Guidelines to Protect Worker Health Related to Novel Coronavirus (COVID-19) in the Organized Sheet Metal Industry for Members in Commercial and Residential HVAC; Architectural; Service and Refrigeration; Industrial Welding; Roofing; TAB; Sign Industry; and Transportation

Presented by the Sheet Metal Occupational Health Institute Trust (SMOHIT)
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About SMOHIT
The Sheet Metal Occupational Health Institute Trust (SMOHIT) was founded in 1986 as a joint labor and management trust to address the impact of decades-long asbestos exposure to those working in the sheet metal industry.

Today, SMOHIT’s expanded, evolving mission is to “develop, provide and promote health and safety resources, creating a healthier, injury-free workforce and resulting in a safer and more productive workplace.” It accomplishes this by operating on three separate but related tracks:

- Monitoring and documenting the health of sheet metal workers as it relates to workplace exposures and hazards
- Providing up-to-date and easy-to-understand safety information and training associated with best safety practices on and off the job
- Serving as an aggressive advocate for the health and safety of its members within the industry, in government and through like-minded, allied organizations

SMOHIT serves more than 216,000 members of the International Association of Sheet Metal, Air, Rail and Transportation Workers (SMART) and 4,500 contributing members of the Sheet Metal and Air Conditioning Contractors’ National Association (SMACNA).

SMOHIT’s Mission and COVID-19
SMOHIT’s mission is to recognize and address health and safety issues directly related to new threats such as COVID-19. Please review this manual for the most current information on protecting your health, as well as the health of your coworkers and family, while working in the sheet metal industry.

Overview
Coronavirus is a large family of viruses found in humans and animals. According to the World Health Organization (WHO), a novel (new) pneumonia of unknown cause was first detected in Wuhan, China, in December 2019. The outbreak was declared a Public Health Emergency of International Concern on Jan. 30, 2020. On Feb. 11, WHO announced a name for the new coronavirus disease: COVID-19. Because this virus can be easily spread between humans, WHO has qualified it as a “pandemic,” meaning a disease epidemic that has spread across a large region or worldwide.

Watch for Symptoms
COVID-19 symptoms are like those of influenza (examples include fever, cough and shortness of breath), and the current outbreak is occurring during a season when respiratory illnesses from influenza and other viruses exist. Symptoms may appear in as few as two days or as long as 14 days after initial exposure. According to the Centers for Disease Control (CDC), people who are most at risk for severe symptoms and possible hospitalization are either people over age 65 with weakened immune systems due to age, or those who have underlying chronic diseases such as COPD and hypertension.

Reported illnesses have ranged from mild symptoms to severe illness and death for confirmed coronavirus disease cases.
Emergency warning signs include:
• Trouble breathing
• Persistent pain or pressure in the chest
• New confusion or inability to wake
• Bluish lips or face

This list is not all inclusive. Please consult your medical provider for any other symptoms that are severe or concerning.

If you develop emergency warning signs for COVID-19, immediately seek medical attention.

**Paths of Transmission**
The CDC says the virus is thought to spread mainly from person to person, between people who are in close contact with one another (within about 6 feet), through respiratory droplets produced when an infected person coughs or sneezes. These droplets can land in the mouths or noses of people who are nearby or possibly be inhaled into the lungs.

It may be possible for a person to get COVID-19 by touching a surface or object with the virus on it and then touching their own mouth, nose, or possibly their eyes, but this is not thought to be the primary way the virus spreads.

How easily a virus spreads from person to person can vary. Some viruses are highly contagious (spread easily), like measles, while other viruses do not spread as easily. Another factor is whether the spread is sustained, spreading continually without stopping.

According to the CDC, the COVID-19 virus has not been detected in drinking water.

The virus that causes COVID-19 seems to be spreading easily and sustainably in the community (“community spread”) in some affected geographic areas.

Different parts of the United States are seeing different levels of COVID-19 activity; however, it is in the initiation phase of the pandemic. States in which community spread is occurring are in the acceleration phase. The duration and severity of each pandemic phase can vary depending on the characteristics of the virus and the public health response.

