Reopening: Guidance for Transit Systems (Buses, Subways, and Light Rails)
Overview

This document is intended to provide guidance for the continuing operation of transit systems, specifically buses, subway systems, and light rails. Various modes of transit have continued operation throughout the pandemic, albeit in a limited capacity, due to the public’s need for transportation. To get closer to normal operations, and to limit the spread of COVID-19, transit agencies are encouraged to continue implementing controls, including physical distancing, face coverings, and increased disinfection. This guidance applies to the vehicles in transit systems (buses, subways, and light rails), as well as the transit system stations and stops. This guidance is relevant to transit employees (operators of the vehicles, employees who work at the stations, maintenance, and cleaning employees) in addition to passengers.

As many individuals prepare to return to work or school, or generally increase their use of public transportation to get to their destinations, the employers and managers of transit systems will likely have many questions that include, but are not limited to:

- How can transit agencies protect the health and safety of their transit employees and passengers from COVID-19 during passenger transport?
- What do we do if a transit employee tests positive for or is suspected to have developed COVID-19?
- What do we do when transit vehicles are returned to their hubs at the end of a shift?
- How do we assure all stakeholders that we are doing all we can to prevent the spread of disease?

SARS-CoV-2, the virus that causes COVID-19, is thought to be spread primarily through aerosolized respiratory droplets at close range. Airborne transmission from exposure to very small droplets over long distances is unlikely. However, there is evidence that this mode of transmission is possible, particularly in crowded, indoor spaces. People may also become infected by touching contaminated surfaces. The virus has been shown to survive in aerosols for hours and on surfaces for days. Infection can occur through eyes, nose, and mouth exposures. There is also strong evidence that people can spread the virus while pre-symptomatic or asymptomatic.

The purpose of this guidance is to provide clear and actionable steps towards the safe operations of public transportation systems through prevention, early detection, and control of COVID-19. It is important that transit agencies consistently monitor and evaluate the effectiveness of the implemented mitigation strategies and alter their approach as needed.

The following document addresses aspects of transit systems (buses, light rails, and subway systems) which have not been previously evaluated in other AIHA Guidance documents. Please refer to the Resources section below for links to AIHA Guidance documents concerning ride sharing and others that may be associated with public transportation, including offices and construction work.

What actions should Transit Agencies, Employers, or Managers take to protect employees and passengers during passenger transport?

Transit agencies should continually monitor global (World Health Organization [WHO]), federal (Centers for Disease Control [CDC] and Occupational Safety and Health Administration [OSHA]), state, and local guidelines for changes in recommendations, disinfection strategies, worker protections and other best management practices. At a minimum, transit agencies should follow the CDC Mass Transit Decision Tool for questions to consider regarding the reopening of mass transit during COVID-19. Employers or managers should seek...
guidance from regional, national, and international leaders regarding health policies and best practices. They should consider forming a knowledgeable team to monitor, assess, and implement new strategies as they become available. In addition, employers or managers in transit agencies should consider the following strategies for reducing the risk of COVID-19 transmission in regards to physical distancing strategies, enhanced cleaning practices, training, and risk communication.

Due to the variety of transit agencies (e.g., geographic location, size, physical layout, and structure), it may not be possible to implement all of the following recommendations; however, transit agencies are encouraged to work with state and local health officials on whether and how to implement these considerations and make the necessary adjustments to meet the specific needs of the public transportation line and the local community.

