

Workers and Employers Want to Know

Q. Workers and employers have asked the ILA~USMX Joint Safety Committee (JSC): "Has ILA~USMX adopted the recently revised U.S. Centers for Disease Control and Prevention (CDC) time frames for quarantine and isolation, with regard to persons coming in "close contact" with those testing positive and for those persons testing positive for COVID-19 but showing no symptoms?" [10 January 2022]

A: As of this morning, our principals at ILA and USMX have advised the JSC that, after careful consideration, they have decided to adopt the revised CDC timeframes for Atlantic and Gulf coastwide implementation.

In sum, the revised time frames reduce quarantine and isolation periods to five (5) days (based on the presence/absence of symptoms) and require effective masking when reentering the work environment after those five (5) days have elapsed.

Just yesterday (09 January) CDC updated its "Quarantine and Isolation" webpage, which provides the entirety of the agency's current set of recommendations. We provide a link to that webpage here:

https://www.cdc.gov/coronavirus/2019-ncov/your-health/quarantine-isolation.html



Quarantine

If you were exposed You <u>quarantine</u> and stay away from others when you have been in close contact with someone who has COVID-19.



Isolate

If you are sick or test positive You <u>isolate</u> when you are sick or when you have been infected with the virus, even if you don't have symptoms.

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Workers and Employers Want to Know

Q. Workers and employers have asked the ILA~USMX Joint Safety Committee (JSC): "Yesterday, the U.S. Centers for Disease Control and Prevention (CDC) lowered the time frames for quarantine and isolation with regard to persons coming within "close contact" with those testing positive and for those testing positive for COVID-19 <u>but showing no</u> <u>symptoms</u>. Will ILA~USMX go along with CDC's recommendations?" [28 December 2021]

A: As of this morning, our principals at ILA and USMX are carefully reviewing yesterday's recommendations and have not yet concluded whether or not the guidance being offered by CDC provides a good fit for the purposes, goals and interests of our industry and its workers. We will advise as soon as their decision crystallizes.

For the time being, ILA~USMX ports will adhere to the quarantine (for close contact) and isolation (for actual infection) timeframes that have been in practice for many months.

While the final decision taken by ILA~USMX principals is in development, for the purposes of completely informing our constituents we include a link to CDC's media release of yesterday's date here:

https://www.cdc.gov/media/releases/2021/s1227-isolation-quarantineguidance.html

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OSHALERT 2021-12 [16 December 2021]

Colder Weather, Delta & Omicron Variants and Greater Vigilance

With the onset of the Winter months, coupled with the predicted expectation of COVID-19 infection surges in the United States, the ILA~USMX Joint Safety Committee (JSC) has a responsibility to encourage our labor and management colleagues to increase their vigilance in mitigating the negative health effects that accompany the related viral infections.

While the JSC continues to advise our constituents (in line with current CDC recommendations) to get fully vaccinated (in consultation with their own health care professional) and to accept a booster inoculation¹, we are fully aware of the wishes of some who continue to decline vaccination.

Nonetheless, there are simple measures that we all can take in helping to ensure that COVID-19 infections do not adversely impact ourselves, our families, our fellow workers and their families. When at work and in the presence of others:

1). Wear a facemask that covers the nose and mouth completely;

2). Respect the six foot social distancing space (especially when in transport vehicles); and

3). Do not report to work if you're feeling sick!

At several ports, we are already experiencing an alarming uptick in the number of active infections and extremely adverse outcomes amongst our fellow workers. Our hope is to contain those infections and outcomes to the largest extent possible.

We need your help! We ask all of you to do your part in keeping yourselves, your families, your fellow workers and their families as protected as possible during these trying times.

Got a question about this particular subject? Write to the JSC at: <u>blueoceana@optonline.net</u>

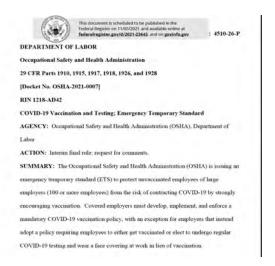
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¹ Natural immunity conferred by previous COVID-19 infection may (or may not) provide a sufficient level of antibodies to effectively combat infection. Before declining vaccination based upon a previous infection, it would be wise to ascertain current antibody levels.



OSH ALERT 2021-11 [04 November 2021]

OSHA Issues Emergency Temporary Standard in re COVID-19 Vaccination/Testing



The ILA~USMX Joint Safety Committee (JSC) has obtained an advance copy of OSHA's Emergency Temporary Standard (ETS) for COVID-19 vaccination/testing, which we expect will be published in tomorrow's edition of the FEDERAL REGISTER.

We provide a link that will allow access to the pdf-formatted notice:

https://public-inspection.federalregister.gov/2021-23643.pdf

The vaccination component's compliance date is set at 30 days after publication in the FEDERAL REGISTER; the testing component's compliance date is set at 60 days after publication.

Given that the linked-to notice consumes some 490 pages, our related opinions and advice would likely be considered somewhat premature. We continue through our review.

Nonetheless, there appear to be several areas within the ETS' scope and application sections that will require negotiation and agreement between ILA and USMX principals. We're certain that those areas are resolvable, and place great confidence in the parties' abilities to work through them.

Got a question about this particular subject? Write to the JSC at: <u>blueoceana@optonline.net</u>

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OSH ALERT 2021-10 [29 October 2021] The Build Back Better Act [HR 5376]

Yesterday, (28 October) the legislation mentioned above was announced by the Biden Administration and was subsequently released by the House Rules Committee.

It's a very (very) large piece of legislation, encompassing subject issues as varied as offshore wind resources to childcare (and most other things you can think of in between).

Realistically, the ILA~USMX Joint safety Committee (JSC) can't possibly predict what the future of HR 5376 may be. If the majority party gets their act together and performs in unison, much of it will likely survive. If not, well..... pieces of it may make it through both chambers of our Federal legislature; pieces may not. Which pieces survive intact, which get revised and which pieces ultimately get to the president's desk are, for now, matters of conjecture.

The JSC's principal interest, of course, is occupational safety & health. So, here's what we know about this bill; in that specific regard:

1). Section 21001 would boost OSHA's annual budget by about 20% (from \$591 Million to \$707 Million over the next 5 Fiscal Years); and

2). Section 21004 would amend the OSH Act of 1970 (Public Law 91-596) to increase the maximum civil penalty for "Willful" and "Repeat" alleged violations of OSHA standards-from \$136,530.00 to \$700,000.00, and increase the maximum civil penalty for "Serious" and "Failure to Abate" alleged violations of OSHA standards from \$13,653.00 to \$70,000.00. In sum, these are huge proposed increases.

While the upper limit (maximum) civil penalties would likely be reserved for large corporations/Neanderthal-like employers, we must assume (for purposes of a political nature) that OSHA would be compelled to graduate civil penalties for small and medium sized businesses.

We include a link to the legislation's section by section analysis:

https://rules.house.gov/sites/democrats.rules.house.gov/files/Section_by_Section_BBB.pdf

And also include a link to the legislation's full content:

https://rules.house.gov/bill/117/hr-5376

Got a question about this particular subject? Write to the JSC at: <u>blueoceana@optonline.net</u>

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OSHALERT 2021-09 [18 October 2021]

OSHA Moving To Reinstitute Full Electronic Data Reporting Rule

While we all wait on OMB's approval (and the imminent issuance) of OSHA's Emergency Temporary Standard in re COVID-19 Vaccination (which should happen in a week, maybe two, at the outside), we should not lose track of another OSHA regulation currently in the pipeline.

From a historical perspective, employers with more than 10 employees in most industries have been obliged to keep records of occupational injuries and illnesses at their establishments. Those employers are required to list each recordable employee injury and illness on an OSHA Form 300 (the Log of Work-Related Injuries and Illnesses) and prepare an OSHA Form 301 (Injury and Illness Incident Report) which provides additional details about those events. Employers were also obliged to prepare an annual summary report of all injuries and illnesses on the OSHA Form 300A (Summary of Work-Related Injuries and Illnesses), and post that form at a visible location within the workplace.

