

CBP Job Hazard Analysis (JHA) & PPE Assessment	Job Title: Exposure to Coronavirus "COVID-19"		Date: March 12, 2020	New Revised X
	Title: All CBP Personnel in Affected Areas	Supervisor: All	Prepared By: HRM, Occupational Safety and Health (OSH) Division CBP Senior Medical Advisor	
Offices: All CBP	Locations: CBP Wide	Departments: All	Reviewed By: Office of Field Operations United States Border Patrol Air and Marine Operations Operations Support	
Required or Recommended Personal Protective Equipment: surgical masks, nitrile gloves, N95 respirator, protective outer garments, gown, shoe coverings, face shield or non-vented goggles			Approved by: OSH Division Director CBP Senior Medical Advisor	

Note: This JHA only applies to the 2019 Novel Coronavirus (SARS-CoV-2) or the disease known as "COVID-19". The Centers for Disease Control and Prevention (CDC), World Health Organization, (WHO), Occupational Safety and Health Administration (OSHA), and other public health agencies are now considering the outbreak of COVID-19 that has spread to countries around the globe, including here in the United States, to be a Pandemic. Although the general risk to CBP personnel and the public is still considered LOW at this point, it is CRITICAL that all personnel take standard precautions recommended by CDC, outlined in this JHA and found on the [Safety and Health COVID-19 Resource Page](#) on CBPnet. References to guides, additional information and material, links, and other resources can be found on "Notes" page at the end of this document.

For the most up to date information about COVID-19 visit the [Centers for Disease Control \(CDC\) COVID-19 page](#).

Risk Assessment: Incomplete information regarding incubation, infectious period, and transmissibility, as well as evolving circumstances make a definitive risk assessment challenging. In light of this, awareness and operationally-informed precautions are warranted. In general, the overall risk to CBP personnel is still assessed to be low. However, risk increases with increased exposure to persons potentially infected with COVID-19, warranting enhanced precautions described herein. CBP will continue to monitor the situation closely in coordination with appropriate stakeholders and will adjust guidance as appropriate. CBP personnel should continue to maintain situational awareness regarding this outbreak.

While COVID-19 is a respiratory disease and the use of N95 respirators and other PPE is needed in certain conditions and work environments as outlined in this JHA, the use of PPE is but one component of COVID-19 disease prevention and the use of N95 respirators and masks is NOT the most effective or primary way of preventing disease transmission. All personnel can take these basic steps to prevent exposure to and transmission of COVID-19. All personnel should practice good hygiene, wash hands frequently, cover your cough or sneeze, stay away from work if you are ill and contact your health provider for guidance, avoid unnecessary congregate settings where COVID-19 exposure is more probable, KEEP YOUR HANDS BELOW YOUR CHIN and avoid touching mouth, eyes, nose and mucous membranes where contaminated hands can spread the disease to your respiratory system. These basic preventative measures will greatly reduce the exposure potential for ALL personnel and slow the spread of communicable diseases.

Note: Risk categories (Very High, High, Medium, and Low) are to be used in conjunction with this document only. They refer to the mission-specific risk relative to the hazard identified; they do not correlate to overall risk of contracting COVID-19 Disease or risk categories used by other agencies such as the Centers for Disease Control and Prevention (CDC), or in other documents such as the Workforce Health and Safety Coronavirus Health Advisories Screening Guidance, CDC Coronavirus Advisories, or Travel Health Alert Notices (T-HAN) meant for other audiences.