**Physical Distancing Strategies/Vehicle Configuration**

- Mark 6-foot increments on the ground (indoors and outdoors) at stops for each transit system so passengers can maintain appropriate physical distancing before boarding.
- Mark 6-foot increments inside the transit vehicles so passengers and the operators can maintain appropriate physical distancing while onboard the vehicles.
  - Consider blocking off alternating rows of seating to encourage distancing between passengers.
  - Members of the same household can be seated together.
- Mark a 6-foot radius around the operator to limit contact between the operator and passengers.
  - Use a physical divider between the operator and passengers or signs/tape to educate passengers on physical distancing.
- To the extent possible, the number of passengers on board the public transportation line should be limited so that physical distancing and crowding can be controlled.
  - Provide more buses, train cars, etc. on lines with high ridership or during peak travel times to allow appropriate physical distancing.
  - Provide more frequent or longer trains to allow for appropriate physical distancing.
- Enforce, when possible, entering and exiting protocols, such as:
  - If only two doors are available for the vehicle, make announcements for those outside of the vehicles to wait until passengers exit, and then allow passengers to board.
  - Utilize a “one way” approach so that some vehicle doors are used for entering only and others are used for exiting only. Include markings on the floor of the vehicles and platforms and communicate this traffic pattern to passengers.
- Consider reducing the number of entrances to stations to limit the number of areas to clean/disinfect. Make sure adequate signs are provided to direct passengers to other entrances and exits.
- Consider posting infographic sheets or signage as a visual reminder of the appropriate protocols for physical distancing and cloth or disposable face covering use. Also, share this information through social media, on transit websites and on transit apps.
- For work areas outside of vehicles (e.g., break rooms, office spaces, locker rooms, etc.):
  - Consider staggering break times for employees.
  - Consider staggering shift times (start and end) to limit the number of employees who need to access shared spaces (e.g., locker rooms, restrooms, and break areas).
**Face Coverings**

- Cloth or disposable face coverings should be worn by all transit employees and passengers.
  - With the exception of children less than two, and individuals who have difficulty breathing, are unconscious, or otherwise unable to remove a face covering without assistance, CDC recommends that all people wear a cloth or disposable face covering in public settings and when around people who don’t live in their household, especially when other physical distancing measures are difficult to maintain.
- Consider providing operators with cloth or disposable face coverings, as well as a face shield or goggles, if they do not create a hazard.

**Cleaning/Disinfecting and Personal Hygiene Practices**

- Ask employees to consider the following if they commute to work using public transportation:
  - Use other forms of transportation if possible.
  - If taking public transportation, maintain physical distancing and wear a cloth or disposable face covering.
  - Change commute time to less busy times if possible.
  - Wash hands before and as soon as possible after their trip.
- At minimum, employees should wash their hands after they have been in a public place, after touching their face covering, after blowing their nose, coughing, or sneezing, after using the restroom, after touching any common contact surfaces, and before eating. Avoid touching eyes, nose, or mouth with unwashed hands.
- Employees should wash hands with clean, running water, apply soap, lather and scrub for at least 20 seconds, then rinse. Dry hands using a clean paper towel or air dry. When soap and water can’t be used, use an alcohol-based hand sanitizer that contains at least 60% ethanol or 70% isopropyl alcohol. Any use of alcohol-based hand sanitizers should follow local and State guidelines.
- Provide appropriate supplies to support healthy personal hygiene practices (e.g., cloth or disposable face coverings, disposable gloves, and access to soap and clean water with drying materials, or alcohol-based hand sanitizers containing at least 60% ethanol or 70% isopropyl alcohol at their worksite).
- Provide appropriate personal protective equipment (PPE) to transit employees performing cleaning and disinfecting work. Follow the instructions provided by the product manufacturer for PPE requirements.
- Increase cleaning and disinfecting services at stations, bus stops, and inside vehicles to as frequently as possible, at minimum this should occur at the beginning and end of each shift.
  - Clean and disinfect high-contact surfaces, including seats, hand rails, doors, and windows at least one time per day.
- Increase cleaning and disinfecting services in common areas used by employees (e.g., break areas, locker rooms, restrooms).
- Select appropriate disinfectants – consider effectiveness and safety.
  - The U.S. Environmental Protection Agency (EPA) has developed a list of products that meet EPA’s criteria for use against SARS-CoV-2.
  - Do not mix different EPA registered chemicals together. The combination could be toxic by inhalation. Be particularly careful when using any products containing ammonia, sodium hypochlorite (bleach), or hydrogen peroxide.
  - Review product labels and Safety Data Sheets (SDS) and follow manufacturer specifications for cleaning/disinfecting.
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– Consider consulting an Occupational and Environmental Health and Safety (OEHS) Science Professional or Industrial Hygiene expert if additional advice is needed. AIHA has a consultants list of such qualified professionals.