In 2016, during the Obama Administration, OSHA amended that standard to require establishments with 250 or more employees to electronically submit information from their OSHA Forms 300, 300A, and 301 to a specially designed web portal. These reporting requirements technically became effective in January 2017. That date was administratively extended, however, and (to the writer's recollection) the electronic submission requirements were never actually enforced by the agency.

The Trump Administration significantly revised that requirement, mandating that only the OSH Form 300A data needed to be so filed.

Moving forward to the present time, we understand that the Biden Administration is seeking to reinstitute the circa-2016 requirements, stipulating that employers will once again be obliged to electronically submit the data populated on their annual OSHA Forms 300, 300A and 301 to the established web portal in March of each year. In fact, we see that the Office of Management and Budget's Office of Information & Regulatory Affairs (OIRA) has that proposed rulemaking initiative currently under consideration.

Here's a link that speaks to OIRA's review:

https://www.reginfo.gov/public/do/eoDetails?rrid=198264

Got a question about this particular subject? Write to the JSC at: <u>blueoceana@optonline.net</u>

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OSH ALERT 2021-08 [12 August 2021]

U.S. Coast Guard Alert in re Wire Rope Terminations (Swaged Fittings)

Last month, the United States Coast Guard (USCG) issued a Marine Safety Alert which has as its subject wire rope terminations. We attach a link to that Alert below and urge our management and labor constituents to examine all wire rope loose and standing gear in their inventory that fits into the universe addressed by this Alert.

https://www.dco.uscg.mil/Portals/9/DCO%20Documents/5p/CG-5PC/INV/Alerts/USCGSA_0421.pdf?ver=cmKJSn6AJFjJrZdfrIQQLw%3D%3D

In sum, USCG has identified wire rope terminations (end of rope fittings) that have presented abnormalities that would likely affect the performance and safety of the wire rope itself. In many cases, the safe working load (SWL) originally designated by the rope's manufacturer could be significantly decreased owing to these deficiencies.

We urge gear men, lifting appliance mechanics, etc., to carefully examine all such wire rope terminations, consistent with the advice set out within the USCG Alert.



Got a question about this particular subject? Write to the JSC at: <u>blueoceana@optonline.net</u>

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Workers and Employers Want to Know

Q. Workers and employers have asked the ILA~USMX Joint Safety Committee (JSC): "Many waterfront workers and managers have chosen to get vaccinated against the COVID-19 virus. The majority of us are fine, but a few have gotten infected subsequent to vaccination. Why is that, and what do vaccinated personnel need to know going forward? [2 August 2021]

A: While the three FDA authorized vaccines have a very high effective rate (an average of over 90% effective), that still leaves a comparatively small number of the vaccinated population with potentially ineffective results. It stands to reason then, that there will be a small number of vaccinated people who don't receive full immunity to the virus. Those are pretty good odds... but not perfect.

And while complete immunity may not be realized, fully vaccinated persons who subsequently become infected tend to have milder symptoms of the associated illness,

Like unvaccinated persons, fully vaccinated persons who have been in close contact with someone who has tested positive for COVID-19 should <u>get tested 3-5 days after</u> <u>your exposure</u>, even if you don't have symptoms. You should also wear a mask indoors in public for 14 days following exposure¹ or until your test result is negative. <u>You</u> <u>should isolate for 10 days if your test result is positive.</u>

In terms of more fully explaining what vaccinated people need to know going forward, the latest intelligence published by the U.S. Centers for Disease Control & Prevention (CDC) just last week is available at that agency's website.

We include a link to the relevant updated webpage here:

https://www.cdc.gov/coronavirus/2019-ncov/vaccines/fully-vaccinated.html

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¹ The CDC's Order of February 1, 2021 relating to "Transportation Hubs" continues to require the wearing of masks within indoor settings at those locations.



OSHALERT 2021-07 [02 August 2021]

COVID-19: Isolation & Quarantine

With all the recent governmental guidance relating to the COVID-19 Delta variant getting into the print and broadcast media, and with the renewed emphasis on vaccination being accompanied by reports about comparatively rare "breakthrough" infections that can be contracted even by those individuals who have been fully vaccinated, it's easy to get lost in all that "stuff" and become confused about what you need to know regarding the basics.

Those basics are:

1). In the event you become infected, there is a need for "Isolation"; and

2). In the event you come into "close contact¹" with someone who has become infected, there is a need to "Quarantine."

The U.S. Centers for Disease Control & Prevention (CDC) updated the relevant webpage at its website just two days ago in order to provide the public with current information in relation to the terms "Isolation" and "Quarantine." We provide an active link to the updated webpage he

https://www.cdc.gov/coronavirus/2019-ncov/if-you-aresick/quarantine.html?CDC_AA_refVal=https%3A%2F%2Fwww.cdc.gov%2Fcoronavirus %2F2019-ncov%2Fif-you-are-sick%2Fisolation.html

The updated webpage offers a great deal of information about "What to do?", and also provides the answers to several important questions typically asked by workers and managers when wondering about things such as:

What takes place in both "Isolation" and "Quarantine" and how long does each last?

The ILA~USMX Joint Safety Committee recommends that you review the updated webpage and continue to refer to the CDC's COVID-19 webpages from time to time to keep current with what appears to be a quickly changing COVID-19 environment.

Got a question about this particular subject? Write to the JSC at: <u>blueoceana@optonline.net</u>

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¹ The term "close contact" means being within 6 feet of an infected person for a cumulative total of 15 minutes or more over a 24-hour period.)



The Novel Coronavirus Workers and Employers Want to Know

Q. Workers and employers have asked the ILA~USMX Joint Safety Committee (JSC): "Lately, I've been hearing a lot about "Breakthrough" cases, where apparently people who have been vaccinated against COVID-19 get infected anyway. What's with that? [22 July 2021]

A: Thus far, while the three FDA authorized COVID-19 vaccines have proven to be impressively effective, there have been individuals who (owing to organic/metabolic reasons) have received the vaccine but yet have become infected with the COVID-19 virus. When that rare circumstance occurs, it's known as a "breakthrough" case.

Given that the vaccines are, on average, 95% effective, that leaves 5% of the vaccinated population susceptible to contract the viral infection. That's a circumstance that's quite natural and understandable. No vaccine is 100% effective.

In the vast majority of "breakthrough" cases, the vaccinated person experiences mild symptoms and recovers quickly.... But, for a variety of reasons, that's not always the outcome.

Using New Jersey's current experience¹, of the 4,432,769 residents who were fully vaccinated 3,474 contracted COVID-19. Those are New Jersey's "breakthrough" cases.

84 of them required hospitalization. 31 of those 84 have died.

From a statistical perspective, that represents a 99.9993 vaccine effective rate.

In the light provided by the data above, the effectiveness of vaccination appears to be further supported. The JSC appreciates, however, that many of our constituents still question the wisdom of vaccination. That's OK. Our interest, however, is in providing the information necessary for you to come to an informed decision (with the input and concurrence of your own health care provider).

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¹ We use New Jersey's current data with the understanding that vaccination rates in that State are comparatively high at this point in time.



Workers and Employers Want to Know

Q. Workers and employers have asked the ILA~USMX Joint Safety Committee (JSC): "Lately, with decreasing infection numbers being experienced, Federal and State regulators have advised of relaxed prevention efforts in re the spread of the COVID-19 virus. That advice, however, draws distinctions between vaccinated and unvaccinated workers. What should employers and employees be aware of?"

