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Centers for Disease Control and Prevention Search Coronavirus Disease 2019 (COVID-19) **/EAR A MASK.** PROTECT Community, Work & School 🗸 Healthcare Workers & Labs 🗸 Health Depts 🖌 Cases & Data 🗸 Your Health ∨ **†** Community, Work & **COMMUNITY, WORK & SCHOOL** COVID-19 Employer Information for Transit Health Equity +Maintenance Workers **Community Mitigation** Updated Oct. 30, 2020 Framework Languages -Print Cleaning & Disinfecting Coronavirus disease 2019 (COVID-19) is a respiratory More Info for Transit illness (see list of symptoms) caused by a virus called Businesses & Workplaces + SARS-CoV-2. Here's what we currently know: Maintenance Worker Safety & • The main way the virus <u>spreads</u> is from person to **Employees and Staff** person through respiratory droplets when people cough, sneeze or talk. Critical Infrastructure • You may also be able to get COVID-19 by touching a Sector Response Planning surface or object that has the virus on it, and then touching your face, mouth, nose, or eyes. Testing in High-Density • The virus may be spread by people who do not have **Critical Infrastructure** Workplaces symptoms. Critical Workers COVID-19 can sometimes cause serious health problems. People at increased risk for severe illness include: Coping with Stress for Workers • Older adults • People of any age who have certain underlying medical conditions Limit Workplace Violence Associated with COVID-19 As a transit maintenance employer, your workforce might come into contact with the virus when Managing Workplace • In <u>close contact</u> (within about 6 feet) with other people at the worksite, which can include passengers, coworkers, transit station workers, and transit operators. **Employer Information** • Touching or handling high-contact surfaces and equipment, and then touching their face, for Transit mouth, nose, or eyes. **Maintenance Workers** Schools & Child Care +How You Can Protect Your Staff and Others and Slow the Spread Colleges & Universities +

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 <u>hierarchy of controls</u> 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.

While protecting workers, it is important to note that control recommendations or interventions to reduce risk of spreading COVID-19 must be compatible with any safety programs and personal protective equipment (PPE) normally required for the job task. Approaches to consider may include the following:

Create a COVID-19 Workplace Health and Safety Plan

Review the <u>CDC Interim Guidance for Businesses and Employers</u> and the <u>Resuming Business</u> Toolkit 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: utility,

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- relief, janitorial, and supervisory staff.
- Develop plans to communicate with contractors or vendors entering the transit vehicle 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.
 - <u>Screening options</u> could include having employees self-screen prior to arriving at work or having on-site screening by taking employees' temperatures and assessing other potential <u>symptoms</u> prior to beginning work. (see <u>CDC Interim Guidance for Businesses</u> 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 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 of time by the sick person.
- Perform <u>cleaning and disinfection</u> 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 <u>CDC recommended steps</u> 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.
 - Close or limit access to common areas where employees are likely to congregate and interact, such as break rooms, parking lots, and in entrance/exit areas.
 - Consider making foot-traffic single direction in narrow or confined areas in the transit vehicle 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 distance of at least 6 feet from others, including at their workstation and in break areas.
 - Place hand sanitizers with at least 60% alcohol in multiple locations throughout the transit vehicle for workers and passengers.
 - Use touch-free stations where possible.
 - Make sure restrooms have accessible sinks, soap, water, and a way for people to dry their hands (e.g., paper towels, hand dryer).
 - Make sure the workspace is <u>well ventilated</u> $\mathbf{\mathbb{Z}}$.
 - If the facility has special ventilation [such as portable ventilation units] they should be used.
 - Transit maintenance 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 filter efficiency of HVAC units to highest functional level.
 - Portable high efficiency particulate air (HEPA) filtration units may be considered to remove contaminants in the air of poorly ventilated areas.
 - Additional considerations for improving the building 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.
- Trainings should include the importance of social distancing (maintaining a distance of 6 feet or more when possible), masks appropriately, covering coughs and sneezes, washing hands, cleaning and disinfecting frequently touched surfaces, not sharing personal items or tools/equipment unless absolutely 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.
- Consider maintaining small groups of workers in teams (cohorting) to reduce the number of coworkers each person is exposed to.
 - 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.
 - Give employees enough time to wash and dry their hands, and provide accessible sinks, soap, water, and a way to dry their hands (e.g., paper towels, hand dryer).
 - 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 waste baskets at the cash registers and in the restrooms.
 - Maintain social distancing (at least 6 feet) in the transit vehicle, including at entry doors.
 - Limit the number of people in the transit vehicle at one time, especially during maintenance. (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.
 - Post_signs_and_reminders at entry doors and in strategic places providing instruction on social distancing, hand hygiene, use of cloth face coverings or 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 preferred language(s) spoken or read by the employees and include accurate and timely information.
 - Emphasize use of images (infographics) that account for language differences.
 - Training should be reinforced with signs (preferably infographics), placed in strategic locations. 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 face coverings or masks are not considered personal protective equipment (PPE).
 - Train employees how to put on and take off cloth face coverings or masks to avoid contamination.
 - Cloth face coverings or masks should be <u>washed</u> after each use. If the cloth face covering or mask becomes wet, visibly soiled, or contaminated at work, it should be removed and stored to be laundered later.
 - Employees should consider carrying a spare cloth face covering or mask.
 - Cloth face coverings or masks should not be worn if their use creates a new risk (i.e. interference with driving or vision, or contributions to heat-related illness) that exceeds their COVID-19 related benefits of slowing the spread of the virus. Cloth face coverings or masks should also not be worn by anyone who has trouble breathing or is unable to remove the covering or mask without assistance. CDC provides information on adaptations and alternatives that should be considered when cloth face coverings or masks may not be feasible.
 - Consider requiring visitors to the workplace (other service personnel, passengers) to also wear cloth face coverings or masks.

Personal Protective Equipment (PPE)

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 guidance to slow the spread of SARS-CoV-2.

In the current COVID-19 pandemic, use of PPE such as surgical masks or N95 respirators is being prioritized for healthcare workers and other medical first responders, as recommended by current <u>CDC guidance</u>, unless they were required for the job before the pandemic.

How You Can Help Your Staff and Others Cope with Stress

Mental health is an important component of worker safety and health. The COVID-19 pandemic has created new challenges in the ways many people work and interact with others, which may lead to increased feelings of stress, anxiety, and depression.

Information and resources about mental health, recognizing signs of stress, taking steps to build resilience and manage stress, and knowing where to go if you, your staff, or others need help are available here.

How to Get More Information

You, as the employer, are responsible for responding to COVID-19 concerns and informing employees of the hazards in your workplace. You can utilize these additional sources for more information on reducing the risk of exposures to COVID-19 at work:

- CDC Interim Guidance for Businesses and Employers to Plan and Respond to Coronavirus Disease 2019 (COVID-19)
- <u>CDC Cleaning and Disinfecting Your Facility</u>
- CDC Reopening Guidance for Cleaning and Disinfecting Public Spaces, Workplaces, Businesses, Schools, and Homes
- NIOSH Workplace Safety and Health Topic: COVID-19
- <u>CDC COVID-19</u>

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- OSHA COVID-19
- OSHA Guidelines on Preparing Workplaces for COVID 🔼 [
- **General Business Frequently Asked Questions**
- CDCINFO: 1-800-CDC-INFO (1-800-232-4636) | TTY: 1-888-232-6348 | CDC INFO website
- For passenger-related questions, please refer to the Interim Guidance for Mass Transit Administrators.

Content source: National Center for Immunization and Respiratory Diseases (NCIRD), Division of Viral Diseases

English

Last Updated Oct. 30, 2020

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