• Establish a disinfection routine.
  – Ensure disinfection protocols follow product instructions for application and contact time. All items should be allowed to dry thoroughly after cleaning.
  – Use disposable wipes or rags when available. If not available, ensure rags are maintained, handled, and cleaned per product instructions.

• Consider developing a standard operating procedure, a checklist, or audit system to consistently train employees on enhanced cleaning/disinfecting practices or to track when and how cleaning and disinfecting is conducted. Note that this may be a requirement in some states or local jurisdictions.

• Cleaning supplies should be provided and continuously stocked for use by employees.

• Make alcohol-based hand sanitizer that contains at least 60% ethanol or 70% isopropyl alcohol, or sanitation stations, available in stations and at major transit stops for passengers. Stations should also be placed in convenient locations, such as at entrances, exits, near elevators, and restrooms. Touch-free hand sanitizer dispensers should be installed where possible.

Restrooms

• Post signage limiting restroom occupancy to allow for proper physical distancing and to remind transit employees and passengers to wash hands before and after using the restroom.

• Minimize touchpoints entering and existing restrooms, if possible.

• If the door cannot be opened without touching the handle, provide paper towels and a trash can by the door so a paper towel can be used when touching the handle and then discarded.

– Consider controlling access to bathrooms with a key so disinfection measures can be better managed. If a key is used, consider disinfecting it after each use.

• Doors to multi-stall restrooms should be able to be opened and closed without touching handles if possible.

• Place signs indicating that toilet lids (if present) should be closed before and after flushing.

• Use no-touch faucets, towel dispensers, soap dispensers, and waste receptacles when possible.

• Hand soap should be readily available for use by occupants.

• Provide paper towels and hand dryers in restrooms.

  – The WHO and CDC currently state that hands can be dried using a paper towel or hand dryer.

  – However, the use of touch or push hand dryers is discouraged due to possible surface contamination. If hand dryers are used, consider touchless devices.

• Businesses and employers should work with HVAC professionals to ensure that bathrooms are well ventilated, and if filtration is used, that proper filtration practices are being followed.

• Increase frequency and efforts to keep bathrooms clean and properly disinfected and maintain a record of sanitary work practices.

Communication

• At a minimum, follow the CDC Guidance for Businesses and Employers.

• Develop a response plan for communicating to your employees the facts of SARS-CoV-2 virus and COVID-19 disease.

  – Institute a central person or group for responding to COVID-19 concerns and provide their contact information to employees.
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Ensure transit employees have cloth or disposable face coverings and consider policies and communications that strongly encourage passengers to also wear face coverings.

- Consider posting infographic sheets or signage as a visual reminder of the appropriate protocol.

Provide up-to-date information to your employees about what is being done to mitigate the spread of COVID-19. (e.g., disinfection routine, health policies for employees, physical distancing, and health and safety measures in place).

Encourage those who are sick or at greater risk to stay home. This includes:

- People with underlying medical conditions.
- People who live with elderly people or those who are at risk.
- People with upper respiratory or flu-like symptoms or who live with someone with these clinical symptoms.
- People with COVID-19, people who live with someone with COVID-19, or who have been exposed to someone with COVID-19.

Employers should educate employees to recognize the symptoms of COVID-19 and provide instructions on what to do if they develop symptoms. At a minimum, any worker should immediately notify their supervisor, their health care provider, and the local health department, who will provide guidance on what actions need to be taken.

Training

Transit employees should be trained on hand hygiene and coughing etiquette, and how to properly wear cloth or disposable face coverings.

Provide Safety Data Sheets (SDS) for cleaning and disinfection products and ensure employees are aware of the hazards of use. Incorporate new hazards into existing OSHA Hazard Communications Program.

Employees should receive, at a minimum, awareness training on cleaning and disinfection products used in the workplace following OSHA Hazard Communication Standards. For employees who will use disinfectants and cleaners, training should also include proper use, PPE, disposal, and precautionary measures.