[June 29, 2021]

A. Since OSHA is the occupational health and safety regulator with the most widespread jurisdiction over the U.S. marine cargo handling industry, it's best that we base our response on that agency's most recent guidance (which appears to track the U.S. Centers for Disease Control and Prevention (CDC) current guidance, in general. Be aware, however, that a CDC Order applicable to "transportation hubs", while being modified, is still in place. In re the CDC Order: <u>Guidance in re CDC Order</u>

Like most Federal & State public health agencies, OSHA believes that those workers who have not been vaccinated (and those workers with other immuno-suppressive predispositions) are at the greatest risk of contracting COVID-19. This is particularly true, given the newer virus mutations that appear to be taking on a dominant status.

A link to OSHA's updated guidance of 10 June 2021 is provided here:

https://www.osha.gov/coronavirus/safework

While the JSC believes that OSHA's updated guidance is largely selfexplanatory and relatively plain, we would be pleased to respond to any questions our labor and management constituents may have with regard to content and meaning.

Got a question about this particular subject? Write to the JSC at: <u>blueoceana@optonline.net</u>

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OSH ALERT 2021-06 [14 June 2021]

CDC to Amend Masking Order at Transportation Hubs



On 10 June 2021, the U.S. Centers for Disease Control and Prevention (CDC) announced its intention to revise its masking order of 29 January 2021 which requires personnel working indoors and outdoors at transportation hubs to mask up.

Going forward, we understand that CDC "...will exercise its enforcement discretion regarding certain aspects of the Order to not require that people wear masks while outdoors on conveyances or while outdoors on the premises of transportation hubs."

The planned relaxation of the masking requirement applies only to personnel working outdoors, i.e., "in the open air."

In granting this flexibility, CDC continues to recommend that unvaccinated transportation hub personnel continue to mask up whether indoors or outdoors.

The link below provides access to the fundamentals of CDC's update:

https://www.cdc.gov/coronavirus/2019-ncov/travelers/face-masks-publictransportation.html

Got a question about this particular subject? Write to the JSC at: <u>blueoceana@optonline.net</u>

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OSH ALERT 2021-05 [14 May 2021] GOING MASKLESS?



Yesterday, The U.S. Centers for Disease Control & Prevention (CDC) updated its guidance in relation to the wearing of facemasks. In that guidance, the long-awaited general relief from the wearing of facemasks has been extended to individuals who have been fully vaccinated against the COVID-19 virus. Each U.S. State has the executive authority to implement the new guidance, and some have already done so. Others will likely follow.

We provide a link to the new CDC guidance here:

https://www.cdc.gov/coronavirus/2019-ncov/vaccines/fully-vaccinated.html

While this relief is a welcome indication that the U.S. vaccination experience appears to be successful thus far, the ILA~USMX Joint Safety Committee (JSC) would be less than honest if it were to lead its labor and management constituents to believe that even fully vaccinated individuals will be permitted to go maskless at marine terminals at the present time.

Until the CDC's Order of 01 February 2021 is lifted, the "transportation hubs" that our labor and management constituents report to on a daily basis are workplaces that will continue to require the wearing of facemasks for all individuals (with very few exceptions). We provide a link to the CDC Order here:

https://documentcloud.adobe.com/link/review?uri=urn:aaid:scds:US:81e74cf5-2185-417a-82f3af3ffa5cb54b

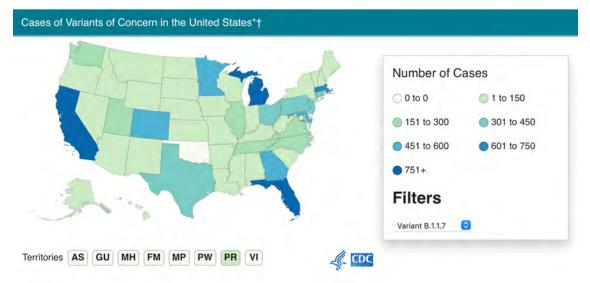
We're very hopeful that the day will soon arrive when we can get back to leading workplace lives that are more normal and less restrictive. The successes that the U.S. has experienced lately have given us cause for optimism.

Got a question about this particular subject? Write to the JSC at: <u>blueoceana@optonline.net</u>

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OSH ALERT 2021-04 [01 April 2021] COVID-19 Mutations



On Tuesday of this week, the U.S. Centers for Disease Control & Prevention (CDC) published an update to its webpage exclusively devoted to addressing the progress of COVID-19 virus mutations.

We provide a link to that guidance here:

https://www.cdc.gov/coronavirus/2019-ncov/transmission/variant-cases.html

In sum, the mutation getting the most traction here in the U.S. is the B.1.1.7 variant (also known as the U.K. variant). This variant is distinguished by its increased transmissibility (up to 50 time more easily spread) and by its tendency to inflict more substantial sickness (its mortality).

Currently (See map above), the States of Florida, California and Michigan have been most impacted. Given the extremely high transmissibility of this variant, CDC expects a substantial increase in these numbers, as well as a significant spread to other States.

As a consequence, the ILA~USMX Joint Safety Committee renews its strong recommendation to mask up, to make every attempt to stay socially distant, to practice circumspect hand washing, to disinfect equipment and workspaces often and to seek vaccination (at your own [informed] option; with the concurrence of your own health care provider).

Got a question about this particular subject? Write to the JSC at: <u>blueoceana@optonline.net</u>

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OSHALERT 2021-03 [18 March 2021]

COVID-19 & OSHA

A Prospective to Consider

An Executive Order signed by President Biden on 21 January 2021 directs the Secretary of Labor, acting through the Assistant Secretary of Labor for OSHA, to:

"(b) consider whether any emergency temporary standards on COVID-19, including with respect to masks¹ in the workplace, are necessary, and if such standards are determined to be necessary, issue them by <u>March 15, 2021;</u>" [Emphasis supplied]

We understand that the "drop dead date" of March 15, 2021 occurred three days ago and that OSHA has failed to timely respond to the literal direction of the foregoing paragraph within the Executive Order. We can conjecture as to why OSHA has not formally made its determination... but won't do so here.

One thing appears relatively certain: In the coming days, OSHA will likely make a determination that an emergency temporary standard (ETS) addressing potential COVID-19 workplace exposures is necessary. What will be included within any such ETS is presently a matter of some controversy and debate.

Earlier this year, however, OSHA published a document entitled, "Protecting Workers: Guidance on Mitigating and Preventing the Spread of COVID-19 in the Workplace." In that document, labor and management constituents of the ILA~USMX Joint Safety Committee have the opportunity to review what the agency's current thoughts may be with regard to potential regulatory avenues it may pursue.

We provide a link to that guidance here:

https://www.osha.gov/coronavirus/safework

Got a question about this particular subject? Write to the JSC at: <u>blueoceana@optonline.net</u>

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¹ The issue of mask wearing within seaport transportation hubs has been affirmatively decided by an Order issued by the Centers for Disease Control & Prevention last month. If OSHA mandates workplace mask wearing, however, all workplaces (including those workplaces within the 17 States that have no general mask wearing requirement) would be obliged to comply with the OSHA mandate.



Workers and Employers Want to Know

Q. Workers and employers have asked the ILA~USMX Joint Safety Committee (JSC): "If I've been fully vaccinated against COVID-19, do I need to observe the usual quarantine period if I happen to come into "close contact" with someone who turns out to be infected? [26 February 2021]

A. Based upon recent guidance offered by the U.S. Centers for Disease Control and Prevention (CDC), the JSC is pleased to report that those persons who have been fully vaccinated against COVID-19 can skip quarantine requirements if they've received the last of their vaccinations within the last three months <u>and</u> have shown no signs of infection.