Operations	Risk Categories	Hazards	Protective Measures/PPE Guidance
<p>1. HQ Offices, CBP Facilities, Office Settings, Mission Support, and other Administrative Settings</p> <p>Note: This is intended for ALL CBP facilities where administrative work is being conducted and exposure to COVID-19 from a traveler, passenger, or detainee is NOT expected.</p>	<p>Low</p>	<p>Casual or Close Contact of Coronavirus cases is not expected.</p> <ul style="list-style-type: none"> • Signs and Symptoms of COVID-19 include; <ul style="list-style-type: none"> • Fever • Cough • Difficulty breathing • Other Flu Like Symptoms <p>Note: While most COVID-19 lab confirmed cases do display these type symptoms, SOME persons may only display mild symptoms and they may appear at different stages of the disease.</p>	<ul style="list-style-type: none"> • Stay up to date on latest information from DHS, CBP, CDC, WHS, and other COVID-19 alerts, advisories and updates. See more information on page 8. • Use the following disease prevention practices in ALL activities. • Frequent hand washing. • Stay home if you are ill and contact your health provider right away if you notice any signs or symptoms similar to COVID-19. • If you think you have been exposed to someone with COVID-19, notify your supervisor and your health provider. • KEEP your hands BELOW your chin and avoid touching mouth, nose, and eyes. • Cover your cough/sneeze with a tissue or cuff of your elbow, NOT your hands • Use of N95 respirators or surgical masks is NOT recommended. • Voluntary use of N95 respirators, although not recommended at the time of development of this JHA, is allowed with supervisor approval and in accordance with existing CBP policies on the use of respirators. • Medical Clearance and Fit Testing are NOT required for voluntary use. See Page 8 Notes. • All use of N95 respirators should be in accordance with OSHA 1910.134 and CBP OSH 5200-08B policies.
<p>2. Port of Entry Operations</p> <p>Primary Passenger Processing</p> <p>Note: This includes casual contact (>6 feet) or brief periods of close contact with a person at increased risk of COVID-19 during Port Operations (<6feet) for short periods of time, e.g. escorting a person from one area to another during screening process, or briefly entering a room with a higher risk person.</p> <p>This section is intended for the processing and handling of persons during primary who are higher risk, but not symptomatic.</p>	<p>Medium</p>	<p>Casual Contact with passengers or persons with increased risk of COVID-19;</p> <ul style="list-style-type: none"> • Casual contact (outside 6 feet) with persons with potential COVID-19 Symptoms, or • Who may have a travel nexus to a high risk country within the past 14 days 	<ul style="list-style-type: none"> • Stay up to date on latest information from DHS, CBP, CDC, WHS, and other COVID-19 alerts, advisories and updates. See more information on page 8. • Use general disease prevention outlined in Section 1. • Use CBP Risk Based Exposure Guidance for Managing Contact Tracing • Passive observation of persons for signs of illness. • Use COVID-19 R.I.N.G. Card and general precautions. • Separate persons with symptoms of illness or a high risk country travel nexus and send to secondary for additional processing and CDC consultation. • Avoid close or direct contact with passengers with a travel nexus to high risk country within the past 14 days or with symptoms • Wear disposable nitrile gloves • Provide surgical masks to any persons with signs of illness. • Voluntary use of N95 respirators may be considered per CBP policy and supervisor approval. (See HB 5200-08B, Ch. 26).

<p>3. Port of Entry Operations</p> <p>Secondary Processing, holding, and escorting of persons suspected of having COVID-19</p> <p>Note: This includes limited periods of closer (<6 feet) contact with a person at increased risk of having COVID-19 during the secondary phases of screening, and also includes holding, transportation operations where limited close contact would apply.</p>	<p>High</p>	<p><u>Limited Close Contact</u> Within six (6) feet of a person with travel nexus to high-risk country within 14 days or with signs/symptoms of illness.</p> <p>Note: This includes processing, escorting, or spending brief periods of time with more than casual contact with persons suspected of having COVID-19</p>	<ul style="list-style-type: none"> • Stay up to date on latest information from DHS, CBP, CDC, WHS, and other COVID-19 alerts, advisories and updates. See more information on page 8. • Use general disease prevention outlined in Section 1. • Quickly identify and separate symptomatic passengers from others. • Use CBP Risk Based Exposure Guidance for Managing Contact Tracing. • Avoid direct contact and keep close contact to a minimum. • Use COVID-19 R.I.N.G. Card for general precautions. • Refer/escort any persons with travel nexus to high risk country within 14 days or symptoms to CDC for evaluation/interview. • Contact EMS for severely ill passengers (high fever, uncontrollable coughing, difficulty breathing, etc.). • Provide surgical masks to symptomatic passengers. • Wear disposable nitrile gloves. • Officer/Agent wear N95 respirator within six (6) feet of symptomatic passenger. • Wear goggles or face shield to protect eyes.
<p>4. Port of Entry Operations</p> <p>Spending time within 6 ft. in an enclosed room/space where symptomatic person with suspected COVID-19 is being held or evaluated by CDC, including transporting or guarding a person with suspected COVID-19</p> <p>Note: Suspected COVID-19 cases refers to those that are symptomatic, from a high risk country and have not been lab confirmed or tested yet. This does NOT apply to persons who are from high risk countries and displaying NO symptoms or to contacts of cases of NOT lab confirmed.</p>	<p>Very High</p>	<p><u>Extended Close Contact</u> Prolonged periods within close contact (6 ft.) of a person with a travel nexus to high risk country and with symptoms Signs and Symptoms of COVID-19 include;</p> <ul style="list-style-type: none"> • Fever • Cough • Difficulty breathing • Other Flu Like Symptoms <p>Note: While most COVID-19 lab confirmed cases do display these type symptoms, SOME persons may only display mild symptoms and they may appear at different stages of the disease</p>	<ul style="list-style-type: none"> • Stay up to date on latest information from DHS, CBP, CDC, WHS, and other COVID-19 alerts, advisories and updates. See more information on page 8. • Use general disease prevention outlined in Section 1. • Quickly identify and separate symptomatic passengers from others. • Use CBP Risk Based Exposure Guidance for Managing Contact Tracing. • Avoid direct contact and keep close contact to a minimum. • Limit time in room to critical functions. • Use COVID-19 R.I.N.G. Card for general precautions. • Refer/escort any persons with travel nexus to high risk country within 14 days and symptoms to CDC for evaluation/interview. • Contact EMS for severely ill passengers (high fever, uncontrollable coughing, difficulty breathing, etc.). • Provide surgical masks to symptomatic passengers. • Wear disposable nitrile gloves. • Officer/Agent wears N95 respirator, goggles/face shield, and disposable outer garments to prevent uniform contamination.