Communicate to employees the importance of being vigilant when monitoring symptoms and staying in touch with their employer or manager if or when they start to feel sick.

Health checks and reporting requirements of individuals infected with COVID-19 should be explained to employees.

- Transit employees should evaluate their health constantly; if they are sick, have a fever, symptoms, or someone at home is sick, then they should remain home. NOTE: Employer HR Policies, HIPAA guidelines and other laws should be followed at all times.

- Remind employees that people may be able to spread COVID-19 even if they do not show symptoms.

Revisit your leave or sick program to allow for time off and follow all HR Policies and HIPAA/other regulatory requirements.

Implement and inform employees of supportive workplace policies as applicable:

- Flexible sick leave policies consistent with public health guidance. Providing paid sick leave is an important way to encourage employees to stay home when sick.

- Consider not requiring a COVID-19 test result or a healthcare provider’s note for employees who are sick to validate their illness in order to qualify for sick leave. If you do require a doctor’s note from your employees to verify that they are healthy and able to return to work, be aware that healthcare provider offices and medical facilities
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may be extremely busy and not able to provide such documentation in a timely manner. Get more information related to the Americans with Disabilities Act during the COVID-19 pandemic.

– Flexibility to stay home to care for a sick family member.

– Human resources policies consistent with public health guidance, and state and federal workplace laws. For more information on employer responsibilities, visit the Department of Labor’s and the Equal Employment Opportunity Commission’s websites.

– Employee assistance program and community resources to help employees manage stress and receive support.

– Encourage employees at increased risk for severe illness to request special accommodations to allow them to perform their job duties safely while also protecting sensitive employee health information.

• Post signs and reminders at entrances and in strategic places providing instruction on hand hygiene, respiratory hygiene, and cough etiquette. This should include signs with images for non-English readers, as needed.

Air Quality and Ventilation

• Make sure to communicate with the operators that the vehicle should be equipped with fresh air whenever possible (e.g., open windows).

• Optimize the ventilation system settings for vehicles and within stations, breakrooms, and restrooms when fresh air is not possible. Ways to do this include, but are not limited to:
  – Maximize fresh air through your ventilation system.
  – Maintain relative humidity at 40-60%.
  – Consider using portable HEPA filtration units.
  – Limiting the use of portable pedestal or overhead ceiling fans.
  – Consult an Industrial Hygiene expert to determine the optimal ventilation rate to reduce COVID-19 transmission. AIHA maintains a listing of qualified industrial hygienists.

• If you need assistance on HVAC issues, ask an HVAC professional and see the American Society of Heating, Refrigerating, and Air-Conditioning Engineers’ (ASHRAE) COVID-19 (Coronavirus) Preparedness Resources updates for more information.

Screening and Temperature Check Tips for Employees

• At minimum, follow CDC guidelines and exposure protocol for Critical Infrastructure Workers.

• Follow CDC interim guidance for businesses and employers responding to Coronavirus Disease 2019.

• Conduct employee temperature screening and wellness checks before each shift. (NOTE: be sure to comply with OSHA’s Access to Employee Exposure Medical Records standard for confidentiality.)

  – Temperature screening methods can include manual (use non-contact infrared thermometers) or thermal camera meeting FDA recommendations. Additional screening information/guidance can be found on the CDC website.

  – Assign an employee to manage and conduct the temperature screenings while following CDC guidelines in the above link. If this is not possible, employees can self-check their own temperature.

  – Screening should be done in a manner such that the privacy of employees is respected.

  – Perform a visual inspection for other signs of illness (e.g., flushed cheeks, rapid or difficulty breathing without recent physical activity, fatigue, extreme fussiness, cough).
– Employees who have a fever of 100.4˚ F (38˚ C) or above, or other signs of illness should not be admitted to the facility.