A link to CDC's guidance of 11 February 2021 is provided here:

https://www.cdc.gov/coronavirus/2019-ncov/if-you-aresick/quarantine.html

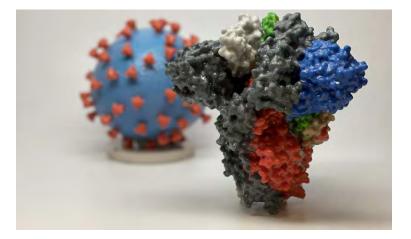
The section that provides the necessary clarification is set out here:

| Who needs to quarantine? | People who have been in <u>close contact</u> with someone who has COVID-19— excluding people who have had COVID-19 within the past 3 months. |
|-----------------------------|--|
| | People who have tested positive for COVID-19 within the past 3 months and recovered do not have to quarantine or get tested again as long as they do not develop new symptoms. |
| | People who develop symptoms again within 3 months of their first bout of COVID- 19 may need to be tested again if there is no other cause identified for their symptoms. |
| | People who have been in close contact with someone who has COVID-19 are not required to quarantine if they have been fully vaccinated against the disease within the last three months and show no symptoms. |

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OSHALERT 2021-01 [06 January 2021] COVID-19 MUTATIONS



Over the last few months, reports of the Novel Coronavirus' mutated forms have become more and more prominent. All viruses mutate in order to better adapt to their environment. Notably, mutated strains of the Novel Coronavirus initially found in the U.K. and South Africa are described as having spike proteins that are considerably enlarged and that more readily bind to human cell receptors (See *comparative illustrations, above*). That makes them much more transmissible (much more contagious) but not necessarily more lethal. The U.K. mutated strain has now been found in several U.S. States; it's likely that the South African strain (and perhaps others) will find its way here, as well.

The results: The mutated strain(s) will likely become more dominant and the rate of COVID-19 infections in our country [and in our industry] will likely rise as a consequence. The best means at our disposal to remain COVID-19 infection free continue to be:

- 1). Wearing a face covering (a mask);
- 2). Practicing effective social distancing;
- 3). Practicing effective hand washing/disinfection;
- 4). Keeping your hands away from your face & mouth; and
- 5). Taking the vaccine when it becomes available to you. [The FDA-

approved vaccines are considered to be effective against the mutated strains]

Got a question about this particular subject? Write to the JSC at: <u>blueoceana@optonline.net</u>

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Workers and Employers Want to Know

Q. Workers and employers have asked the ILA~USMX Joint Safety Committee (JSC): "Your last OSH Circular (2020-06) addressed the subject of "Heat Stress" and spoke of the mandatory wearing of face masks/respirators to mitigate potential Covid-19 infections. Are there any longshore crafts that may be given some relief from wearing face masks/respirators in particularly high heat/high humidity conditions?"

A. The short answer is "yes." JSC leadership are in agreement and can comfortably take the reasonable position that anyone working within the cab of a vehicle i.e., in isolation; not exposed to the respiratory droplets of other workers, may; in extreme high heat/high humidity conditions¹ dispense with the wearing of a face mask/respirator while so isolated².

With that relief, the JSC cautions that when it is necessary for such workers to interact in close contact³ with others it will become necessary for them to don their face mask/respirator for the complete timeframe of that interaction. Consequently, it will be imperative to have that protective equipment immediately available.

In providing this latitude, and in light of continuing spikes in the infection rates at several relevant geographical areas, the JSC is emphatic in continuing to require all workers to resist the temptation to drop your guard in the wearing of the necessary protection against Covid-19 infection. [22 June 2020]

[Being safe rather than being sorry has great meaning to our situation]

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¹ Operating inside a vehicle's air-conditioned cab is excluded from this policy relaxation.

² All vehicle cabs shall be disinfected after every shift change.

³ The term "close contact" means being within six feet of another worker. Should additional clarity be required, please be in touch with the ILA~USMX Joint Safety Committee at: <u>blueoceana@optonline.net</u>



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Occupational Safety and Health Administration

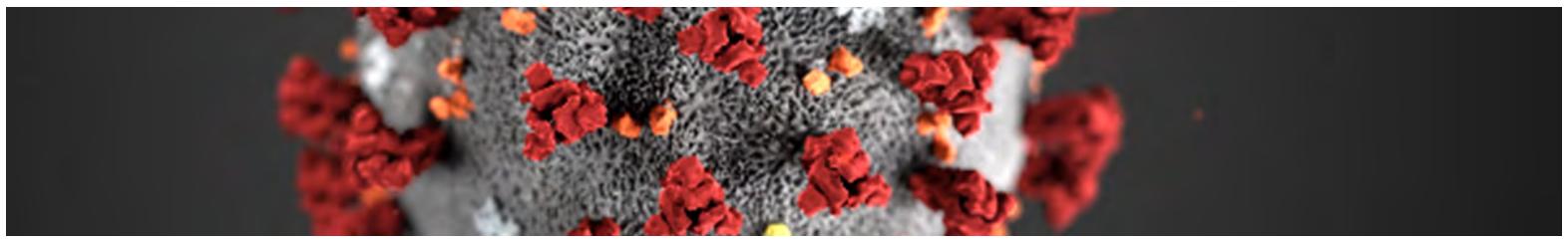
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Alert: Due to routine maintenance on the OSHA website, some pages may be temporarily unavailable. To report an emergency, file a complaint with OSHA or ask a safety and health question, call 1-800-321-6742 (OSHA).

Safety and Health Topics / COVID-19

COVID-19



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COVID-19 Frequently Asked Questions

This page includes frequently asked questions (FAQs) and answers related to the coronavirus disease 2019 (COVID-19) pandemic.

Cloth Face Coverings

What are the key differences between cloth face coverings, surgical masks, and respirators?

Are employers required to provide cloth face coverings to workers?

Should workers wear a cloth face covering while at work, in accordance with the Centers for Disease Control and Prevention recommendation for all people to do so when in public?

If workers wear cloth face coverings, do employers still need to ensure social distancing measures in the workplace?

Yes. Cloth face coverings are not a substitute for social distancing measures.

Workers' Rights

If I wear a reusable cloth face covering, how should I keep it clean?

Are surgical masks or cloth face coverings acceptable respiratory protection in the construction industry, when respirators would be needed but are not available because of the COVID-19 pandemic?

This guidance is not a standard or regulation, and it creates no new legal obligations. It contains recommendations as well as descriptions of mandatory safety and health standards. The recommendations are advisory in nature, informational in content, and are intended to assist employers in providing a safe and healthful workplace. The Occupational Safety and Health Act requires employers to comply with safety and health standards and regulations promulgated by OSHA or by a state with an OSHA-approved state plan. In addition, the Act's General Duty Clause, Section 5(a)(1), requires employers to provide their employees with a workplace free from recognized hazards likely to cause death or serious physical harm.



Occupational Safety and Health Administration 200 Constitution Ave NW Washington, DC 20210 \$\$800-321-6742 (OSHA) TTY www.OSHA.gov

FEDERAL GOVERNMENT

White House Severe Storm and Flood Recovery Assistance Disaster Recovery Assistance DisasterAssistance.gov USA.gov No Fear Act Data U.S. Office of Special Counsel

OCCUPATIONAL SAFETY AND HEALTH

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Workers and Employers Want to Know

Q. What's all this "stuff" about face masks? Do they work? How well?

A. It's important to know that all facemasks/respirators, if properly worn, will provide a given level of protection against transmitting and/or acquiring Covid-19 infection. On the waterfront, we typically see three different types of respiratory protection being worn for that purpose.

1). Surgical-Type Facemasks:



Surgical masks are disposable after a day's use, and with a reasonably good facial seal provide protection against both the transmission of virus particles and the (somewhat less effective) acquisition of virus particles. They come in a number of different designs, the most effective of which are the multi-layer type. In high demand markets, surgical mask designs are among the most readily obtainable.

2). Cloth Facemasks



Cloth facemasks are basic filtration facepieces that are reusable after light washing, and are among the most convenient of all means of respiratory protection. Some, like the one shown at left, are essentially "homemade" and, depending upon the type of materials used in their construction, offer varying degrees of affirmative protection. Cloth facemasks are becoming more and more obtainable online, even in high demand markets.