• The CDC, as well as state and local public health laboratories, are testing for the virus that causes COVID-19. View [CDC’s Public Health Laboratory Testing map](https://www.cdc.gov/coronavirus/2019-ncov/lab-testing-laboratories.html).
• All 50 states have reported cases of COVID-19 to the CDC.
• U.S. COVID-19 cases include:
  » Imported cases in travelers
  » Cases among close contacts of a known case
  » Community-acquired cases where the source of the infection is unknown
• View [latest case counts, deaths](https://covidtracking.com)
The SMART Response
SMART takes all threats to members and the general public seriously and stands ready to assist communities when dealing with the coronavirus outbreak.

SMART members, including those working on job sites and production shops; bus and transit operators; and those who work on the freight railroads, interact with the public on a daily basis and are at a heightened risk of contracting communicable diseases.
This requires that each member be vigilant, be prepared and come together.

There has been a major escalation in the actions state and local governments are taking to slow down the spread of the virus. Many states are closing schools, shutting down bars and restaurants, and mandating that people “shelter in place.”

In addition, there has been a shift in the government’s position/statements about how the virus is spread. At a White House briefing, Dr. Deborah Birx stated affirmatively transmission of the virus can happen before individuals exhibit symptoms, raising great concern the virus spreads before people feel sick. Unions are reporting there are problems with the availability of personal protective equipment (PPE) to healthcare workers, and states report they are having difficulty getting timely access to respirator supplies from the national stockpile and manufacturers.

According to the Center for Construction Research and Training (CPWR), essential safety measures include: (1) Keep at least 6 feet between workers by staggering crews to make sure there is no droplet spread on jobs; (2) Provide soap and running water so workers can frequently wash hands; and (3) Clean and disinfect high touch areas like handrails, doorknobs, and portable toilets on a frequent and regular basis. Lastly, construction workers are now entitled to paid sick leave. It is strongly encouraged that workers use this safeguard should they feel ill.

NABTU (North America’s Building Trades Unions) President Sean McGarvey stated, “Together, with responsible owners and contractors, we can provide a vital lifeline to our economy and our members to secure their place in the middle class, especially at a moment of great economic fear and uncertainty.”

Slowing the Spread
The CDC recommends workers perform the following preventive/protective actions, generally and while at work:

- Wash hands frequently with soap and water for at least 20 seconds immediately after working on any vent system.
- Avoid touching face, mouth, eyes, nose, or open sores and cuts while working on a vent system.
- After working on a vent system, wash hands with soap and water for at least 20 seconds before eating or drinking.
- After working on a vent system, wash hands with soap and water for at least 20 seconds before and after using the toilet.
- Before eating, remove soiled work clothes and eat in designated areas.
- Do NOT smoke or chew tobacco or gum while working on a vent system.
- Keep open sores, cuts and wounds covered with clean, dry bandages.
- Use waterproof gloves to prevent cuts and abrasions.
- Wear rubber boots.
- Remove rubber boots and work clothes before leaving worksite.
- Clean contaminated work clothing daily with 0.05% chlorine solution (1 part household bleach to 100 parts water).
- Clean and disinfect tools and equipment used.
- Clean and disinfect the work area frequently.
- Cover your cough and/or sneeze into your bent elbow.
- Do not report to work if you feel ill.
- Report and document all exposures.
• If you start to feel ill, inform your supervisor immediately and document it.
• Currently there is not a vaccination for COVID-19, but it is recommended that all other vaccinations be current.
• Finally, it is important to follow social distancing recommendations. Try to keep a minimum 6-foot distance between others. Remember, it could take anywhere from two to 14 days for COVID-19 symptoms to appear, if they even appear at all.

If you believe you have contracted the virus, stay home, contact your supervisor and seek assistance from your medical provider.

Sheet Metal Industry Funds Guidance on COVID-19

In response to the construction industry’s questions regarding the COVID-19 outbreak, the following are steps everyone should be taking now:

• Don’t go to work if you are feeling sick.
• Don’t shake hands when greeting others.
• Avoid large gatherings or meetings.
• Try to stay six feet away from others on job sites and in gatherings, meetings, and training sessions.
• Cover your mouth and nose with tissues if you cough or sneeze or do so into your elbow.
• Avoid contact with sick people.
• Avoid touching your eyes, nose, or mouth with unwashed hands.
• Clean your hands often by washing them with soap and water for at least 20 seconds or using an alcohol-based hand sanitizer that contains 60%–95% alcohol. Soap and water should be used if hands are visibly dirty.
• It is especially important to clean hands after going to the bathroom, before eating, and after coughing, sneezing, or blowing your nose.

