



A Union of Professionals

AFT Higher Education

COVID-19—How to Be Prepared

Bulletin for Higher Ed Faculty and Staff

February 24, 2020

We are monitoring the new coronavirus outbreak. The virus is now called SARS-CoV-2 and the illness is called COVID-19. We are committed to providing AFT locals and affiliates with the information needed to protect our members and the communities they serve.

The number of cases and deaths worldwide continues to climb, particularly in mainland China. We do not have community spread of COVID-19 in the United States. The illness is mild in roughly 80 percent of the cases, but can be severe in older persons and in those with underlying medical conditions. The Centers for Disease Control and Prevention anticipates that we will have community spread at some point. It is critical that we seize this window of opportunity to prepare to protect ourselves and our communities against COVID-19.

Any effort that we take to prevent the spread of infectious disease is important. The CDC estimates that 31 million Americans have had influenza this season and at least 12,000 people in the United States have died from flu between Oct. 1, 2019, and Feb. 1, 2020.

Symptoms and Transmission

- COVID-19 symptoms include fever and lower respiratory illness—coughing, difficulty breathing and pneumonia.
- It appears that COVID-19 is more prevalent in adults than children. Elderly people and those with predisposing conditions are more vulnerable to the viral illness.
- The SARS-CoV-2 can be transmitted through inhalation of airborne infectious matter, through splashes from coughs onto mucous membranes, and by touching objects contaminated by splashes and then touching the nose, mouth or eyes.
- Thus far, COVID-19 has not been associated with upper respiratory symptoms—runny noses and sneezing.

Public Health Response

- The CDC and the World Health Organization are working to control the spread of the illness and to develop anti-viral treatments and a vaccine through isolation and by tracing the contacts infected people have had.
- The CDC is warning against all nonessential travel to China, and the U.S. State Department has increased its advisory for China to Level 4: Do Not Travel.

The **American Federation of Teachers** is a union of professionals that champions fairness; democracy; economic opportunity; and high-quality public education, healthcare and public services for our students, their families and our communities. We are committed to advancing these principles through community engagement, organizing, collective bargaining and political activism, and especially through the work our members do.

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- Researchers suspect that the SARS-CoV-2 is easily transmitted. It has been confirmed that infected people can transmit before they exhibit symptoms.
- The CDC has developed a test used to diagnose patients and has sent testing kits to 200 labs within the United States and to 200 international labs.
- Negative test results do not guarantee that a person is not infected. The CDC warns that patients' symptoms and histories must be considered in addition to the test results.

Infection Control in Higher Ed Settings

Now is a good time for higher education institutions to review and evaluate their current infection control practices. If employers follow evidence-based guidance from the Centers for Disease Control and Prevention, the risk of exposure to COVID-19 and other droplet/airborne diseases will be significantly reduced.

Universities should evaluate general dilution ventilation in campus buildings to make sure that heating, ventilation and air conditioning (HVAC) systems deliver adequate fresh air to work areas and campus housing. Good indoor air quality can dilute the concentration of infectious viral droplets and aerosols and thus reduce the risks of infection.

Communications to students and staff are critical to keep everyone apprised of the nature of the disease outbreak. Communications help prevent misinformation, profiling and stigmatization.

For more information about preventing the spread of COVID-19, see <https://www.cdc.gov/coronavirus/2019-ncov/about/prevention-treatment.html>.

Role of the Union in Protecting Members and Community

Unions have a key role in defending members' rights to be protected from COVID-19 and other infectious diseases such as seasonal flu. Local leaders can make information requests and demand to bargain on infection control plans and the location and supply of personal protective equipment, like gloves. For more information, see https://www.aft.org/sites/default/files/coronavirus_info_request_local_leaders.pdf.

Recommendations for Site-Specific Facility Planning and Preparation

Colleges and universities should adopt measures to reduce infection spread on campus through a site-specific plan. Those involved in the development of such a plan should include managers with decision-making authority, union representatives, health and safety activists, health services staff, housekeeping and administrative units. The number and job descriptions of people assigned will depend on the size and scope of the facility. The plan should address the following activities, along with any others that may be required by oversight agencies:

1. Assessing risk to students and employees.
2. Education and training for employees and students.
3. Facility readiness: signage, supplies and staffing.
4. Housekeeping.

The plan should assess needs, decide how the facility will implement the activities, and identify resources for handling a student who presents with symptoms suspicious for COVID-19. Regular meetings should be held to report the status of preparations and CDC updates.