• Employers can consider incorporating a wellness questionnaire with questions such as:
  – Have you, or a person you have been in close contact with, been diagnosed with COVID-19 within the last 14 days? (close contact is 6 feet or less for more than 10 minutes.)
  – Have you experienced any cold or flu-like symptoms in the last 72 hours (to include fever, shortness of breath, cough, sore throat, difficulty breathing, nausea, vomiting, and diarrhea)?
  – Have you traveled to an international or domestic “hot spot” in the last 14 days?
  – There are a number of examples available for wellness questionnaires (see Resources below).

• Require employees who have symptoms or signs (i.e., fever, cough, or shortness of breath) or who have a sick family member at home with COVID-19 to notify their supervisor and stay home.

• Sick employees should follow the CDC-recommended steps. Employees should not return to work until the criteria to discontinue home isolation are met in consultation with healthcare providers and state and local health departments. Consider waiving requirements for medical documentation during the pandemic, as the CDC has advised people with mild illness NOT to go to the doctor’s office or emergency room.

• If employee is sick or receives positive COVID-19 test results, results should be reported to employer. In the case of a positive COVID-19 test result, the employee must stay home until cleared for physical return to the workplace by their medical provider, following the CDC’s Discontinuation of Isolation for Persons with COVID-19 Not in Healthcare Settings.

Waste and Laundering

• Provide no-touch trash cans in stations and terminals for easy disposal of waste.

• Single-use items and used disinfection materials can be treated as regular waste, following regular safety guidelines.

• Any reusable cloth materials can be washed with detergent and dried on the highest temperature setting for the fabric.

• Deeper cleaning and disinfecting protocols should be developed and implemented in cases where confirmed cases of COVID-19 are discovered. Refer to AIHA’s Workplace Cleaning for COVID-19.

• Ensure all commercial laundry services are aware of the potential for COVID-19 exposure before laundering.

What to Do in the Event of a COVID-19 Illness

• If an employee tests positive:
  – Follow federal, state, and local recommendations for reporting and communicating cases, while remaining compliant with regulations and guidelines pertaining to protecting private health information such as confidentiality required by the Americans with Disabilities Act (ADA). See OSHA for guidance on reporting workplace exposures to COVID-19.
  – Engage HR immediately and enforce all applicable HR rules and regulations.
  – The employee shall be isolated to the area they are in currently and removed from the work site for a minimum of 14 days.
  – Any individuals having “close contact” (within approximately 6 feet) with the sick employee should also be isolated from the work site for 14 days; and all other employees should continue to follow physical distancing rules. Communicate and reinforce with employees, while maintaining PII and HIPAA requirements, that they
may have been exposed and to closely monitor their health, temperature, and current symptoms as identified by the CDC. Contact tracing and sharing of employee information should be done under the guidance of Human Resources due to privacy requirements of HIPAA, ADA, and EEOC. See the CDC’s "Coronavirus Disease 2019 (COVID-19) General Business Frequently Asked Questions".

- Enhanced cleaning and disinfecting should be done immediately by trained personnel, who should wear face coverings and gloves, dispose of gloves after use, and wash hands and face when complete. Visibly dirty surfaces shall be cleaned using a detergent or soap and water PRIOR to disinfection. Keep windows and doors open during the cleaning and disinfecting work.
- For disinfection, use only EPA-registered disinfectants on List-N.

- If a COVID-19 case in an operator is identified via testing or suspected based on symptoms (fever, cough, shortness of breath, gastrointestinal symptoms), or if a passenger known or suspected to have COVID-19 based on noticeable symptoms (fever, cough, shortness of breath), conduct an enhanced cleaning/disinfecting of the vehicle. At a minimum, use the guidance provided by CDC for Cleaning and Disinfection for Non-emergency Transport Vehicles.
- If a COVID-19 case amongst a transit employee is identified via testing or suspected based on symptoms (fever, cough, shortness of breath, gastrointestinal symptoms), conduct an enhanced cleaning/disinfecting of the employee’s work area and any locations where the transit employee was known to be working. At a minimum, use the guidance provided by CDC for Interim Guidance for Businesses and Employers Responding to Coronavirus Disease 2019.