<p>5. U.S. Border Patrol Operations</p> <p>Line Watch, Transport, Processing, Detention, and Check Points</p> <p><u>Primary</u> Interdiction/processing of persons, vehicles or cargo.</p> <p>(Persons, Drivers, passengers, or stowaways with travel nexus to high risk country within 14 days)</p>	Medium	<p><u>Casual Contact</u> with passengers or persons with increased risk of COVID-19;</p> <ul style="list-style-type: none"> Casual contact (outside 6 feet) with persons with potential COVID-19 Symptoms, or Who may have a travel nexus to a high risk country within the past 14 days 	<ul style="list-style-type: none"> Stay up to date on latest information from DHS, CBP, CDC, WHS, and other COVID-19 alerts, advisories and updates. See more information on page 8. Use general disease prevention outlined in Section 1. Wear disposable nitrile gloves. Passive observation of persons for signs of illness. Use COVID-19 R.I.N.G. Card and general precautions. Separate persons with symptoms of illness or a high risk country travel nexus and send to secondary for additional processing and CDC consultation. Use CBP Risk Based Exposure Guidance for Managing Contact Tracing. Avoid close or direct contact with passengers with a travel nexus to high risk country within the past 14 days. Provide surgical masks to any persons with signs of illness. Voluntary use of N95 respirators may be considered per CBP policy and supervisor approval. (See HB 5200-08B, Ch. 26).
<p>6. U.S. Border Patrol Operations</p> <p>Line Watch, Escort, Processing, Detention, and Check Points</p> <p><u>Secondary</u> Interdiction/processing of persons, vehicles or Cargo (Persons, driver, passengers, or stowaways with travel nexus to high risk country within 14 days)</p>	High	<p><u>Limited Close Contact</u></p> <p>Within six (6) feet of a person with travel nexus to high-risk country within 14 day or with signs/symptoms of illness.</p> <p><u>Note:</u> This includes escorting, processing, or spending more than casual contact with persons suspected of having COVID-19</p>	<ul style="list-style-type: none"> Stay up to date on latest information from DHS, CBP, CDC, WHS, and other COVID-19 alerts, advisories and updates. See more information on page 8. Use general disease prevention outlined in Section 1. Quickly identify and separate symptomatic persons from others. Use CBP Risk Based Exposure Guidance for Managing Contact Tracing. Provide surgical masks to symptomatic passengers. Wear disposable nitrile gloves. Avoid direct contact and keep close contact to a minimum. Officer/Agent wear N95 respirator within six (6) feet of symptomatic passenger. Wear goggles or face shield to protect eyes. Use COVID-19 R.I.N.G. Card for general precautions. Refer/escort any persons with travel nexus to high risk country within 14 days and symptoms to CDC for evaluation/interview. Contact EMS for severely ill passengers (high fever, uncontrollable coughing, difficulty breathing, etc.).

