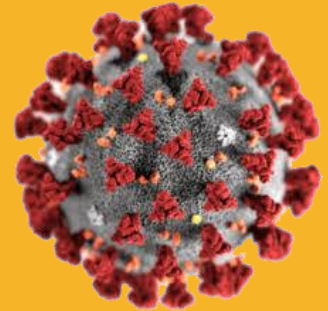




TEAMSTERS SAFETY & HEALTH Coronavirus



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

(Updated October 9, 2020)

This is an evolving situation. This fact sheet will be updated online as new information may become available. See links at the end of this fact sheet for the most current information.

COVID-19 continues to spread within the United States, and most states have seen increases in the number of positive cases. 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.

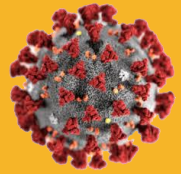
The IBT Safety and Health Department is continuously monitoring the COVID-19 pandemic and is committed to providing Teamsters locals and affiliates with the information they need to protect our members and the communities they serve.

Unions have a crucial role in standing up for the right of workers to a safe and healthy workplace. Local union representatives can use various 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/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.



The virus seems to be spreading quickly 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 and elderly people with existing health problems or a weaker immune system.

HOW DOES COVID-19 SPREAD?

In general, infections with respiratory viruses are principally transmitted through three modes: contact, droplet, and airborne.

- **Contact transmission** is an infection spread through direct contact with an infectious person (e.g., touching during a handshake) or with an article or surface that has become contaminated. The latter is sometimes referred to as “fomite transmission.”
- **Droplet transmission** is an infection spread through exposure to virus-containing respiratory droplets (i.e., larger and smaller droplets and particles) exhaled by an infectious person. Transmission is most likely to occur when someone is close to the infectious person, generally within about 6 feet.
- **Airborne transmission** is an infection spread through exposure to those virus-containing respiratory droplets comprised of smaller droplets and particles that can remain suspended in the air over long distances (usually greater than 6 feet) and time (typically hours).

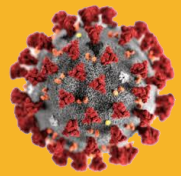
A bus transit employee may come into contact with the virus when:

- In close contact (within about 6 feet) with other people at the worksite, including passengers, coworkers, transit station workers, and maintenance workers.
- Touching or handling high-contact surfaces and equipment, and then touching their face, mouth, nose, or eyes.

The primary mode by which people are infected with SARS-CoV-2 (the virus that causes COVID-19) is through exposure to respiratory droplets carrying the infectious virus. 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.

Respiratory droplets are produced during exhalation (e.g., breathing, speaking, singing, coughing, sneezing) and span a broad spectrum of sizes that may be divided into two basic categories based on how long they can remain suspended in the air:

- **Larger droplets**, some of which are visible and that fall out of the air rapidly within seconds to minutes while close to the source.
- **Smaller droplets and particles** (formed when small droplets dry very quickly in the airstream) that can remain suspended for many minutes to hours and travel far from the source on air currents.



Once respiratory droplets are exhaled and as they move outward from the source, their concentration decreases through the fallout from the air (largest droplets first, smaller later). The remaining droplets and particles are diluted into the growing volume of air they encounter.

A recent study, 'Community Outbreak Investigation of SARS-CoV-2 Transmission Among Bus Riders in Eastern China', published in the Journal of the American Medical Association (JAMA) Internal Medicine, on September 1, 2020, demonstrated that SARS-CoV-2, the virus that causes coronavirus disease 2019 (COVID-19), can be transmitted as an aerosol (i.e., airborne) and "in closed environments, with air recirculation, SARS-CoV-2 it is a highly transmissible pathogen."ⁱⁱⁱ

WHAT ARE THE SYMPTOMSⁱⁱⁱ OF COVID-19?

People with COVID-19 have had a wide range of symptoms reported – ranging from mild symptoms to severe illness. Symptoms may appear **2-14 days after exposure to the virus**. People with these symptoms may have COVID-19.

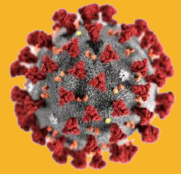
It is important to know that the virus may also be spread by people who do not have symptoms or are pre-symptomatic^{iv}.

- Fever or chills
- Cough
- Shortness of breath or difficulty breathing
- Fatigue
- Muscle or body aches
- Headache
- New loss of taste or smell
- Sore throat
- Congestion or runny nose
- Nausea or vomiting
- Diarrhea

This list does not include all possible symptoms. The CDC will continue to update this list as we learn more about COVID-19.

