

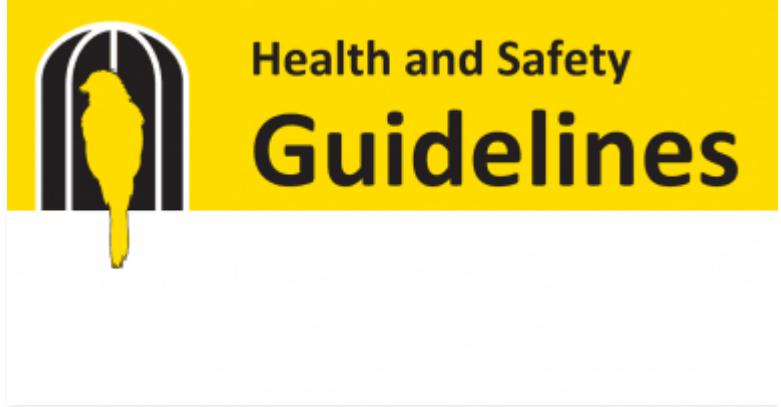
# General occupational guidelines for COVID-19

Mar 18, 2020

## SECTION 1: PURPOSE OF GUIDE

The purpose of this guide is to provide CUPE members with a singular source of up-to-date information related to COVID-19 and occupational health and safety.

This content will be maintained online and updated as needed.



The guide covers:

- What is COVID-19 (Novel coronavirus)
- General protections from COVID-19
- Occupational safety
- Sanitizing
- Respiratory protection
- Isolation and quarantine measure
- Role of the Union, Joint Occupational Health and Safety Committees and Health and Safety Representatives
- Lost wages
- Discrimination

## SECTION 2: WHAT IS COVID-19 (NOVEL CORONAVIRUS)?

COVID-19 is a new illness that has infected thousands of people across the globe. COVID-19 is caused by a virus from the same family as the SARS (severe acute respiratory

syndrome) coronavirus. Though serious, indications are that it is probably not as deadly as SARS.

**According to Health Canada**, coronaviruses (CoV) are a large family of viruses that can cause illness ranging from the common cold to more severe diseases. Though it has been determined that the virus can spread from person to person, how exactly the virus is transmitted remains unclear.

Symptoms for COVID-19 are similar to those for influenza or other respiratory illnesses. They can range from mild to severe and include:

- Fever
- Cough
- Difficulty breathing

The American Centers for Disease Control and Prevention identifies four main types of CoV in which infections are quite common, usually leading to common cold symptoms. However, there are the rare types of CoV such as SARS and MERS (Middle East respiratory syndrome) that can be far more serious and can lead to pneumonia, respiratory failure, kidney failure, or even death.

Human coronaviruses cause infections of the nose, throat and lungs. They are most commonly spread from an infected person through:

- The air by coughing and sneezing
- Close personal contact such as touching or shaking hands
- Touching something with the virus on it, then touching your mouth, nose or eyes before washing your hands

### **SECTION 3: GENERAL PROTECTION FROM COVID-19**

Regardless of where you work, common practices still hold to help reduce the likelihood of becoming infected by any viral infection:

- Wash your hands often with soap and water for at least 20 seconds
- Avoid touching your eyes, nose, or mouth with unwashed hands

- Avoid close contact with people who are sick

According to Health Canada, if you have cold-like symptoms, you can help protect others by doing the following:

- Stay home while sick
- Avoid close contact with others
- Cover your mouth and nose with a tissue when you cough or sneeze, then throw the tissue in the trash and wash your hands
- Clean and disinfect objects and surfaces

## **SECTION 4: OCCUPATIONAL SAFETY**

Workers in some sectors (for example, health care and transportation) have a greater likelihood of exposure to viruses and other disease-causing agents. Employers have a general duty to take every precaution reasonable in the circumstances to protect workers from hazards in their workplaces. Employers in these sectors should already have effective plans in place for regular day-to-day interactions.

When new viruses are identified, employers should follow an appropriate hazard-assessment methodology, that looks at the virus and considers if existing controls are appropriate. Assessment should always be in consultation with health and safety committees or worker representatives. The goal of prevention plans must be to eliminate exposure to the infectious virus as much as possible. The selection of controls should be guided by a hierarchy of controls and include both engineering and administrative controls.

