IUE-CWA Manufacturing Safety Guidelines for COVID-19

Goal: IUE-CWA's primary goal is to ensure our manufacturing employers have comprehensive emergency preparedness and safety plans in place that prioritize the safety and well-being of our members, their families, and the overall community by minimizing spread of the COVID-19 disease. Our secondary goal is to ensure each represented business maintains the ability to continue essential operational functions.

The following safety requirements for IUE-CWA facilities have been written based on OSHA safety standards published in [OSHA Guidance on Preparing Workplaces for COVID-19](#) and best practices identified by manufacturing industry health and safety experts.

A critical component is for companies to consider the individual risk factors of their most vulnerable workers (e.g., older age, presence of chronic medical conditions including immunocompromising conditions, pregnancy) and/or the individual risk factors of those with whom their workers live) when preparing and developing procedures to deal with COVID-19 in the workplace.

Develop an Infectious Disease Preparedness and Response Plan
- If one does not already exist, develop an infectious disease preparedness and response plan that can help guide protective actions against COVID-19.
- Stay abreast of guidance from federal, state, local, tribal, and/or territorial health agencies, and consider how to incorporate those recommendations and resources into workplace-specific plans.
- Plans should consider and address the level(s) of risk associated with various worksites and job tasks workers perform at those sites. Such considerations may include:
  - Where, how, and to what sources might workers be exposed, including:
    - The general public, customers, and coworkers; and
    - Sick individuals or those at particularly high risk of infection (e.g., international travelers who have visited locations with widespread sustained COVID-19 transmission)
  - Non-occupational risk factors at home and in community settings
  - Workers' individual risk factors (e.g., older age, presence of chronic medical conditions, including immunocompromising conditions, pregnancy) and/or the individual risk factors of those they live with.
  - Controls necessary to address those risks.
- Follow federal and state, local, tribal, and/or territorial (SLTT) recommendations regarding development of contingency plans for situations that may arise as a result of outbreaks, such as:
  - Increased rates of worker absenteeism
  - The need for social distancing, staggered work shifts, downsizing operations, delivering services remotely, and other exposure-reducing measures
  - Options for conducting essential operations with a reduced workforce, including cross-training workers across different jobs in order to continue operations or deliver surge services
  - Interrupted supply chains or delayed deliveries. Plans should also consider and address the other steps that employers can take to reduce the risk of worker exposure in their workplaces.

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Develop, Implement, and Communicate Workplace Flexibilities and Protections

- Implement a flexible and non-punitive leave policy consistent with public health guidance and ensure that all employees are aware of it.
- During a pandemic outbreak, staffing levels will almost certainly be strained. Reasons for absenteeism may include the following: caring for family members, personal illness, workers' individual risk factors (e.g., older age, presence of chronic medical conditions, including immunocompromising conditions, pregnancy), caring for children if schools or day care centers are closed, having at-risk people at home (e.g., older age; presence of chronic medical conditions including immunocompromising conditions, pregnancy), or fear or extreme anxiety over possible exposure.
- Do not require a healthcare provider's note for employees who are sick with acute respiratory illness to validate their illness or to return to work, as healthcare provider offices and medical facilities may be extremely busy and unable to provide such documentation.
- Require workers who have symptoms of acute respiratory illness to stay home and not come to work until they are free of fever (100.4° F [37.8° C] or greater using an oral thermometer), signs of a fever, and any other symptoms for 3 days or more (CDC recommended time period), without the use of fever-reducing or other symptom-altering medicines (e.g. cough suppressants).
- Provide workers with a self-observation assessment (see attachment) and implement a reporting structure for any suspected exposure or illness.
- Require that those who must be on-site are contacted and made aware of the importance of sick employees staying home and the newly implemented non-punitive leave policies.
- Provide up-to-date emergency contact information and inform workers to whom they are required to notify suspected illness (e.g. immediate supervisor, human resources, etc.).
- Work with your insurance companies (where appropriate) to provide information to workers about medical care and coverage in the event of a COVID-19 outbreak.

Employee Assistance Program Services: Employee assistance program (EAP) services should be available to the extent practical and reasonable during the COVID-19 outbreak to ensure availability of critical information and psychological and emotional support, including assistance and support following the death of an infected family member.

Implement Basic Infection Prevention Measures

- Promote frequent and thorough hand washing, by providing workers, customers, and worksite visitors with a place to wash their hands and adequate time to do so. If soap and running water are not immediately available, provide alcohol-based hand rubs containing at least 60% alcohol.
- Encourage respiratory etiquette, including covering coughs and sneezes.
- Discourage bodily contact, including hand-shaking or hugging.
- Provide tissues, no-touch disposal receptacles, and alcohol-based hand rubs in the workplace. Place hand rubs and disinfectant wipes in multiple locations throughout the facility and ensure that adequate supplies are maintained.
- Limit worker exposure to contractors and site visitors.