Emergency warning signs^v include:

- Trouble breathing
- Persistent pain or pressure in the chest
- New confusion
- Inability to wake or stay awake
- Bluish lips or face



*This list is not all possible symptoms. Please call your medical provider for any other symptoms that are severe or concerning to you.

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

Possible vaccines to prevent COVID-19 are undergoing clinical trials. “Currently, there are no FDA-approved medicines specifically for COVID-19. However, the FDA has granted emergency use authorizations for some medicines to be used for certain patients hospitalized with COVID-19. The National Institutes of Health provides more information about [treatment options](#). Antibiotics do not work against COVID-19 because antibiotics only work on bacterial infections. People with COVID-19 should receive supportive care to help relieve symptoms. People with mild symptoms can recover at home.”^{vi}

WHAT ARE THE MOST EFFECTIVE WAYS TO PROTECT WORKERS?

STEPS OPERATORS SHOULD TAKE^{vii}:

Stay home if you are having **symptoms** of COVID-19.

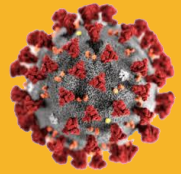
- Follow the [CDC recommended steps](#) if you are sick.
- Do not return to work until you meet the criteria to [discontinue home isolation](#).
 - Talk with your healthcare provider about when it is safe for you to return to work and coordinate with your employer.
- Follow the [CDC recommended precautions](#).
- Tell your supervisor if you are well, but someone you live with or someone you have had recent [close contact](#) with has COVID-19.

Stay at least 6 feet away from customers and coworkers, when possible.

- Request that passengers avoid standing or sitting within 6 feet of each other and the driver’s seat.

Wear a cloth face covering or **mask in public and at work when other **social distancing** measures are difficult to maintain.** Cloth masks may prevent people who don’t know they have the virus from spreading it to others.

- Be careful when putting on and taking off cloth face [masks](#):
 - Wash your hands before putting on and after taking off the cloth mask.
 - Don’t touch your cloth mask while wearing it.
 - Don’t touch your face, mouth, nose, or eyes while taking off the cloth mask.
 - [Wash](#) the cloth mask after each use.
- CDC provides information on [adaptations and alternatives](#) that should be considered when cloth masks may not be feasible.
- Consider carrying a spare cloth mask.
- [Communicate with passengers](#) about the importance of wearing cloth masks.



Be aware of contact with frequently touched surfaces.

Wash your hands regularly with soap and water for at least 20 seconds. You don't need to wear gloves if you wash your hands regularly (unless they are already required for your job).

- Use an alcohol-based hand sanitizer containing at least 60% alcohol if soap and water are not available.
- Clean your hands at these key times:
 - Before, during, and after preparing food
 - Before eating food
 - After using the toilet
 - After blowing your nose, coughing, or sneezing
 - After putting on, touching, or removing cloth masks
 - Before and after work and work breaks
 - After touching frequently touched surfaces, such as fareboxes and handrails
 - After assisting passengers with their belongings (e.g., wheelchairs, luggage, bags)
 - After assisting passengers boarding or exiting the vehicle

Do not touch your face, mouth, nose, or eyes.

Cover your coughs and sneezes.

- Use tissues to cover your mouth and nose when you cough or sneeze.
- Dispose of used tissues in the trash.
- Wash your hands with soap and water for at least 20 seconds.

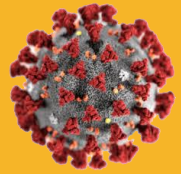
STEPS EMPLOYERS SHOULD TAKE^{viii}

Evaluate your workplace to identify scenarios where workers cannot maintain [social distancing](#) of at least 6 feet from each other and/or customers. Use appropriate combinations of controls following the [hierarchy of controls](#) to address these situations to limit the spread of the virus that causes COVID-19. A committee of both workers and management staff may be most effective at recognizing all scenarios. Approaches to consider are described below.

Create a COVID-19 Workplace Health and Safety Plan

Review the [CDC Interim Guidance for Businesses and Employers](#) and the [Resuming Business Tool Kit](#) for guidelines and recommendations that all employers can use to protect their employees.

- Identify an on-site workplace coordinator who will be responsible for COVID-19 assessment and control.
 - When developing plans, include all employees in the workplace, for example, staff, utility employees, relief employees, janitorial staff, supervisory staff, and bus transit operators.