What should an Employee do to protect themselves and the passengers?

- Educate yourself about the facts of COVID-19.
  – Obtain information about COVID-19 from credible sources such as the CDC or WHO.
- Follow local and state health department guidelines and recommendations.
- Evaluate your health constantly. If you are sick, stay home. If you have a temperature, stay home. If someone at home is sick or you came in contact with someone who became sick, stay home. If you have allergies or other medical illness, stay home. NOTE: Employer HR Policies, HIPAA guidelines and other laws should be followed at all times.
  – Follow CDC guidelines for testing.
- If an employee tests positive for COVID-19:
  – Stay home and isolate until cleared for physical return to the workplace by your medical provider, following the CDC’s Discontinuation of Isolation for Persons with COVID-19 Not in Healthcare Settings.
  – Contact your supervisor and report your results as soon as possible.
  – Notify your supervisor about others in the workplace with whom you came into contact.
- Maintain good hygiene practices (washing hands with soap and water for at least 20 seconds) or a hand sanitizer with at least 60% ethanol or 70% isopropyl alcohol when you arrive at work, throughout the day after various activities (e.g., before and after preparing food, before and after administering medication, after handling garbage, etc.), after touching your face covering, when you leave work, and when you arrive home.
- Understand the rules within the workspace – avoid large gatherings of greater than 10 employees, un-
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less physical distancing of 6 feet or greater can be maintained.

- Train operators and kiosk employees should maintain distance from passengers and other employees to the extent possible.

Specific to buses:

- The operator should follow all agency and local policies, but if a passenger needs to get off of the bus, consider stopping in a safe space away from the designated stop to allow for safe exiting of the bus.
  - If possible, skip stops if the bus is too crowded.
  - Keep doors closest to the operator closed when at stops to limit the passengers passing by the operator.
  - If only two doors are available for the vehicle, make announcements for those outside of the vehicles to wait until passengers exit, and then allow passengers to board through the back door.
  - If more than two doors are available, utilize a “one way” approach so that some vehicle doors are used for entering only and others are used for exiting only. Include markings on the floor of the vehicles and platforms and communicate this traffic pattern to passengers.
  - If the front door is the only door with accessible ramps for persons with disabilities, then the door must be used to allow easy access for the individual.
  - To limit contact with passengers, keep the door closed until the front seats have been affixed in a position to allow wheelchair access.

Depending on local requirements, in alignment with CDC recommendations, wear a cloth or disposable (or better if you have it) face covering whenever physical distancing cannot be maintained (indoors or outdoors). Ensure the face covering is properly maintained and cleaned. Additional information on cloth face coverings can be found on [CDC’s website](https://www.cdc.gov). (NOTE: Cloth or disposable face coverings primarily protect other people. A cloth or disposable face covering is not a substitute for physical distancing.)

- With the exception of children less than two, and individuals who have difficulty breathing, are unconscious, or otherwise unable to remove a face covering without assistance, CDC recommends that all people wear a cloth face covering in public settings and when around people who don’t live in their household, especially when other physical distancing measures are difficult to maintain.
  - If you are an operator, wear your cloth or disposable face covering throughout passenger transport.

- Non-medical cloth or disposable face coverings are NOT Personal Protective Equipment (PPE), but they do offer some protection to others and should be worn while near other people in common spaces or shared workspaces. They are not a substitute for physical distancing, engineering controls, cleaning and disinfecting, proper hygiene, or staying home while sick.

- Remove cloth or disposable face coverings correctly and wash hands after handling or touching a used face covering.

- Wash cloth face coverings after each use. Cloth face coverings can be included with regular laundry. Use regular laundry detergent and the warmest appropriate water setting for the cloth used to make the face covering. Use the highest heat setting and leave in the dryer until completely dry. If air drying, lay flat and allow to completely dry. If possible, place in direct sunlight.

- Let your employer know if you have concerns about PPE that may be provided to you and that you are properly instructed on how to use it. [The CDC has](https://www.cdc.gov)
recommended sequences for donning and doffing PPE.

