COVID-19
A Guide for USW Local Unions Still at Work
(This factsheet is not for health care locals.)

Many state and local authorities have asked or ordered non-essential businesses and institutions to close. Many have asked or ordered people to stay home except for critical errands, like getting food or medicine. As the pandemic continues, we can expect many more areas to be included. These measures are essential to slowing and eventually stopping the spread of the virus.

But what if your facility or job is considered essential? What if your employer is ignoring the request or order? This factsheet outlines steps a local union can take to keep its members as safe as possible.

First, determine whether your employer is right to stay open. Plants manufacturing critical items, like cleaning chemicals, drugs, medical supplies, and the materials or parts that go into them, clearly are essential. So are facilities that supply food or energy. Many public service jobs are essential. And even if a facility temporarily closes, some workers may have to stay on the job for essential maintenance and security. Note, however, that making a profit is not an essential function. If you have questions about whether your workplace is essential, discuss them with your staff representative, who can also consult with USW headquarters staff.

Understandably, some of our members may resist workplace closings. But if we don’t stop the virus now, we will have to take far more drastic measures in a few weeks. The USW is working hard through legislation and negotiation to protect our members’ pay and benefits, as well as their health.

For those who stay at work, the local union should attempt to negotiate a reasonable safety policy. By now everyone has heard the messages about symptom checking, hand washing, social distancing and
protecting the most vulnerable. Those measures are important on and off the job. Below are a few simple things that will help keep people as safe as possible. Unfortunately, OSHA has no standards that apply (except for the correct use of respirators), and the agency has refused to use its general duty clause for coronavirus. These safeguards will have to be negotiated.

- High-risk people should not be at work; they are much more likely to contract a severe case. These include persons over 65; those who have certain medical conditions, including heart disease, lung disease, or diabetes; those who are being treated for cancer with chemotherapy or radiation; and those who have a compromised immune system. Workers who live with someone in those categories should also stay home. The employer may not be able to force people off the job due to the union contract and anti-discrimination laws, but they should allow, and the union should encourage our members in those categories to stay home.

- Everyone in the facility, including visitors, should get their temperature checked when they come in, mid-shift, and before they go home. And if they develop a fever, unexplained coughing, or shortness of breath, they should go home immediately, self-isolate and notify their doctor. The area where that person worked should be immediately disinfected.

- Anyone who has been in close contact with a confirmed positive case should stay home and self-isolate. “Close contact” means touching or being within 6 feet of such a person for more than 5 minutes.

- People not at work because they are high-risk, have developed symptoms or were in close contact with a confirmed case should
be considered eligible for sickness and accident benefits, sick days if applicable, FMLA and any other appropriate negotiated leaves. They should be exempt from absenteeism policies. Unless Congress or your state passes appropriate legislation, these things will have to be negotiated.

• Some members who are not in the above categories may be afraid to remain and ask to stay home. Many of our contracts include a right to refuse unsafe work. OSHA and MSHA also give workers that right, but enforcing it is uncertain. Our members have to make that decision for themselves. All the union can tell them is that we will fight for their jobs, pay and benefits. The same is true for all our members, if management refuses to negotiate a reasonable protective policy.

• Your employer should not require workers who are isolating at home or home sick for any other reason to get a note from their doctor. Health care providers are exceedingly busy right now, and they are not able to document every illness.

• The union and the company should look carefully at the work process to make sure people really can maintain social distancing – avoiding large gatherings and close contact with others. Meetings and trainings should be canceled. If that cannot be done, they should be kept as small as possible, and participants should maintain at least six feet of separation. If possible, workstations should be at least six feet apart. Schedules and break times can be staggered, and extra entrances and exits provided, so people don’t pile up at shift changes. Doorknobs and push bars can be replaced with automatic door openers.
Workers should be encouraged to frequently leave their workstations to wash their hands. If necessary, portable washing stations should be provided. If the facility can obtain a supply of hand sanitizer, it should be at all workstations.

There should be a plan in place for frequently sanitizing surfaces and equipment that workers might touch, including tools and mobile equipment. Shift changes are a good time to sanitize.

Workers who deal with the general public are at greater risk. This factsheet cannot cover every such situation, but the general principles of personal hygiene, social distancing and sanitization still apply. For example, some grocery stores have installed Plexiglas screens to protect cashiers and baggers.

Gloves can help in some situations, but they must be taken off and disposed of carefully to avoid contaminating your hands. However, face masks are not a good idea for most workers. Ordinary surgical masks do not protect the person wearing the mask. Most of the masks advertised on the internet are worthless. Proper respirators, like the N95, work well – if the user has been trained, fit-tested, and doesn’t have facial hair that interferes with the seal. But such respirators are in short supply, and health care workers desperately need them.

Don’t fall for quack remedies. There is no vaccine and no drug that will prevent or cure COVID-19, although scientists are working around the clock to develop them. None of the drugs or supplements being promoted on the internet have been tested against coronavirus. Many are dangerous, and people have died from taking them.

More information is available at

WWW.USW.ORG/COVID19
COVID-19
A Guide for USW Local Unions Still at Work
(This factsheet is not for health care locals.)

For more information:

Visit the USW Coronavirus Resource Page: USW.ORG/COVID19

Contact the USW Health, Safety and Environment Department at safety@usw.org

Read the latest guidance from CDC:

Read the guidance from OSHA:
https://www.dol.gov/newsroom/releases/osha/osha20200309

More information is available at
WWW.USW.ORG/COVID19