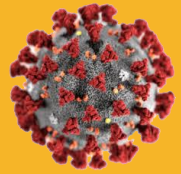
- Develop plans to communicate with passengers entering the bus regarding modifications to work or service processes.
- Notify all workers that any COVID-19 concerns should be directed to the identified coordinator.
- Implement flexible sick leave and supportive policies and practices.
 - Develop policies that encourage sick employees to stay at home without fear of reprisals, and ensure employees are aware of these policies.
 - If contractors are employed in the workplace, develop plans to communicate with the contracting company regarding modifications to work processes.
- Consider conducting daily in-person or virtual health checks (e.g., symptom and/or temperature screening) of employees on scheduled workdays.
 - [Screening options](#) could include having employees self-screen before arriving to work or having on-site screening by taking employees' temperatures and assessing other potential [symptoms](#) before beginning work. (see [CDC Interim Guidance for Businesses and Employers](#))
 - Make sure employees can maintain at least 6 feet of distance while waiting for screening if done on-site.
 - Make employee health screenings as private as possible and maintain the confidentiality of each individual's medical status and history.

Take action if an employee is suspected or confirmed to have COVID-19

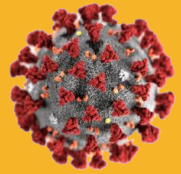
- Immediately separate employees who report with or develop symptoms at work from other employees and arrange for private transport home. These employees should self-isolate and contact their health care provider immediately.
- Close off any areas used for prolonged periods by the sick person.
- Perform [cleaning and disinfection by using products that are on the list of EPA registered products](#) after anyone suspected or confirmed to have COVID-19 has been in the workplace. Cleaning staff should clean and disinfect offices, bathrooms, common areas, and shared electronic equipment used by the ill person, focusing especially on frequently touched surfaces. If other workers do not have access to these areas or items, wait 24 hours (or as long as possible) before cleaning and disinfecting.
- Employees who test positive for COVID-19 should immediately notify their employer of their results.
 - Sick employees should follow the [CDC recommended steps](#) to self-isolate or seek care. Employees should not return to work until they meet the criteria to [discontinue home isolation](#) in consultation with healthcare providers.

Develop hazard controls using [the hierarchy of controls](#) to prevent infection among workers. You may be able to include a combination of controls noted below.

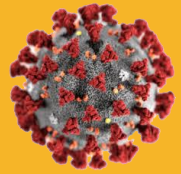
- **Engineering Controls (Isolate people from the hazards)**
 - Alter the workspace using engineering controls to prevent exposure to the virus that causes COVID-19.



- Modify the alignment of workstations where feasible.
 - Move electronic payment terminals/credit card readers farther away from the bus transit operator to increase the distance between the passengers and the bus transit operator
- Where possible, establish physical barriers between the bus transit operators and passengers.
 - Use strip curtains, plastic barriers, or similar materials to create impermeable dividers or partitions.
- Close or limit access to common areas where employees are likely to congregate and interact, such as break rooms, parking lots, and entrance/exit areas.
- Consider making foot-traffic single direction in narrow or confined areas on the bus to encourage single-file movement at a 6-foot distance.
- Use visual cues such as floor decals, colored tape, and signs to remind workers to maintain a distance of at least 6 feet from others, including at their workstation and in break areas.
 - Consider these cues for passengers as well, such as at the bus entry doors.
- Place hand sanitizers with at least 60% alcohol in multiple locations throughout the bus for workers and passengers.
 - Use touch-free stations where possible.
 - Make sure restrooms are well stocked with soap and paper towels.
- Make sure the bus is [well ventilated](#).
 - Bus operator owners and managers should work with facilities management to adjust the ventilation so that the maximum amount of fresh air is delivered to occupied spaces while maintaining the humidity at 40-60%. If possible, increase the filter efficiency of HVAC units to the highest functional level.
 - Portable high-efficiency particulate air (HEPA) filtration units may be considered to remove contaminants from the air of poorly ventilated areas.
 - Consider the use of natural ventilation (i.e., opening windows) to increase outdoor air dilution of indoor air, when environmental conditions allow.
 - Additional considerations for improving the bus ventilation system can be found in the [CDC Interim Guidance for Businesses and Employers](#).
- **Administrative Controls (Change the way people work)**
- Provide training and other administrative policies to prevent the spread of COVID-19.
 - All workers should have a basic understanding of COVID-19, [how the disease is thought to spread](#), what the [symptoms](#) of the disease are, and what measures can be taken to [prevent or minimize](#) the transmission of the virus that causes COVID-19.
 - Training should include the importance of social distancing (maintaining a distance of 6 feet or more when possible), [wearing cloth masks](#) appropriately, [covering coughs and sneezes](#), [washing hands](#), [cleaning and disinfecting frequently touched surfaces](#), not sharing personal items or tools/equipment unless necessary, and not touching their face, mouth, nose, or eyes.