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Here are a few pointers for putting on and taking off a cloth mask:

- Place your mask over your mouth and nose.
- Tie it behind your head or use ear loops and make sure it's snug.
- Don't touch your mask while wearing it.
- If you accidentally touch your mask, wash or sanitize your hands.
- Remove the mask by untying it or lifting off the ear loops without touching the front of the mask or your face.
- Wash your hands immediately after removing your mask.
- Regularly wash your mask with soap and water in the washing machine. It's fine to launder it with other clothes.



3). N-95 Respirators:

N-95 (NIOSH 95%) respirators are also meant to be disposable, but with exemplary hygiene practices (given their current high market demand in medical and hospital settings), can be reused for short periods. Like any form of respiratory protection, their effectiveness is best when a good facial seal can be secured. In that light, it is important to ensure that both elastic straps are used.

The ILA~USMX Joint Safety Committee has devised a continuing series of useful publications that have particular relevance to the Covid-19 experience at our ports.

Please find them at the respective webpages of both ILA and USMX.

Here are the links to those webpages:

https://ilaunion.org/osh-circular/

https://www.usmx.com/resources/public/downloadable-safety-bulletins-andvarious-safety-resources

Please remember: Frequent handwashing/disinfection and social distancing also play crucial roles in limiting the spread of Covid-19!



Workers and Employers Want to Know

Q. Several of our constituent employers have asked the ILA~USMX Joint Safety Committee (JSC) questions similar to this one: "We've experienced a small number of workers who have tested positive for Covid-19. What are OSHA's recordkeeping requirements for these occupational illness cases?"

In most cases, OSHA will not enforce its recordkeeping rules that otherwise would have required all employers to make determinations as to whether "workers who contacted COVID-19 did so due to exposures at work." In sum, there is a limited exemption.....

OSHA did not retract its basic position that COVID-19 "is a recordable illness," which must be recorded as a work-related illness on OSHA 300 logs (or their equivalent) if: (1) the employee has a "confirmed case of COVID-19" based on at least one positive test for the virus; (2) the COVID-19 is "work-related," per 29 CFR § 1904.5, *i.e.*, the disease is contracted from exposure in the work environment; and (3) the case meets recording criteria, including a significant illness diagnosed by a healthcare professional or days away from work.

Instead, OSHA recognized that in areas with community-spread of the coronavirus, most employers "may have difficulty" making determinations that COVID-19 cases were due to exposures at work, so those employers would no longer have to affirmatively investigate whether the employee's COVID-19-positive diagnosis was work-related in order to avoid the risk of an OSHA enforcement action for a recordkeeping violation.

The agency's internal policy memorandum is anything but clear, but is nonetheless provided to the JSC's constituents through this link:

https://www.osha.gov/memos/2020-04-10/enforcement-guidance-recording-casescoronavirus-disease-2019-covid-19

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OSH ALERT 2020-10 [13 April 2020]

In the Covid-19 Environment, Properly Removing & Disposing of Your Respiratory PPE is Important!

Different germs and viruses can survive on a used mask for different periods of time. Experts feel that some viruses, when left exposed, can survive between a few hours and a few days. The ILA~USMX JSC requests that workers and employees not dispose of their used masks indiscriminately, as they can pose a potential health hazard to those who come in contact with them. Infected masks have respiratory secretions on them and can be dispersed and transmitted through the air. So, please be sensitive and respect yourselves and your fellow workers. Always wash your hands before and after taking off a mask. Employers should also be sensitive to providing adequate hand washing or disinfection alternatives for that purpose.

- Cloth masks (Wash) Should be properly washed and left to hang/air dry.
- Surgical masks (Fold, tie, wrap) Should be removed chin upwards, taking care to remove them using the ear loops/ strings. Be careful not to touch the front portion while taking off the mask. After taking the mask off, please fold it in half (inwards), such that droplets that have come from the mouth and nose are not exposed. Then, fold the mask into another half... until it looks like a roll. The mask can also be wrapped with its ear loops/strings, so that it will not unravel. Then, immediately discard the masks in a properly designated trash receptacle.
- N95 respirator When removing the respirator, hold the edge of the straps attached to the N95 facepiece. Don't touch the inside part of the respirator. Gently remove the mask so as not to spread contaminants on the mask. Place the mask in a plastic or zip-lock bag. You can also store them in a breathable container such as a paper bag between uses. Secure the bag tightly. Place the plastic bag into a properly designated trash receptacle. Never put on a new mask until you have washed or sanitized your hands.

Please Respect Yourself and Each Other: Do Not Litter

Got a question about this particular subject? Write to the JSC at: <u>blueoceana@optonline.net</u>

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OSHALERT 2020-09 [13 April 2020]

In the Covid-19 Environment, Properly Removing your Disposable Gloves is Important to Your Health:



 With both hands gloved, grasp the outside of one glove at the top of your wrist.



 Peel off this first glove, peeling away from your body and from wrist to fingertips, turning the glove inside out.



Hold the glove you just removed in your gloved hand.



 With your ungloved hand, peel off the second glove by inserting your fingers inside the glove at the top of your wrist.



 Turn the second glove inside out while tilting it away from your body, leaving the first glove inside the second.



 Wash your hands thoroughly with soap and water as soon as possible after removing the gloves and before touching any objects or surfaces.

AN .

 Dispose of the gloves following safe work procedures. Do not reuse the gloves.

Please Respect Yourself and Each Other: Do Not Litter

Got a question about this particular subject? Write to the JSC at: blueoceana@optonline.net

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OSH ALERT 2020-08 [10 April 2020]

ANALYSIS: New Guidance from CDC for Critical Infrastructure Workers Who May Have Been Exposed to COVID-19

As yesterday's JSC OSH Alert 2020-07 pointed out, the U.S. Centers for Disease Control & Prevention (CDC) have very recently published an *Interim Guidance* document meant to clarify what measures and/or protocols should be put in place when an employee is potentially exposed to COVID-19 infection through close contact.

In this analysis we explore the impact of CDC's new Interim Guidance, and in doing so importantly look to the first two paragraphs of that guidance which provides:

"To ensure continuity of operations of essential functions, CDC advises that critical infrastructure workers may be permitted to continue work following potential exposure to COVID-19, provided they remain asymptomatic and additional precautions are implemented to protect them and the community.

A potential exposure means being a household contact or having close contact within 6 feet of an individual with confirmed or suspected COVID-19. The timeframe for having contact with an individual includes the period of time of 48 hours before the individual became symptomatic."

The JSC can only interpret the first paragraph of CDC's interim guidance in its literal sense. That is, "*Critical Infrastructure Workers*" (such as longshore workers and those in allied crafts) can now (according to the *Interim Guidance*) be permitted to continue work (i.e., no quarantine or exclusion necessary) even after a potential exposure to COVID-19, <u>provided that</u> those potentially exposed employees continue to exhibit no symptoms of associated sickness going forward and that additional precautions (taking of body temperatures, wearing of facepiece masks, disinfecting workplace surfaces and the respect of social distancing) are undertaken.

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In relation to the meaning of "Potential exposure" within the second paragraph, CDC is remaining relatively consistent with its previous position. That is, by defining "close contact" as having been within 6 feet of an individual with confirmed or suspected COVID-19. What CDC has added to the equation here, is the recognition and inclusion of potential "household contact." In our view, potential exposures brought about by normal interaction between individuals in a domestic setting are now being brought into the equation... and essentially being given a pass; with the caveat that once any symptoms are being experienced all bets are off and the worker is sent home.

After analysis, the JSC is not happy with what it sees in the newly issued Interim Guidance.

The Joint Safety Committee would like each of its waterfront constituents to understand; as clearly as possible, that neither ILA nor USMX are pleased with the confusion that's been created by CDC's new Interim Guidance.

Notwithstanding, both ILA and USMX are committed to ensure the continued uninterrupted flow of imports and exports through our ports.