Construction industry employers should also:

• Create at least 6 feet of space between workers by staging/staggering crews to prevent droplet spread.
• Plan for office staff to have the ability to work from home.
• Provide soap and running water on all jobsites for frequent handwashing. If that is impossible, provide hand sanitizer.
• Provide access to potable and sanitary water.
• Clean and disinfect high-touch surfaces on job sites and in offices—such as hand rails, door knobs, and portable toilets—frequently, per CDC guidelines.
• Conduct daily surveys of changes to staff/labor health conditions. Many leaders in the construction industry have implemented entry surveys of labor health conditions that have included temperature scans and in-person Q & A.
• Ensure that any identified first responders in the labor force are provided and use the needed Personal Protective Equipment (PPE) for protection from communicable or infectious disease.
• If you work in healthcare facilities, train your workers in Infection Control Risk Assessment (ICRA).

Special guidance for older Americans and people with underlying health conditions:

• Older adults and those with underlying health conditions like heart disease, diabetes, and lung disease are more at risk of becoming very sick from COVID-19. CDC has additional recommendations for these individuals here: HERE
Additional links from our government and private partners:

From CPWR: HERE
From OSHA: HERE
From NIOSH: HERE
From CDC: HERE
From CDC for Employers about getting their businesses ready: HERE

OSHA Standards

OSHA record keeping 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. However, employers are only responsible for recording cases of COVID-19 if all of the following are met:

1. The case is a confirmed case of COVID-19 (see CDC information on persons under investigation and presumptive positive and laboratory-confirmed cases of COVID-19);
2. The case is work-related, as defined by 29 CFR 1904.5; and
3. The case involves one or more of the general recording criteria set forth in 29 CFR 1904.7 (e.g. medical treatment beyond first-aid, days away from work).

Visit OSHA’s Injury and Illness Recordkeeping and Reporting Requirements page for more information.

This section highlights OSHA standards and directives (instructions for compliance officers) and other related information that may apply to worker exposure to novel coronavirus, COVID-19.

There is no specific OSHA standard covering COVID-19. However, some OSHA requirements may apply to preventing occupational exposure to COVID-19. Among the most relevant are:

• OSHA’s PPE standards (in general industry, 29 CFR 1910 Subpart I), which require using gloves, eye and face protection, and respiratory protection.
  » When respirators are necessary to protect workers, employers must implement a comprehensive respiratory protection program in accordance with the Respiratory Protection Standard (29 CFR 1910.134).
  • OSHA has issued temporary guidance related to enforcement of respirator annual fit-testing requirements for healthcare.
• The General Duty Clause, Section 5(a)(1) of the Occupational Safety and Health (OSH) Act of 1970, 29 USC 654(a)(1), requires employers to furnish to each worker “employment and a place of employment, which are free from recognized hazards that are causing or are likely to cause death or serious physical harm.”

OSHA’s Bloodborne Pathogens Standard (29 CFR 1910.1030) 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.

Important Note Related to Healthcare Facilities: If working in a healthcare facility, the Infectious Control Risk Assessment (ICRA) program for the facility must be followed regarding anterooms, wearing and removal of PPE, and cleaning of tools.
Personal Protective Equipment (PPE) for Working Near Plumbing Vents and Rooftop HVAC Equipment, Specifically Exhaust Fans

Members working near plumbing vents and rooftop HVAC equipment, specifically exhaust fans, should be provided proper personal protective equipment (PPE), training on how to properly use the PPE, and hand washing facilities. Workers should wash hands, arms and face (in that order) with soap and water for at least 20 seconds immediately after removing PPE.