- Workers should be encouraged to go home or stay home if they feel sick. Ensure that sick leave policies are flexible and consistent with public health guidance and that employees are aware of and understand these policies.
- [Clean and disinfect](#) frequently touched surfaces.
 - If surfaces are visibly dirty, clean them using a detergent or soap and water before you disinfect them.
 - Use products that are [EPA-registered](#), [diluted household bleach solutions](#), or alcohol solutions with at least 70% alcohol, appropriate for surface disinfection.
- Use devices that do not require the employee to handle customer credit, debit, or rechargeable ride cards and institute a cashless policy. If this is not possible, ensure that cash and/or cards are handled with care by bus transit operators either by changing gloves between each transaction or using hand sanitizer between passengers.
- Provide employees adequate time and access to soap, clean water, and single-use paper towels for hand-washing.
 - Remind employees to [wash their hands](#) often with soap and water for at least 20 seconds. If soap and water are not available, they should use hand sanitizer with at least 60% alcohol.
 - Provide hand sanitizer, tissues, and no-touch wastebaskets at the cash registers and in the restrooms.
- Maintain social distancing (at least 6 feet) on the bus, including at entry doors.
- Limit the number of people on the bus at one time. (Consult state and local guidance if available.)
- Remind employees that people may be able to [spread](#) the virus that causes COVID-19 even if they do not show symptoms or feel sick. Consider all close interactions (within 6 feet) with employees, passengers, and others as a potential source of exposure.
- Consider using separate doors for entering and exiting the bus (if possible, based on the bus layout) to facilitate single direction foot traffic.
- [Post signs and reminders](#) at entry doors and in strategic places providing instruction on social distancing, changes in processes, hand hygiene, use of cloth masks, and cough and sneeze etiquette. Signs should be accessible for people with disabilities, easy to understand, and may include signs for non-English speakers, as needed.
- Communication and training should be easy to understand, in the preferred language(s) spoken or read by the employees, and include accurate and timely information.
 - Emphasize the use of images (infographics) that account for language differences.
 - Training should be reinforced with signs (preferably infographics), placed in strategic locations. The CDC has free, simple [posters available to download](#) and print, some of which are translated into different languages.
- Strongly encourage the use of cloth face coverings or [masks](#) as appropriate.
 - Cloth face coverings or masks are intended to protect other people — not the wearer — by helping to keep the wearer’s respiratory droplets from reaching others. Because they were not specifically designed and tested to protect the people wearing them, cloth masks are not considered personal protective equipment (PPE).



- Train employees on how to put on and take off cloth [masks](#) to avoid contamination.
- Cloth masks should be [washed](#) after each use.
- The CDC provides information on [adaptations and alternatives](#) that should be considered when cloth masks may not be feasible.
- Employees should consider carrying a spare cloth mask.
- If the cloth mask becomes wet, visibly soiled, or contaminated at work, it should be removed and stored to be laundered later.
- Consider requiring visitors to the workplace (service personnel, passengers) also to wear cloth masks.

- **Personal Protective Equipment (PPE)**

PPE is the last step in the hierarchy of controls because it is more difficult to use effectively than other measures. To be protective and not introduce an additional hazard, the use of PPE requires characterization of the environment, knowledge of the hazard, training, and consistent, correct use. This is why special emphasis is given to administrative and engineering controls when addressing occupational hazards, including when applying the guidance to slow the spread of SARS-CoV-2.

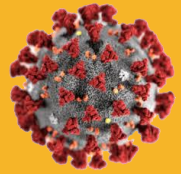
WHAT GUIDANCE AND RIGHTS ARE PROVIDED BY OSHA?

OSHA covers most private sector employers and workers in all 50 states, the District of Columbia, and the other United States (U.S.) jurisdictions – either directly through OSHA or an OSHA-approved State Plan. Federal OSHA does not have a specific standard covering COVID-19. The IBT, along with other unions, has petitioned^{ix} OSHA for an emergency temporary standard for infectious diseases, including COVID-19. OSHA provides *'Guidance on Preparing Workplaces for COVID-19'*^x to help employers and workers identify risk levels in workplaces and to determine appropriate control measures to implement.

Twenty-two states or territories have OSHA-approved State Plans that cover both private and state and local government workers^{xi}. Among these, California OSHA, Virginia OSHA, and Oregon OSHA are the only states that have currently developed regulations for COVID-19 though others may do so as well. Unlike states covered by federal OSHA, the regulations in these states would cover public employees as well as private-sector employees.