NOTE: If an employer chooses to provide or the employee supplies their own in N95 respirator, please fully consider all the potential OSHA requirements.

- Avoid touching surfaces on the vehicles that are often touched by passengers.
  - If unavoidable, wear disposable gloves, dispose of these gloves after use, and wash your hands when complete.

- On breaks, limit touching surfaces outside of the operator area and vehicle.
  - If unavoidable, carry hand sanitizer (at least 60% ethanol or 70% isopropyl alcohol) or sanitizing wipes to use before and after touching other surfaces.

- At a minimum, clean and disinfect the operator area and frequently touched surfaces before and after your shift.

- Each vehicle should be wiped down before and after each shift. This includes the hand rail, windows, window handles, walls, and seats. See CDC guidance for bus transit operators and rail transit operators.

- Clean and disinfect the areas in the stations and at stops that are frequently touched. See CDC guidance for transit maintenance workers and transit station workers.

- Cover your mouth and nose with a tissue when you cough or sneeze and throw used tissues in the trash. If you don’t have a tissue, cough or sneeze into your elbow, not your hands. Immediately wash your hands after blowing your nose, coughing or sneezing. Learn more about coughing and sneezing etiquette.

- Make sure vehicle is equipped with fresh air whenever possible, and optimize the ventilation system settings when fresh air is not possible. Ways to do this include, but are not limited to:
  - Consider leaving the windows down during transport.
  - Maximize fresh air through your ventilation system, if applicable.

Worker Rights

AIHA believes that basic protections are worker rights, as well as an essential ingredient of occupational health and safety systems, and that employers must provide a safe and healthful work environment.

What should Passengers do to protect themselves?

- Follow state and local guidelines regarding requirements for passengers on public transportation.
- Prepare for your trip by checking public transit operating times. Monitor the transit website or transit apps for currently guidelines.
- Passengers on board the public transit lines should follow the same practices of physical distancing.
  - Stay at least 6 feet apart from others on board the vehicle, whether seated or standing.
  - If possible, travel during non-peak hours.
- Use a cloth or disposable face covering during the trip – some states and cities currently require the use of a face covering when waiting for and when riding transit (e.g., San Francisco, Los Angeles).
- Don’t use handshake greetings or hugs that require close contact.
- Avoid accepting anything for free that you may be handed on public transit.
- Avoid using and sharing disposable transit maps found at stations and transit stops.
- Follow any posted signs and floor markings (specific to physical distancing and face coverings) inside the vehicle and at transit stations.
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- If possible, avoid touching high-contact surfaces at stations and transit stops, including but not limited to, pay stations and turnstiles. Wash your hands or use hand sanitizer if contact with these surfaces is necessary.

- If possible, avoid touching of high-contact surfaces in the vehicles, including but not limited to doors and windows. Wash your hands or use hand sanitizer if contact with these surfaces is necessary.
  - If touching handrails or hand straps is necessary, use a disposable tissue or towel as a barrier to grip the surface. Keep these items away from your face after use. Immediately dispose of the tissue or place the towel in a sealed bag and wash after use. Wash the towel or hand strap (if machine washable) and discard the tissue, if used. Wash your hands or use hand sanitizer after contact with the tissue or towel.

- Consider carrying hand sanitizer (at least 60% ethanol or 70% isopropyl alcohol) or sanitizing wipes.

- Use good cough and sneeze etiquette while in the vehicle. Cover your mouth and nose with a tissue when you cough or sneeze and throw used tissues in the trash. If you don’t have a tissue, cough or sneeze into your elbow, not your hands. Immediately wash your hands after blowing your nose, coughing, or sneezing. Learn more about coughing and sneezing etiquette.

- Ask the operator to open available windows (do not recirculate the air in the vehicle).

- Once off public transportation, avoid touching your face, and follow proper good hygiene practices by washing your hands with soap and water.

- If you are symptomatic or feel unwell, avoid using public transportation, if possible.