The following PPE is recommended for HVAC workers working near plumbing vents and rooftop HVAC equipment, specifically exhaust fans:

- **Safety glasses with face shield** – To protect eyes and mouth from aerosol transmission of the virus
- **Respiratory protection** – Wear a NIOSH-approved N95 face mask or half-face respirator with HEPA filters to protect from inhalation of aerosol transmission.
- **Protective suits/coveralls** (such as Tyvek) – To protect against aerosol transmission
- **Cut resistant outer gloves** – To protect from cuts and tears to inner glove
- **Nitrile inner gloves** (6 mil thickness or greater) – To prevent exposure to liquids and when removing PPE and cleaning tools
- **Disposable booties** – To prevent potential contamination of work boots

**Important Note Related to Electrical Safety for COVID-19 Only:** When working on energized electrical conductors or circuit parts, members must assure they are protected first from arc flash and electrical shock hazards by complying with NFPA 70E - 2018. Use all compatible protective measures against COVID-19, such as wearing an N95 face mask/respirator under the arc flash face shield and following through on the hygiene practices described in these guidelines. Once trouble shooting is completed, shut off the power, lock it out, test it dead, remove the arc flash and electrical shock PPE, and don the appropriate PPE for protection against COVID-19 described in these guidelines before completing the work.

**Procedures for Tool Cleaning**

Good work area and tool cleaning practices are also extremely important:

- Avoid sharing of tools with coworkers to the greatest extent possible.
- When choosing cleaning chemicals, look for cleaning agents effective against viral pathogens.
- If such cleaning agents are not available, use soap and water and dry tools thoroughly after use.
- Workers may also use a bleach solution by diluting 1 part household bleach with 10 parts water. Spray onto surfaces or soak items in solution.
- Use the EPA’s (www.epa.gov) List N: Disinfectants for Use Against SARS-CoV-2

**Transportation Division**

For those Transportation Division members who are eligible for benefits under the nationally negotiated health and welfare plans (the Railroad Employees’ National H & W Plan or the NRC/UTU H & W Plan), visit the following link to see the expanded benefit resources available: [https://www.ythth.com/NewsPage.aspx?MenuId=366](https://www.ythth.com/NewsPage.aspx?MenuId=366)

**Visit the SMOHIT Website for Additional Resources**

For those who are feeling stressed or anxious, United Healthcare/Optum’s zero-cost emotional support help line is available to all Transportation Division members:

**Behavioral Health/Optum Help Line:** 1-866-342-6892 (toll free) 24 hours a day, 7 days a week.
The emotional support help line provides access to specially trained mental health specialists to assist with managing stress and anxiety in order to continue to address everyday needs. It is available 24/7 and open to members, their families and anyone else for as long as necessary. Callers may also receive referrals to community resources to help them with specific concerns including financial and legal matters. Online resources are also available for crisis support and coping at Liveandworkwell.com (use access code “Railroad”).

- CPWR Guidance on COVID-19 - Click to View
- Coronavirus.gov - Click to Access
- SMART COVID-19 Resources for Union Members - Click to Access
- 6 Ways the Coronavirus Outbreak will Affect Construction - Click to Access
- Osterholm interview CBS News This Morning - Click to View
- Osterholm interview KARE 11 - Click to View
- Coronavirus Disease (COVID-19) - Government of Canada - Click to Access
- Encourage your employees to keep the workplace safe. - Click to Access
- Wellness Resources for all SMART Members - Click to View

COVID-19 Update for Unions
NABTU President Sean McGarvey Full Statement on Protecting Construction Workers’ Health, Safety and Jobs in Partnership with Responsible Owners and Contractors: Click here to read statement

CPWR Guidance on COVID-19
Click here to read

SMOHIT Helpline
SMOHIT provides a 24/7 Helpline for all members and their families free of charge. The voice on the other end is Daria Todor, a licensed social worker and addictions counselor, who worked as an employee assistance program counselor with Washington, D.C.-area airline employees following Sept. 11.

Calls to the Helpline — 877-884-6227 — are kept professional and strictly confidential.

Examples of problems people call about:
- Grief, trauma and loss
- Alcohol and other drug issues
- Depression and suicidal thoughts, PTSD
- Anxiety, fears
- Family: relationship with spouse/partner/family of origin issues, parenting concerns, aging parents/caregiving fatigue
- Work Issues: coping with difficult people/bosses; work stress/deciding when to retire
- Stress related to debt

SMOHIT hopes members will take advantage of this vital resource.