In that light, ILA and USMX have adopted a policy dealing with many of the workplace Covid-19 issues that may arise. Those agreed upon terms have now been adopted for use at all Master Contract ports, and ILA and USMX will stand by those accords, notwithstanding the CDC's new Interim Guidance.

Specifically, <u>none</u> of the provisions agreed upon by ILA and USMX would be permissive of allowing any worker who had been exposed to an active COVID-19 infection to come to work without adhering to a requisite isolation/restoring of health period first. So, despite what the government is now apparently allowing.... We won't be going there...

Here's a link to the agreed upon policy, applicable throughout the range of Master Contract ports:

https://documentcloud.adobe.com/link/review?uri=urn%3Aaaid%3Ascds%3AUS%3A0e6b766d-2e6b-4d01-b4bd-26fb8fb73e7d

In sum, The JSC wants you to know that it's the U.S. government (with this new CDC Interim Guidance) that is advocating the foregoing form of unwise permissiveness. It is our private sense that the Interim Guidance is decidedly anti-worker (in an administration that shows its animus to workers in an almost non-stop fashion) and simply represents another ironic attack on individuals (workers and managers) who have been asked to provide extraordinary service to the country; in extraordinary times.

We need to enhance Covid-19 workplace safety protections for each of our management and labor constituents; not erode them! [10 April 2020]



OSHALERT 2020-07 [09 April 2020]

New Guidance from CDC for Workers Who May Have Been Exposed to COVIC-19 Via "Close Contact"

Interim Guidance for Implementing Safety Practices for Critical Infrastructure Workers Who May Have Had Exposure to a Person with Suspected or Confirmed COVID-19

To ensure continuity of operations of essential functions, CDC advises that critical infrastructure workers may be permitted to continue work following potential exposure to COVID-19, provided they remain asymptomatic and additional precautions are implemented to protect them and the community.

A potential exposure means being a household contact or having close contact within 6 feet of an individual with confirmed or suspected COVID-19. The timeframe for having contact with an individual includes the period of time of 48 hours before the individual became symptomatic.

Critical Infrastructure workers who have had an exposure but remain asymptomatic should adhere to the following practices prior to and during their work shift:

- Pre-Screen: Employers should measure the employee's temperature and assess symptoms prior to them starting work. Ideally, temperature checks should happen before the individual enters the facility.
- Regular Monitoring: As long as the employee doesn't have a temperature or symptoms, they should self-monitor under the supervision of their employer's occupational health program.
- Wear a Mask: The employee should wear a face mask at all times while in the workplace for 14 days after last exposure. Employers can issue facemasks or can approve employees' supplied cloth face coverings in the event of shortages.
- Social Distance: The employee should maintain 6 feet and practice social distancing as work duties permit in the workplace.
- Disinfect and Clean work spaces: Clean and disinfect all areas such as offices, bathrooms, common areas, shared electronic equipment routinely.

If the employee becomes sick during the day, they should be sent home immediately. Surfaces in their workspace should be cleaned and disinfected. Information on persons who had contact with the ill employee during the time the employee had symptoms and 2 days prior to symptoms should be compiled. Others at the facility with close contact within 6 feet of the employee during this time would be considered exposed.

Employers should implement the recommendations in the Interim Guidance for Businesses and Employers to Plan and Respond to Coronavirus Disease 2019 to help prevent and slow the spread of COVID-19 in the workplace. Additional information about identifying critical infrastructure during COVID-19 can be found on the DHS CISA website or the CDC's specific First Responder Guidance page.

INTERIM GUIDANCE

- This interim guidance pertains to critical infrastructure workers, including personnel in 16 different sectors of work including:
- ► Federal, state, & local law enforcement
- 911 call center employees
- Fusion Center employees
- Hazardous material responders from government and the private sector
- Janitorial staff and other custodial staff
- Workers including contracted vendors in food and agriculture, critical manufacturing, informational technology, transportation, energy and government facilities

ADDITIONAL CONSIDERATIONS

- Employees should not share headsets or other objects that are near mouth or nose.
- Employers should increase the frequency of cleaning commonly touched surfaces.
- Employees and employers should consider pilot testing the use of face masks to ensure they do not interfere with work assignments.
- Employers should work with facility maintenance staff to increase air exchanges in room.
- Employees should physically distance when they take breaks together. Stagger breaks and don't congregate in the break room, and don't share food or utensils.



Got a question about this particular subject? Write to the JSC at: <u>blueoceana@optonline.net</u>

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ILA-USMX JOINT SAFETY COMMITTEE

OSH ALERT 2020-06 [29 March 2020]



In guarding against Coronavirus, the greatest protection you can afford yourself and your family is observing a mandatory 6 foot distance between yourself and anyone else sharing your workplace.

Easier said than done? Perhaps, but worth the effort every time.....

Centers for Disease Control & Prevention (CDC): https://www.cdc.gov/coronavirus/2019-ncov/index.html

World Health Organization (WHO) https://www.who.int/emergencies/diseases/novel-coronavirus-2019

Got a question about this particular subject? Write to the JSC at: blueoceana@optonline.net

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Workers and Employers Want to Know

Q. Workers and employers have asked the ILA~USMX Joint Safety Committee (JSC): "As the availability of Coronavirus test kits rise, and more positive tests results become inevitable, what is the process we must follow in the aftermath of worker's/employee's positive test?

A. Once an employer has direct knowledge that an employee has tested positive for the Coronavirus, the following guidance is offered:

1). Contact the relevant local health agency and disinfect the work area(s) normally occupied by the infected employee;

2). Inform potentially exposed employees (those typically in contact with the infected worker) without mentioning the infected worker's name;

3). Within the parameters offered by the relevant collective bargaining agreement and by applicable (and evolving) Federal & State laws and regulations, promptly sort out and implement the proper means and methods available for granting leave (paid, subsidized or otherwise) from work;

4). Maintain absolute confidentiality. Several Federal laws impose strict confidentiality requirements in re a CoVid-19 employees' symptoms, test results, treatments, etc.; and

5). Carefully manage return to work certifications. Once an employee has recovered from a Coronavirus infection and is well, it is important to verify his/her recovery so as not to potentially endanger other, uninfected employees on a return to work. To that extent, a note/certification from a licensed health care profession would serve that purpose. Given the workload being imposed upon those health care providers during the current Coronavirus crisis, however, acquiring timely return to work notes/certifications may be problematic. Both CDC and OSHA have encouraged "Alternative" certifications, where possible. We're confident that our industry can be inventive enough to arrive at a suitable and fully protective "Alternative" certification. [21 March 2020]

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Workers and Employers Want to Know

Q. Workers and employers have asked the ILA~USMX Joint Safety Committee (JSC): "If a worker or manager, acting in good faith, reports for work and is subsequently found to be sick... should that worker or manager be required to absent himself/herself from the workplace in order to be isolated, tested and (if necessary) treated?"

A. Given the current pandemic status of the Novel Coronavirus, the JSC's guidance in such a matter must be provided in a manner that preserves the health and safety of as many ILA members and management representatives as possible.

In order to flatten the infection curve being experienced nationally, the JSC must recommend that sick workers and managers should be required to absent themselves (voluntarily or through direct order) so that other workers and managers who are not ill may be spared the risks of being infected with the Novel Coronavirus.

We make that recommendation with the full understanding that a certain degree of potentially negative financial impact may be present for individuals who are required to absent themselves, but also that Federal legislation currently includes provisions that will substantially soften that impact. Moreover, in speaking with industry employers we're made to understand that there is a prevailing sentiment that no worker or manager should be unduly impacted when engaged in an effort designed to protect our industry and the health and safety of the people who make it work.