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- Provide reinforcement training and education thru posters, signs, emails, and/or site communication to emphasize staying home when sick, respiratory etiquette, and hand hygiene by all.
- Increase the janitorial frequency of public areas such as restrooms, with extra attention to touched surfaces in the workplace, such as countertops, and doorknobs.
- All equipment and workstations must be sanitized between shifts to minimize exposure.
- Discourage workers from using other workers' phones, desks, offices, or other work tools and equipment whenever possible.
- Provide disposable wipes so that commonly used surfaces (e.g., doorknobs, keyboards, remote controls, phones, desks, time clocks, etc.) can be wiped down by employees before each use.

Implement Hierarchy of Controls

Engineering Controls
- Install physical barriers, such as clear plastic sneeze guards, where feasible.
- Discontinue use of bio-time clocks and implement non-touch time clock mechanisms, where feasible.

Administrative Controls
- Establish alternating days or extra shifts that reduce the total number of employees in a facility at a given time, allowing them to maintain social distancing (at least 6 feet apart) and a full onsite work week.
- Disinfect all equipment used by workers and touched surfaces between shifts.
- Discontinue nonessential travel, cancel or postpone nonessential meetings, gatherings, workshops, training sessions, or huddles, and minimize all other forms of face-to face contact.
  - If a face-to-face meeting is unavoidable, minimize the meeting time, choose a large meeting room or work area, and sit or stand at least 6 feet from each other; avoid person-to-person contact such as shaking hands.
- Stagger breaks so workers do not congregate in break rooms or lunch rooms.
- When possible, close down on-site eateries. If open, regularly disinfect these areas and maintain the sanitary preparation of foods. Additional seating and separating tables may aid in the social distancing of workers.
- Where appropriate, limit customer and public access to the worksite, or restrict access to only certain workplace areas.
- Communicate the availability of medical screening or other worker health resources (e.g., on-site nurse, telemedicine services).
- Establish structure for recording and reporting key activities, events, and decisions made during the crisis.
- Implement daily monitoring of updated guidance from federal, state, local, tribal, and/or territorial health agencies, and consider how to incorporate those recommendations and resources into workplace-specific plans.
- Develop emergency communications plans, including a forum for answering workers' concerns via internet or phone-based communications, if feasible.

Personal Protective Equipment (PPE)
- When selecting PPE, consider factors such as function, fit, decontamination ability, disposal, and cost. In instances when PPE must be used repeatedly for a long period of time, a more expensive and durable type of PPE may be less expensive overall than disposable PPE. Each employer

should select the combination of PPE that protects workers specific to their workplaces and functions.

- Workers in high density workplaces are considered in OSHA's medium risk category and may need to wear some combination of gloves, a gown, a face mask, and/or a face shield or goggles. PPE ensembles for workers in the medium exposure risk category will vary by work task, the results of the employer's hazard assessment, and the types of exposures workers have on the job.
- Employers are obligated to provide their workers with PPE needed to keep them safe while performing their jobs. The types of PPE required during a COVID-19 outbreak will be based on the risk of being infected with COVID-19 while working and job tasks that may lead to exposure. All types of PPE must be:
  - Selected based upon the hazard to the worker
  - Properly fitted and periodically refitted, as applicable (e.g., respirators)
  - Consistently and properly worn when required
  - Regularly inspected, maintained, and replaced, as necessary , and
  - Properly removed, cleaned, and stored or disposed of, as applicable, to avoid contamination of self, others, or the environment.
- Offer face masks to ill employees and customers to contain respiratory secretions until they are able leave the workplace (i.e., for medical evaluation/care or to return home). In the event of a shortage of masks, a reusable face shield that can be decontaminated may be an acceptable method of protecting against droplet transmission. See CDC/ NIOSH guidance for optimizing respirator supplies, which discusses the use of surgical masks, at: www.cdc.gov/coronavirus/2019-ncov/hcp/respirators-strategy.

Provide Proper Worker Training

- All employees are at risk of exposure to the virus, both in and outside of the workplace; therefore, all employees should be properly informed about updated safety regulations and non-punitive leave policies.
- Share education materials (either paper, electronic, or both) with definitions (i.e. pandemic, anti-viral, vaccine, social distancing, isolation, quarantine) and distribute as necessary.
- Train workers who need to use protective clothing and equipment, how to put it on, use/wear it, and take it off correctly, as well as how to properly disinfect equipment and other surfaces.
- All training material should be easy to understand and available in the appropriate language and literacy level for all workers.
- Ensure proper training before reassigning work even temporarily to meet service needs.
- Reference and share important references, (CDC, OSHA, NIOSH), and resources with workers when training or updating policies.