Employers should establish comprehensive infection control strategies plans – in consultation with workers – to identify potential exposure routes, establish controls to mitigate risk and implement training procedures. This should be done based on a thorough hazard assessment and 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:

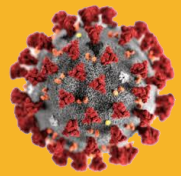
- Protocols to clean and disinfect frequently touched objects and surfaces.
- Training and education.
- **Safe work practices** are types of administrative controls that include procedures for safe and proper work used to reduce the duration, frequency, or intensity of exposure to a hazard, such as:
 - Emphasis on personal hygiene practices, hand-washing, and respiratory etiquette.
- **Personal protective equipment (PPE)** includes cloth masks, gloves, goggles, face shields, and respiratory protection when appropriate.

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.^{xii} Among the most relevant are:

- **OSHA's Personal Protective Equipment (PPE) standards^{xiii}** (in the general industry) require using respiratory protection, eye and face protection, and gloves.
- **OSHA's Hazard Communication standard^{xiv}** (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.
- **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^{xv}** 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^{xvii}** 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.

IS THERE ANY PROTECTION 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 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 available funds intended for public transportation safety or security.
- **Refused** to violate or assist in violating 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.

WHAT ARE SOME WORKER-FRIENDLY EMPLOYMENT POLICIES?

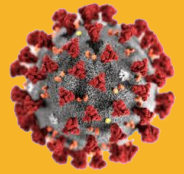
As a union, the rights and benefits we have fought for can help to prevent disease and help people who do become ill, including:

- Adequate, non-punitive sick leave policies that encourage sick workers to stay at home without losing 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: <https://teamster.org/covid-19/>; <https://teamstersafety.org/covid-19/>
- ❖ CDC COVID19: www.cdc.gov/coronavirus/2019-ncov/
- ❖ CDC 'Scientific Brief: SARS-CoV-2 and Potential Airborne Transmission'
<https://www.cdc.gov/coronavirus/2019-ncov/more/scientific-brief-sars-cov-2.html>
- ❖ CDC COVID-19 What Bus Transit Operators Need to Know about COVID-19
- ❖ <https://www.cdc.gov/coronavirus/2019-ncov/community/organizations/bus-transit-employees.html>
- ❖ CDC COVID-19 Employer Information for Bus Transit Operators
<https://www.cdc.gov/coronavirus/2019-ncov/community/organizations/bus-transit-operator.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>
- ❖ OSHA COVID19: www.osha.gov/SLTC/covid-19/controlprevention.html
- ❖ OSHA 'Guidance on Returning to Work': <https://www.osha.gov/Publications/OSHA4045.pdf>
- ❖ 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>
- ❖ OSHA Whistleblower Protection for Public Transportation Agency
<https://www.osha.gov/Publications/OSHA-factsheet-whistleblower-trans-agencies.pdf>
- ❖ NIOSH Workplace Safety and Health Topic: www.cdc.gov/niosh/emres/2019_ncov.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>

ⁱ <https://www.cdc.gov/coronavirus/2019-ncov/more/scientific-brief-sars-cov-2.html>

ⁱⁱ SARS-CoV-2

ⁱⁱⁱ <https://www.cdc.gov/coronavirus/2019-ncov/symptoms-testing/symptoms.html>

^{iv} <https://www.cdc.gov/coronavirus/2019-ncov/hcp/planning-scenarios.html>

^v <https://www.cdc.gov/coronavirus/2019-ncov/symptoms-testing/symptoms.html>

^{vi} <https://www.fda.gov/emergency-preparedness-and-response/coronavirus-disease-2019-covid-19/covid-19-frequently-asked-questions>

^{vii} <https://www.cdc.gov/coronavirus/2019-ncov/community/organizations/bus-transit-employees.html>

^{viii} <https://www.cdc.gov/coronavirus/2019-ncov/community/organizations/bus-transit-operator.html>

^{ix} <https://www.hpae.org/wp-content/uploads/2016/07/WPV-petition.final-doc.12July16-1.pdf>

^x <https://www.osha.gov/Publications/OSHA3990.pdf>

^{xi} <https://www.osha.gov/stateplans/faqs>

^{xii} <https://www.osha.gov/SLTC/covid-19/standards.html>

^{xiii} https://www.osha.gov/laws-regs/regulations/standardnumber/1910#1910_Subpart_I

^{xiv} <https://www.osha.gov/laws-regs/regulations/standardnumber/1910/1910.1200>

^{xvi} <https://www.osha.gov/laws-regs/regulations/standardnumber/1910/1910.1030>

^{xvii} <https://www.osha.gov/SLTC/covid-19/standards.html>