CUPE is calling on all workplaces to be proactive in preventing the spread of COVID-19, by implementing the following practices :

- Encourage sick workers to stay home with pay under the terms of a collective agreement or a supplementary arrangement to deal with this new issue with no negative affect for “attendance management” purposes.
- Ensure that your sick leave policies are flexible and consistent with public health guidance, and that employees are aware of these policies.

- If you do not have collective agreement provisions dealing with quarantine, negotiate paid time off now as a supplement to your existing provisions.
- Allow workers to work from home if possible.
- Do not require a healthcare provider's note for employees who are sick with respiratory illness or flu.
- Adopt flexible policies that permit employees to stay home with pay to care for a sick family member.
- Send home workers who are exhibiting flu like symptoms with pay.
- Emphasize respiratory etiquette and hand hygiene for all employees.
- Posters that encourage staying home when sick, promote cough and sneeze etiquette, and hand hygiene, should be placed at the entrance to your workplace, and in other workplace areas where they are likely to be seen.
- Provide tissues and no-touch disposal receptacles for use by employees.
- Provide soap and water and alcohol-based hand rubs in the workplace, particularly at entrances.
- Ensure that adequate supplies are maintained. Place in multiple locations or in conference rooms to encourage hand hygiene.
- Perform environmental cleaning:
  - Routinely clean all frequently touched surfaces in the workplace, such as workstations, countertops, water fountains, sinks, elevator buttons, phones and doorknobs. Use cleaning agents that kill viruses, such as those listed below in section 5.
  - Provide disposable wipes so that commonly used surfaces (for example, doorknobs, keyboards, remote controls, desks) can be wiped down by employees before and after each use.

If an employee is confirmed to have COVID-19, employers should inform fellow employees of their possible exposure to COVID-19, without disclosing the names or details of the infected worker, so that they may contact public health authorities.

**For specific occupational advice, please see:**

**Health care guide from CUPE Ontario**

- English
- French

## Flight Attendants

- English
- French

## SECTION 5: SANITIZING

**According to Health Canada :** "Based on the currently available scientific evidence, chemical disinfectants that are effective against enveloped viruses are suitable for decontamination of SARS-CoV-2 (i.e., when they are used according to manufacturer's recommendations). Such effective disinfectants include sodium hypochlorite (bleach), 70% ethanol, 0.5% hydrogen peroxide, quaternary ammonium compounds, and phenolic compounds. It is possible that other biocidal agents may be less effective (e.g., 0.05-0.2% benzalkonium chloride, 0.02% chlorhexidine digluconate)."

## SECTION 6: RESPIRATORY PROTECTION

### Facemasks

Facemasks are not respirators. A facemask is a loose-fitting, disposable device that creates a physical barrier between the mouth and the nose of the person wearing the mask and potential contaminants in the immediate environment. There are several common types, most notably dust masks and surgical masks.

When worn properly, a facemask is only meant to help block large-particle dust or droplets (splashes, sprays or splatter) from reaching your mouth and nose. Facemasks are also beneficial, because they help reduce other people's exposure to saliva and respiratory secretions from the person wearing the mask.

However, it must be clearly understood that by design, facemasks will not filter or block small particles in the air that may be transmitted by coughs, sneezes or certain medical procedures. Facemasks do not provide complete protection from viruses or bacteria and

other airborne contaminants, because of the loose fit between the surface of the facemask and your face.

Finally, facemasks are meant to be disposable, and are not intended to be used more than once. If a mask is damaged or soiled, or if breathing through the mask becomes difficult, it should be removed and discarded safely according to required procedures and replaced with a new one.

## **Respirators**

The two main types of respirators are supplied-air respirators and air-purifying respirators. The selection of the type of respiratory protection required will depend on the hazards present in the work environment.

### **Supplied-air respirators**

Supplied-air respirators feed fresh air from a tank or tube to the worker. In relation to infection control, these types of respirators are most appropriate for some medical situations and would rarely be used by most workers.

### **Air-purifying respirators**

Probably the most familiar type of respirators are particulate filters. These filters work by passively filtering out harmful particles as air passes through a filtering material. They come in several styles:

- Quarter-mask (covering the nose and mouth)
- Half-face mask (covering from the nose to below the chin), and
- Full-face piece (covering from above the eyes to below the chin)

### **Fit-testing for respirators**

A respirator will not protect a worker if it does not fit properly. All respirators that are designed to fit snugly to the face (known as "tight fitting") must be properly fit-tested to each individual worker, to ensure the correct size. A "fit test" is a procedure that physically tests the seal between the respirator's face piece and a worker's face. It must be performed using the same size and model of respirator the worker will actually be using on the job.