The JSC provides the foregoing guidance after very careful consideration, and with the overriding goal of preserving the health and safety of as many ILA members and management representatives as possible in these very challenging times. [19 March 2020]

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Workers and Employers Want to Know

Q. Workers and employers have asked the ILA~USMX Joint Safety Committee (JSC): "If a worker or manager, acting in good faith, reports for work and is subsequently found to be sick... and should that worker present himself/herself for work in a similarly unwell condition soon afterward, is it permissible for the employer to allow the apparently sick worker entrance to a workplace populated by fellow workers who are in apparent good health?"

A. No, for several reasons. In these times, it would be wrong to permit an apparently unwell employee access into a workplace populated with fellow employees who are in apparent good health.

<u>First</u>, allowing sick workers who are potentially infected with any easily transmittable disease into the same work environment shared with workers who are well is morally repugnant and medically very ill advised.

<u>Next</u>, employers permitting workers who are ill with potentially infectious and easily communicable diseases to share the same workplace with workers who are in apparent good health is, according to OSHA, *illegal*. OSHA has recently announced that the OSHA law's General Duty Clause (§5 (a)(1)) has application in circumstances where an employer knowingly allows a worker to be exposed to a transmittable disease being carried by another worker.

In sum, if you're a worker or manager who's ill, do yourself, your fellow workers and your industry a big favor and stay home until you're well. Consult with your own health care provider; have him/her document your ability to return to work... we'll wait for you.

Moreover, given a Federal law passed by the U.S. Senate just yesterday, any negative financial impact arising from a worker being sidelined owing to a potential communicable disease it appears that such negative impact will be substantially moderated. Also, in many cases, there are disability pay potentials. [19 March 2020]

Working Together For The Benefit Of All



Workers and Employers Want to Know

Q. Workers and employers have asked the ILA~USMX Joint Safety Committee (JSC): "In terms of disinfecting equipment used by ILA workers and management representatives, what actually needs to be done in order to decrease the potential for virus transmission?"

A. There are several effective methods that may be used to kill viruses which may be present within the various types of equipment commonly used at marine terminals. Conduct one such method after or before each shift change.

The most basic method is through the use of a commercial, disinfectantsaturated wipe/cloth¹. An impermeable-gloved hand simply wipes down all (clean) surface areas within the cab of the equipment. Once the wipe down is concluded, the wipe/cloth and the glove are properly disposed of and use of the equipment may then commence. Wash hands once you're done.

Another method is through the use of hand-held, industrial "foggers." These self-contained devices are loaded with one of the EPA-approved solutions², which is then distributed inside the equipment's cab through a fine mist. Use gloves and a simple respirator to apply; wash hands once you're done. [19 March 2020]





Above left: Examples of disinfectant wipes.

Above right: Commercial fogger in use.

¹ Any of the commercial Alcohol, Chlorine or Hydrogen Peroxide-based products are suitable. ² <u>https://www.epa.gov/pesticide-registration/list-n-disinfectants-use-against-sars-cov-2</u>

Working Together For The Benefit Of All

Recently, the ILA~USMX Joint Safety Committee (JSC) has published several OSH Alerts that supply information in relation to our industry's experience with the Novel Coronavirus.

Those JSC OSH Alerts contain online hyperlinks to the U.S. Centers for Disease Control & Prevention and World Health Organizations' dedicated Novel Coronavirus webpages. Those webpages are updated daily, and provide an excellent source of information and guidance. We encourage our labor and management constituents to review them often.

Today, we have been asked to provide general guidance for our industry constituents in the form of bullet points which set out our principal precautionary recommendations in relation to the Novel Coronavirus pandemic.

We hope that you find them informative, and convenient to reproduce and distribute.



ILA-USMX JOINT SAFETY COMMITTEE

The Novel Coronavirus:

What to Do; What Not to Do

1). Wash hands frequently and completely;

2). No handshaking (Use your elbows);

3). Keep your hands away from your face;

4). Practice social distancing (Keep six feet between you and the next guy/gal);

5). Stay well clear of all others who appear to be ill (sneezing/coughing);

6). Keep hiring, meeting and close quarters equipment locations/spaces clean and regularly disinfected;

7). On the job: Wear the required personal protective equipment; *and*

8). Monitor and follow National, State & Local government directions designed to inhibit community spread

Working Together For The Benefit Of All

U.S. COAST GUARD MARINE SAFETY INFORMATION BULLETIN (March 13, 2020)

Consistent with the advice the ILA~USMX Joint Safety Committee has been providing its labor and management stakeholders, the United States has some very strict laws and regulations which mandate that the Master of any ship bound for a U.S. port must provide notice to the relevant USCG Captain of the Port and to the relevant Centers for Disease Control & Prevention quarantine station, in the event of any death or illness aboard their vessel.

On Friday (13 March) the U.S. Coast Guard reminded all affected persons of that fact in the form of Bulletin broadcast widely. You may access the Bulletin below.

For longshore workers the mandatory notice requirement is their first line of defense against crew member-acquired Novel Coronavirus, in that it provides a mechanism wherein a vessel's mandatory self-reporting effectively takes an infected crew member out of the transmission equation.

Everything else we do to supplement our well-being is additive; just in case.

We hope this information is helpful, and provides a level of comparative comfort that we all deserve.



Marine Safety Information Bulletin

Commandant U.S. Coast Guard Inspections and Compliance Directorate 2703 Martin Luther King Jr Ave SE, STOP 7501 Washington, DC 20593-7501

MSIB Number: 06-20 Date: March 13, 2020

E-Mail: OutbreakQuestions@uscg.mil

Vessel Reporting Requirements for Illness or Death

An outbreak of respiratory illness caused by novel coronavirus (COVID-19) is affecting mariners and maritime commerce. This MSIB serves as a reminder that the illness of persons on board a vessel must be reported to <u>both</u> the Coast Guard and the Centers for Disease Control and Prevention (CDC). Reporting delays create significant challenges to protect persons on board vessels and, more broadly, maintain an effective Marine Transportation System. Vessels or masters that do not immediately report illness or death among passengers or crew may face delays and disruption to passenger and cargo operations including a requirement to return to the previous port after sailing. Additionally, vessels and masters are subject to Coast Guard enforcement action, which include civil penalties, vessel detentions, and criminal liability.

Illness of a person onboard a vessel that may adversely affect the safety of a vessel or port is a hazardous condition per 33 CFR 160.216 and the owner, agent, master, operator, or person in charge *must immediately* notify the nearest Coast Guard Captain of the Port (COTP). It is critical to report persons who exhibit symptoms consistent with COVID-19 or other illness to the COTP.

42 CFR 71.1 defines an ill person onboard a vessels as one that has:

(A) Fever (has a measured temperature of 100.4 °F [38 °C] or greater; or feels warm to the touch; or gives a history of feeling feverish) accompanied by one or more of the following:

- o skin rash,
- o **difficulty breathing** or suspected or confirmed pneumonia,
- **persistent cough** or cough with bloody sputum,
- o decreased consciousness or confusion of recent onset,
- new unexplained bruising or bleeding (without previous injury),
- persistent vomiting (other than sea sickness)
- headache with stiff neck;

(B) Fever that has persisted for more than 48 hours;

(C) Acute gastroenteritis, which means either:

- diarrhea, defined as three or more episodes of loose stools in a 24-hour period or what is above normal for the individual, or
- vomiting accompanied by one or more of the following: one or more episodes of loose stools in a 24-hour period, abdominal cramps, headache, muscle aches, or fever (temperature of 100.4 °F [38 °C] or greater);

Additionally, as required by <u>42 CFR 71.21</u>, the master of a ship destined for a U.S. port shall report *immediately* to the quarantine station at or nearest the port at which the ship will arrive, the occurrence, on board, of any death or any ill person among passengers or crew (including those who have disembarked or have been removed) during the 15-day period preceding the date of expected arrival or during the period since departure from a U.S. port (whichever period of time is shorter). Guidance and forms to report deaths and illnesses to the CDC can be found at: <u>https://go.usa.gov/xdjmj</u>.