Resources

- CDC Critical Infrastructure Interim Guidance.
- CDC Policy and Strategy on Public Transportation.
- CDC Guidance on Public transit, rideshares and taxis, micro-mobility devices, and personal vehicles.
- CDC Interim Guidance for Mass Transit Administrators.
- CDC Mass Transit Decision Tool.
- CDC Guidance for Bus Transit Operators.
- CDC Guidance for Rail Transit Operators.
- CDC Guidance for Transit Maintenance Workers.
- CDC Guidance for Transit Station Workers.
- CDC Interim Guidance for Businesses and Employers.
- The EPA has developed a list of disinfectants for use against SARS-CoV-2.
- ASHRAE has guidance for Transportation.
- OSHA Hazard Communication.
- SFMTA COVID-19 Muni Core Service Plan.
- SFMTA COVID-19 Developments & Response.
- NYC MTA Service During the Coronavirus Pandemic.
- NYC MTA How We’re Stepping Up Our Cleaning Procedures During the Coronavirus Pandemic.
- NYC MTA Traveling Safely on Subways, Buses, and Trains.
- Atlanta MARTA COVID-19 Update.
- Central Ohio Transit Authority Responding to Coronavirus.
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- Chicago Transit Authority COVID-19 info.
- LA Metro UPDATING: Metro COVID-19 news and service information.
- Port Authority Coronavirus (COVID-19).
- U.S Department of Transportation Federal Transit Administration SA 20-1 Safety Advisory.
- CDC Cleaning and Disinfecting Your Facility: Everyday Steps, Steps When Someone is Sick, and Considerations for Employers.
- CDC General Business Frequently Asked Questions website.
- CDC Health Screening “Should we be screening employees for COVID-19 symptoms?” section of General Business Frequently Asked Questions.
- AIHA’s Indoor Environmental Quality Committee developed these guidance documents about re-opening and cleaning buildings after closures due to COVID-19: Recovering from COVID-19 Building Closures and Workplace Cleaning for COVID-19.
- AIHA’s Considerations on the Safe Use of UVC Radiation.
- AIHA’s Focus on Construction Health: COVID-19.
- AIHA’s Effective and Safe Practices: Guidance for Custodians, Cleaning and Maintenance Staff.
- AIHA’s PPE for SARS-CoV-2.
- AIHA’s Use of Real Time Detection Systems.
- AIHA’s Proper Use of Respirators for Healthcare Workers & First Responders.
- AIHA’s Workers Rights White Paper.
Reopening: Guidance for Transit Systems (Buses, Subways, and Light Rails)

**AIHA®**

AIHA is the association for scientists and professionals committed to preserving and ensuring occupational and environmental health and safety (OEHS) in the workplace and community. Founded in 1939 as the American Industrial Hygiene Association® (AIHA®), we support our members with our expertise, networks, comprehensive education programs and other products and services that help them maintain the highest professional and competency standards. More than half of AIHA’s nearly 8,500 members are Certified Industrial Hygienists (CIH), and many hold other professional designations. AIHA serves as a resource for those employed across the public and private sectors, as well as to the communities in which they work. For more information, visit [AIHA.org](http://AIHA.org).

**About Occupational and Environmental Health and Safety Professionals**

Occupational and environmental health and safety (OEHS) professionals (also known as industrial hygienists) practice the science of anticipating, recognizing, evaluating, controlling and confirming workplace conditions that may cause workers’ injury or illness. Through a continuous improvement cycle of planning, doing, checking and acting, OEHS professionals make sure workplaces are healthy and safe.

- Get additional resources at AIHA’s [Coronavirus Outbreak Resource Center](https://www.backtoworksafely.org).
- Find a qualified industrial hygiene and OEHS professionals near you in our [Consultants Listing](https://www.backtoworksafely.org).

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These guidance documents were primarily developed for those smaller business that don’t have readily available occupational health and safety resources, and designed to help business owners, employers, employees and consumers implement science-backed procedures for limiting the spread of the coronavirus. They are subject to any local, state, or federal directives, laws, or orders about operating a business and should only be used if they do not conflict with any such orders. These documents are subject to revision and shall be updated accordingly.

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