge a worker or in any other manner retaliate against him/her because of you:

- **Provided information to**, caused the information to be provided to, or assisted in an investigation by **a federal regulatory or law enforcement agency**, a member or committee of Congress, or your employer about an alleged violation of federal laws, rules, or regulations related to public transportation safety and security, or about fraud, waste, or abuse the federal grants or other public funds intended for public transportation safety or security.
- **Refused** to violate or assist in a violation of any federal law, rule or regulation relating to public transportation safety or security.
- **Filed a complaint**, caused a proceeding to be brought or testified in a proceeding under one of these laws, rules or regulations.
- **Reported** a hazardous safety or security condition.
- **Refused** to work when confronted with an imminent hazardous safety or security condition.
- **Refused** to authorize the use of any safety- or security-related equipment, track, or structures if those structures present an imminent hazardous safety or security condition.

WORKER FRIENDLY EMPLOYMENT POLICIES

As a union, the rights and benefits we have fought for can help to prevent disease and help people who do become ill, including:

- Adequate, non-punitive sick leave policies that encourage sick workers to stay at home without the loss of pay, benefits, seniority or other benefits.
- Family leave policies that allow people to stay home to take care of household members.
- Financial remedies for unemployment scenarios, where people are not able to work or are required to work overtime to take care of patients.
- Access to quality and affordable health care.
- Protection from stigma and discrimination.
- A rapid response system to share communications with employees.



WHERE TO FIND MORE INFORMATION AND RESOURCES

Stay informed. Talk to your employer, supervisor, and union representative. See these sources for more information on worker exposures to COVID-19:

- IBT: teamster.org/covid-19; https://teamstersafety.org/testing/covid-19/
- CDC COVID19: www.cdc.gov/coronavirus/2019-ncov/
- OSHA COVID19: www.osha.gov/SLTC/covid-19/controlprevention.html
- NIOSH Workplace Safety and Health Topic: www.cdc.gov/niosh/emres/2019_ncov.html
- CDC Interim Guidance for Businesses and Employers www.cdc.gov/coronavirus/2019-ncov/community/guidance-business-response.html
- CDC Resources for Businesses and Employers
- https://www.cdc.gov/coronavirus/2019-ncov/community/organizations/businesses-employers.html
- CDC Cleaning and Disinfection Recommendations
- https://www.cdc.gov/coronavirus/2019-ncov/prepare/disinfecting-building-facility.html
- EPA List N: Disinfectants for Use Against SARS-CoV-2
- https://www.epa.gov/pesticide-registration/list-n-disinfectants-use-against-sars-cov-2
- OSHA Guidance on Preparing Workplaces for COVID-19 https://www.osha.gov/Publications/OSHA3990.pdf
- OSHA's COVID-19 website https://www.osha.gov/SLTC/covid-19/standards.html
- Whistleblower Protection for Public Transportation Agency https://www.osha.gov/Publications/OSHA-factsheet-whistleblower-trans-agencies.pdf

---

https://www.who.int/dg/speeches/detail/who-director-general-s-opening-remarks-at-the-media-briefing-on-covid-19---11-march-2020

[ii] https://www.nature.com/articles/s41368-020-0075-9

[iii] https://www.cdc.gov/coronavirus/2019-ncov/if-you-are-sick/steps-when-sick.html

[iv] https://www.cdc.gov/coronavirus/2019-ncov/downloads/COVID19-symptoms.pdf

[v] https://www.hpae.org/wp-content/uploads/2016/07/WPV-petition.final-doc.12July16-1.pdf

[vi] https://www.osha.gov/Publications/OSHA3990.pdf

[vii] https://www.dir.ca.gov/title8/5199.html

[viii] https://www.dir.ca.gov/dosh/dosh_publications/ATD-Guide.pdf

[ix] https://www.osha.gov/SLTC/covid-19/standards.html

[x] https://www.osha.gov/laws-regs/regulations/standardnumber/1910#1910_Subpart_I

[xi] https://www.osha.gov/laws-regs/regulations/standardnumber/1910/1910.1200

[xii] https://www.epa.gov/pesticide-registration/list-n-disinfectants-use-against-sars-cov-2

[xiii] https://www.osha.gov/laws-regs/regulations/standardnumber/1910/1910.1030

[xiv] https://www.osha.gov/SLTC/covid-19/standards.html

[xv] https://new.mta.info/precautions-against-coronavirus

[xvi] https://www.cdc.gov/nonpharmaceutical-interventions/tools-resources/educational-materials.html

[xvii] https://www.cdc.gov/healthywater/hygiene/etiquette/coughing_sneezing.html

[xviii] https://www.cdc.gov/handwashing/materials.html