Fit-testing should be performed every year to ensure that people's facial structure has not changed as a result of significant weight change.

There are two basic methods of fit-testing: qualitative and quantitative.

**Qualitative** fit-testing is probably the most common of the two methods and is frequently used for half-mask respirators. It is a pass/fail test method that uses a worker's sense of taste or smell, or reaction to an irritant, to detect leakage around the respirator. Whether the respirator passes or fails the test is based simply on the worker detecting leakage of the test substance into their respirator.

**Quantitative** fit-testing uses a machine that creates pressure to measure the actual amount of leakage into the respirator and is not dependent on the worker's reaction. During the testing, the respirators are fitted with a probe attached to the respirator that are connected to the machine by a hose. This testing can be used for any style of tight-fitting respirator.

**Note:** To ensure a tight fit, workers must be clean shaven, as even a couple days of facial hair growth can compromise the seal.

Finally, fit-testing determines that workers are medically able to wear a tight-fitting respirator. Alternative respiratory protection is available for workers who need accommodations for a non-tight fit model (hood or helmet).

## SECTION 7: ISOLATION AND QUARANTINE MEASURE

There are different terms being used by health authorities, government, physicians and the media. These include the following:

- **Social distancing** refers to formal and informal methods of preventing groups of people from congregating, for example in public spaces such as sporting events, conferences, concerts, etc.
- **Isolation** means separating those with possible or confirmed infections from other people. This may also refer to self-isolation. Self-isolation means that a person should restrict outside activities except for obtaining urgent medical care. This

means not going to work, school, public spaces, social activities, sporting activities, etc.

- **Quarantine** is restricting the movement of, or isolating people who may have been exposed to SARS-CoV-2, were exposed to SARS-CoV-2, or are infected with SARS-CoV-2, with or without symptoms (COVID-19). Quarantines are not voluntary and are usually imposed by municipal or provincial health authorities. Where quarantines have occurred, they have usually been for a period of 14 days. There have been a few exceptions.

#### **Quarantine preparation:**

Various levels of government have recommended that the public take general precautions and to prepare for COVID-19. People who are concerned can take the following steps:

- a. Create an emergency contact list as part of your Family Emergency Plan.
- b. Create a list of medications and health conditions that other people may need to be aware of and advise them where this list can be found.
- c. Confirm what your children's School Emergency Operations Plan is (if applicable).
- d. Confirm if your eldercare facility has an Emergency Operations Plan (if applicable).
- e. Confirm what your Employer's Emergency Operations Plan is (if applicable).
- f. Obtain copies of all your insurance papers, disability plans, the current Collective Agreement, and other documents that may need to refer to.
- g. Make arrangements for the delivery of medications and medical supplies (if applicable). If prescriptions are running low, restock them. Ensure you have sufficient non-prescription medications such as pain relievers, etc.
- h. Make arrangements for the delivery of food, toiletry items, household items, and any entertainment items such as magazines, etc.
- i. Make arrangements for mail and parcel delivery.
- j. Ensure you have sufficient cash for 14 days or more.
- k. Ensure your important documents such as identification and bank records are available.
- l. Ensure you have an up-to-date First Aid Kit.

- m. Ensure you have an up-to-date Emergency Kit.
- n. Ensure you have sufficient food (including pet food and pet supplies such as cat litter) for at least 14 days, including: non-perishables such as rice, grains, flour, pastas, canned goods; vegetables; fruit; water (two litres per person per day).

If you have been contacted by a public health authority before you have spoken with company or union representatives, we ask that you contact your union representative immediately before you take any further steps. They will be able to provide you with advice or direct you to the appropriate contact within your workplace.

Additionally, you should contact your regional workers' compensation board about filing a claim for lost wages.

## **SECTION 8: ROLE OF THE UNION, JOINT OCCUPATIONAL HEALTH AND SAFETY COMMITTEE AND HEALTH AND SAFETY REPRESENTATIVES**

The Union can assist members by providing them with information related to the following:

- Entitlements under collective agreements related to sick leave, quarantine leave, family or special leave and "top-up" for worker's compensation payments
- Assisting members on how to fill out appropriate worker's compensation forms and worker exposure forms
- Filing grievances where employers have acted in an arbitrary or discriminatory manner (see section 10)

Joint Occupational Health and Safety Committees and Health and Safety Representatives play an important role in identifying potential or existing hazards and making recommendations for improvement to occupational health and safety. As such, we encourage CUPE members on Health and Safety Committees, and Health and Safety Representatives, to review workplace policies and programs to ensure they contain up-to-date information related to COVID-19.