Richard Timme, RDML, U.S. Coast Guard, Assistant Commandant for Prevention Policy sends.

10-March-2020



ILA-USMX JOINT SAFETY COMMITTEE

JOINT STATEMENT ON COVID-19 BY USMX-ILA LEADERS

RELEASED MARCH 10, 2020

USMX and ILA Leaders Direct Their Safety Committee To Advise Members On Protections Against Coronavirus

NORTH BERGEN, NJ – (March 10, 2020) At the direction of David F. Adam, Chairman and Chief Executive Officer, United States Maritime Alliance, Ltd., and Harold J. Daggett, International President, International Longshoremen's Association, AFL-CIO, the ILA-USMX Joint Safety Committee issued new safety guidelines to protect ILA members and employers against potential risks posed by Coronavirus-infected crewmembers/passengers that may be present in the shipboard workplace.

"We want to make sure everyone working in our industry – from ILA members to employers – are protected against exposure to Coronavirus disease (COVID-19)" said Mr. Adam and Mr. Daggett in a joint statement. "We have directed our ILA-USMX Joint Safety Committee to monitor the situation daily and to devise pro-active policies to keep everyone safe.

U.S. Coastguard and CDC protocols direct the master of a ship destined for a U.S. port to report immediately to the quarantine station at or nearest the port at which the ship will arrive, to report the occurrence, on board, of any death or any ill person among passengers or crew (including those who have disembarked or have been removed) during the 15-day period preceding the date of the ship's expected arrival or during the period since departure from a U.S. port (whichever period of time is shorter.)

The ILA-USMX Joint Safety Committee is making two recommendations:

- That ILA workers and members of management avoid close contact (closer than six feet) with any crew members or passengers who appear to be ill (coughing, sneezing, etc.); and
- That those ILA and management workers obliged to serve aboard passenger vessels be provided with properly fitted NIOSH-approved filtering masks and impermeable gloves.

"The ILA and USMX encourage all our members to continue to visit the websites of the Centers for Disease Control and Prevention (<u>https://www.cdc.gov/coronavirus/2019-ncov/index.html</u>) and the World Heath Organization

(https://www.who.int/emergencies/diseases/novel-coronavirus-2019)

The United States Maritime Alliance, Ltd. (USMX) represents employers of the East and Gulf Coast longshore industry. Membership consists of Container Carriers, including the largest carriers and carrier alliances worldwide, all major Marine Terminal Operators, and Port Associations representing each port on the East and Gulf Coasts. USMX's members are responsible for the transportation and handling of cargo shipped to and from the United States.

The International Longshoremen's Association, AFL-CIO represents 65,000-members working at Atlantic and Gulf Coasts from Maine to Texas; U.S. and Canadian Great Lakes ports; Eastern Canadian Maritime Provinces; major U.S. Rivers and Puerto Rico.

(A copy of the ILA-USMX Joint Safety Committee report is included in this release).

For additional information, contact Jim McNamara at ILA 212-425-1200, ext. 307 <u>jmcnamara@ilaunion.org</u> or Beth Monica at USMX 732-404-2965 <u>bmonica@usmx.com</u>



OSH ALERT 2020-05 [10 March 2020] More on the Novel Coronavirus

The ILA~USMX Joint Safety Committee (JSC) continues to receive inquiries regarding the manner in which industry labor and management constituents may become aware of any potential risks posed by Coronavirus-infected crewmembers/passengers that may be present within the shipboard workplace.

As a threshold matter, all of us should understand that <u>in the event of any crew</u> <u>member/passenger death or illness</u>, U.S. law and regulation require ship Masters to provide advance notice to the relevant U.S. Centers for Disease Control & Prevention quarantine station, Penalties for failing to report are sizable. The regulation appears in this form:

§ 71.21 Report of death or illness.

(a) The master of a ship destined for a U.S. port shall report immediately to the <u>quarantine</u> station at or nearest the port at which the ship will arrive, the occurrence, on board, of any death or any <u>ill person</u> among passengers or crew (including those who have disembarked or have been removed) during the 15-day period preceding the date of expected arrival or during the period since departure from a U.S. port (whichever period of time is shorter).

Notwithstanding; out of an abundance of caution, the JSC recommends the following:

1). That ILA workers and members of management avoid close contact (closer than 6 feet) with any crewmembers or passengers who appear to be ill (coughing, sneezing, etc.); and

2). That those ILA and management workers obliged to serve aboard passenger vessels be provided with properly fitted NIOSH-approved filtering facemasks and impermeable gloves;

Consistent with previous advice, we continue to provide extremely informative links to the relevant CDC and WHO websites. They provide excellent guidance:

Centers for Disease Control & Prevention (CDC): <u>https://www.cdc.gov/coronavirus/2019-ncov/index.html</u>

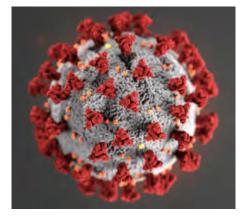
World Health Organization (WHO) https://www.who.int/emergencies/diseases/novel-coronavirus-2019

Got a question about this particular subject? Write to the JSC at: <u>blueoceana@optonline.net</u>

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OSH ALERT 2020-04 [25 February 2020] The "Novel Coronavirus" Update



Since the publication of ILA~USMX Joint Safety Committee OSH Alert 2020-03 (27 January 2020), the U.S. experience with the Novel Coronavirus has not changed in any substantial way. Currently (as of yesterday; reported by the U.S. Centers for Disease Control and Prevention), there have been 14 confirmed cases documented in the U.S. On review, none of those cases have any connection to commercial or passenger ocean shipping. And while that's relatively good news, our sense is that we're not out of the woods just yet.

For that reason, we continue to actively monitor all available resources in our ongoing assessment of potential risk to our labor and management constituents.

Two important resources we use (of many), are the U.S. Centers for Disease Control and the World Health Organization. Both organizations have webpages that are exclusively devoted to provide accurate and timely information to those seeking to maintain a protective, up-to-date posture.

We'd like to share access to those websites with all persons and organizations receiving our OSH Alerts, and for that purpose provide the relevant links here:

Centers for Disease Control & Prevention (CDC): <u>https://www.cdc.gov/coronavirus/2019-ncov/index.html</u>

World Health Organization (WHO) <u>https://www.who.int/emergencies/diseases/novel-coronavirus-2019</u>

Got a question about this particular subject? Write to the JSC at: <u>blueoceana@optonline.net</u>

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OSHALERT 2020-03 [27 January 2020] The "Novel Coronavirus"



Countries with Confirmed Cases to Date

As the ILA~USMX Joint Safety Committee begins to develop this OSH Alert, we are aware of five (5) confirmed cases of the Coronavirus presently on U.S. soil. We are also aware of the situation on the ground at Wuhan Province, China (inclusive of Wuhan port), wherein thousands of confirmed cases have been established. The situation there is extremely serious.

At present, the U.S. Centers for Disease Control (CDC) has implemented detection activities (passenger screening) at several U.S. airports. That's wise, inasmuch as the threat of importation there is quite significant in terms of numbers. As yet, similar measures have not yet been implemented at U.S. seaports where the importation threat is less numerically severe.

The U.S. Maritime Administration and local Port Authorities are, however, monitoring unfolding circumstances very carefully.

At present we would like to provide our management and labor stakeholders with access to CDC's increasingly active Coronavirus webpage, which provides an amazingly complete amount of information about this threat:

https://www.cdc.gov/coronavirus/2019-ncov/index.html

Our best (conservative) advice: Continue to monitor the CDC webpage for updates. Also, port workers/managers obliged to interact with ship's personnel aboard a vessel that called at Wuhan port, China recently, should wear a simple filtration facemask (in line with manufacturer's recommendations) during that interaction and avoid direct (skin to skin) contact.

Got a question about this particular subject? Write to the JSC at: <u>blueoceana@optonline.net</u>

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