Assessing the Risk to Students and Employees and Measures to Maintain Their Health

The plan should assess the potential exposure risks for all facility employees and students, including those who live in university housing.

- Consider staff who provide healthcare, sanitation or services that require prolonged close contact.
- Review the sick leave policy and encourage staff and students to stay home while ill. Encourage faculty to adapt their attendance policies for students.
- Provide guidance to students and staff living in university housing on infection control practices and the availability of campus health facilities.
- Consider offering influenza vaccinations on campus.

Self-Quarantining for People Who Have Traveled in China within the Last 14 Days

People identified at highest risk of developing COVID-19 are monitored by federal, state and/or local public health officials. Universities should excuse students and staff from class and or work if they are required to self-quarantine. The quarantine is voluntary, and currently there is no guidance from state or federal officials regarding enforcement by colleges or universities of the self-quarantine guidance.

Wearing Masks

Currently, the CDC does not recommend facemasks for the general public outside of healthcare settings. Wearing masks when ill is common in many countries, and individuals should exercise their own discretion in their use. Administration, staff and other students should respect those that decide to wear protective masks. Masks are worn for many reasons, and no one should be harassed or targeted because they chose to use them.

Student Health Centers

For student health centers, it is recommended that they follow the standard environmental infection control procedures for healthcare settings found at <https://www.cdc.gov/coronavirus/2019-nCoV/hcp/index.html>. When students complain of illness, health center staff should ask about recent travel to China. Post signs that promote standard hygiene practices, such as:

- Washing hands often with soap and water for 20 seconds.
- Using an alcohol-based hand sanitizer if soap and water are not on hand.
- Covering the nose and mouth with an elbow or tissue when coughing or sneezing.
- Avoiding touching eyes, nose and mouth.
- Limiting close contact with people who are sick.

CDC-Recommended Strategies

Actively encourage sick students and employees to stay home:

- Employees (including subcontracted workers and adjuncts) who have symptoms of acute respiratory illness are recommended to stay home and not come to work until they are free of fever (100.4 degrees Fahrenheit/37.8 degrees Celsius or greater using an oral thermometer), signs of a fever and any other symptoms for at least 24 hours. Employees should notify their supervisor and stay home if they are sick.
- Ensure that university sick leave policies are flexible and consistent with public health guidance and that employees and adjuncts are aware of these policies. They should be encouraged and not penalized for staying home when sick, including providing paid leave.
- Require contractors employing people who work on campus to provide non-punitive, paid sick leave for all of their workers. This includes subcontracted custodial, food service and other operations staff. These workers are vulnerable to pressure to work while sick. The nature of their work places them at higher risk of contracting and spreading infectious diseases.
- 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 not able to provide such documentation in a timely way.
- Employers should maintain flexible policies that permit employees to stay home to care for a sick family member. Employers should be aware that more employees may need to stay at home to care for sick children or other sick family members than is usual.

Separate sick employees:

- The CDC recommends that employees who appear to have acute respiratory illness symptoms (e.g., cough or shortness of breath) upon arrival to work or become sick during the day should be separated from other employees and be sent home immediately. Sick employees should cover their noses and mouths with a tissue when coughing or sneezing (or an elbow or shoulder if no tissue is available).

Educate staff and students about best infection control practices:

- Place posters that encourage [staying home when sick](#), [cough and sneeze etiquette](#) and [hand hygiene](#) at the entrance to your workplace and in other workplace areas where they are likely to be seen.
- Provide tissues and no-touch disposal receptacles for use by employees.
- Instruct employees to clean their hands often with an alcohol-based hand sanitizer that contains at least 60-95 percent alcohol, or wash their hands with soap and water for at least 20 seconds. Soap and water should be used preferentially if hands are visibly dirty.
- Provide soap and water and alcohol-based hand sanitizer. Ensure that adequate supplies are maintained. Place sanitizer in multiple locations.
- Perform routine environmental cleaning:
- Routinely clean all frequently touched surfaces in the workplace, such as workstations, countertops and

doorknobs. Use the cleaning agents that are usually used in these areas and follow the directions on the label.

- No additional disinfection beyond routine cleaning is recommended at this time.

Provide disposable wipes so that commonly used surfaces (e.g., doorknobs, keyboards, remote controls and desks) can be wiped down by employees before each use.

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