Workers have the right to be informed of any hazard in their workplace, and to receive training on any occupational health and safety measure or procedures that are set out by

employer. Additionally, the policies and programs should be reviewed to determine if they are realistic and feasible.

This is a list of questions to ask the employer related to their policies and programs:

- Does the employer have a pandemic response plan? Has it been updated with the latest information about COVID-19?
- Are workers strongly encouraged to remain home with pay if they have a fever or experience symptoms of respiratory infection?
- Has the employer reviewed the environmental/custodial cleaning practices to determine if additional measures, such as extra cleaning of hard surfaces, are required for COVID-19?
- What is the kill-rate for pathogens of the current disinfectant(s) used in the workplace? Does the current product kill the coronavirus, SARS-CoV-2?
- How long must a disinfectant remain wet on a surface to kill the coronavirus? Do the surfaces require rinsing after disinfecting?
- Has the employer identified areas of the workplace that require extra cleaning (for example, door handles, phones, elevator buttons, sinks, water fountains)?
- Have workers received information and training on how to protect themselves from COVID-19?
- In addition to signage, does the employer plan on screening visitors and clients before they enter the workplace to determine if they might be carrying the virus?
- When will the employer limit entry points or implement a single-entry point to the workplace?
- Does the employer plan on providing frontline workers with personal protective equipment (PPE)?
- If workers are required to wear or use PPE, have they received training on the care, use and limitations of the equipment, materials or protective devices? (Ask for training records.)
- What is the current stock of PPE?
- If the workplace is required to remain open during a pandemic, how will the employer handle staffing shortages or PPE shortages?

## SECTION 9: LOST WAGES

CUPE has received many questions about pay as it relates to missed time due to COVID-19.

There are many scenarios where CUPE would expect employers to react to workers missing work because they are self-isolating or due to a required shut down. CUPE is encouraging all Union representatives to start conversations with their employers about their concerns. Make sure to ask:

- How are employers preparing for a potential outbreak?
- How are they planning to schedule, and what protections will be in place should the workplace become infected?
- What increased cleaning and screening is planned, or is taking place?
- What is the process for workers who have been asked to self-quarantine, including notification, payment and follow-up?
- Will this workplace potentially have to shut down because of an infection?

Meanwhile, CUPE representatives should gather the following information:

- a. Determine if there are any Collective Agreement entitlements, for example, sick leave.
  - How will the time spent in quarantine be paid?
  - Consider impact on benefits, vacation time, seniority, etc.?
  - Who pays?
  - Commencing when?
  - Are forms required?
  - Is supporting documentation required?
  - Who is the contact person(s) in Human Resources?
  - Who is the CUPE Local contact person(s)?
  - Are there any other employer benefits?
- b. Determine if there is a need to file for Employment Insurance Benefits. Note the federal government **has announced** it is eliminating the one-week waiting period, and providing assistance for workers who otherwise might not be eligible for EI

- c. Is there a need for assistance from Employee and Family Assistance Program, if it exists? Ask your CUPE representative or Employer for information as required
- d. Are there any ongoing health care issues that require attention or assistance?
- e. Ensure there is ongoing social connection – isolation may cause mental health issues or psychological injury. Are there regular communication checks from other persons by phone, email, Skype, etc.?
- f. Develop an at-home physical work-out plan, if required
- g. Is ongoing medical treatment required?

## **SECTION 10: DISCRIMINATION**

Racism and xenophobia have spiked in the context of the recent outbreak particularly towards Chinese, East Asian and Southeast Asian people, and increasingly, Middle Eastern people. This pattern of refueled racism is causing harm, much like what happened during the SARS pandemic.

Indictments and blame of racialized workers are not acceptable. Jokes associating the virus with people of any descent are likewise unacceptable.

CUPE stands with all workers and condemns any form harassment, racism and/or racial discrimination, and any acts of violence directed towards them.

If you are a worker who experiences any form of harassment, or discrimination in the workplace, remember that this is a violation of your human rights and can be grieved – even when the collective agreement doesn't address these issues explicitly.

Additionally, under health and safety law, employers are required to provide a healthy and safe workplace, so incidents should be reported to your immediate supervisor, union and health and safety committee or representative.