<p>7. U.S. Border Patrol Operations</p> <p>Being in an enclosed room/space where symptomatic person with suspected COVID-19 is being held or evaluated by CDC, or transporting a person with suspected COVID-19</p> <p>Note: Suspected COVID-19 cases refers to those that are symptomatic, from a high risk country and have not been lab confirmed or tested yet. This does NOT apply to persons who are from high risk countries and displaying NO symptoms or to contacts of cases of NOT lab confirmed.</p>	<p>Very High</p>	<p><u>Extended Close Contact</u></p> <p>Within six (6) feet of Symptomatic or ill travelers from any affected country within the past 14 days and</p> <ul style="list-style-type: none"> • Fever • Cough • Difficulty breathing • Flu Like Symptoms 	<ul style="list-style-type: none"> • Frequent hand washing. • Stay up to date on latest information from DHS, CBP, CDC, WHS, and other COVID-19 alerts, advisories and updates. See page 8. • Provide surgical masks to symptomatic passengers. • Wear disposable nitrile gloves. • Agent wears N95 respirator, goggles/face shield, and disposable outer garments to prevent uniform contamination. • Avoid direct contact and keep close contact to a minimum. • Limit time in room to critical functions. • For symptomatic persons, use negative pressure ventilated rooms/holding facilities whenever available/possible. • During transportation of symptomatic persons from affected country use USBP vehicles designed for prisoner/detainee transport with separate compartment between driver/detainees (when driver and detainee cannot be separated, place a surgical mask on symptomatic detainee and driver will wear an N95 respirator) • Contact EMS for severely ill passengers (high fever, uncontrollable coughing, difficulty breathing, etc.). • Use CBP Risk Based Exposure Guidance for Managing Contact Tracing. • Use COVID-19 R.I.N.G. Card for general precautions.
<p>8. Air & Marine Operations</p> <p>Air Branches/Stations/and All AMO Facilities and Operations</p>	<p>Medium</p>	<p>Exposure to Symptomatic Persons is NOT expected During Most Air Interdiction/Marine Interdiction Operations</p> <p><u>Note:</u> When apprehensions or personal contacts result in Close Personal Contact (Less than <6 Feet) Follow the following guidance.</p>	<ul style="list-style-type: none"> • Stay up to date on latest information from DHS, CBP, CDC, WHS, and other COVID-19 alerts, advisories and updates. See page 8. • Frequent hand washing. • Provide surgical masks to any symptomatic persons during apprehension. • Wear disposable nitrile gloves. • When Interdiction Agent/Officer is exposed to symptomatic person then wear N95 respirator and goggles or/face shield. • Avoid direct contact and keep close contact to a minimum. • Use CBP Risk Based Exposure Guidance for Managing Contact Tracing. • Contact EMS for severely ill passengers (high fever, uncontrollable coughing, difficulty breathing, etc.). • Use COVID-19 R.I.N.G. Card for general precautions.

<p>9. Disinfection and cleanup of Contaminated Surfaces –</p> <p>General Guidance</p>	<p>Low</p>	<p>Risk of Exposure Expected To Be Low During Routine Disinfection and Cleaning of COVID-19</p> <p>General exposure potential where no lab confirmed cases of COVID-19 persons have occupied.</p>	<ul style="list-style-type: none"> • COVID-19 can live for prolonged periods (from hours to a couple days depending on conditions, temp, etc.) of time on hard surfaces, door knobs, handrails, light switches, and other frequently touched surfaces. Frequent cleaning and disinfection should be performed when working with potentially infected populations. Surface disinfection should be performed after interaction with a suspected sick individual as well as periodically through a work shift. • There are everyday products such as Clorox and Lysol wipes, sprays, and bottles (for large clean-up jobs) that are recommended and effective against COVID-19. These cleaning and disinfection products are effective for CBP workplaces and around the home and are readily available. • If apprehension was made and individual was symptomatic, Officers/Agents Duty Gear and Equipment should be disinfected IAW CDC guidelines for Law Enforcement personnel see Page 8. (Follow Agency Specific Policy for Firearms). • Always follow manufacturers' cleaning and disinfection guidance and use prescribed PPE for large jobs, especially where COVID-19 is known to have been present. • For a complete list of EPA Registered COVID-19 cleaners and disinfectants check the EPA list of COVID-19 Cleaning and Disinfection Products at https://www.epa.gov/sites/production/files/2020-03/documents/sars-cov-2-list_03-03-2020.pdf.
<p>10. Cleaning and Disinfection of CBP facilities to include POEs, USBP Stations and Check Points, Holding and Detention Areas –</p>	<p>High</p>	<p>Potential exposure to COVID-19 contaminated areas in general.</p> <p>Where known lab confirmed COVID-19 cases have recently been within the past 8-72 hours</p>	<ul style="list-style-type: none"> • COVID-19 can live for prolonged periods (from hours to a couple days depending on conditions, temp, etc.) of time on hard surfaces, door knobs, handrails, light switches, and other frequently touched surfaces. Frequent cleaning and disinfection should be performed when working with potentially infected populations. Surface disinfection should be performed after interaction with a suspected sick individual as well as periodically through a work shift. • There are products such as Clorox and Lysol wipes, sprays, and bottles (for large clean-up jobs) that are recommended and effective against COVID-19. These cleaning and disinfection products are effective for CBP workplaces and around the home and are readily available. • Always follow manufacturers' cleaning and disinfection guidance and use prescribed PPE for large jobs, especially where COVID-19 is known to have been present. • For a complete list of EPA Registered COVID-19 cleaners and disinfectants check the EPA list of COVID-19 Cleaning and Disinfection Products at https://www.epa.gov/sites/production/files/2020-03/documents/sars-cov-2-list_03-03-2020.pdf. • Wear an N95 respirator if cleaning and disinfection an area where COVID-19 was known to be present or suspected. • Wear non-vented goggles or face shield to cover face and eyes. • Wear a liquid impermeable gown (for large cleanup jobs wear

			<p>liquid impermeable suit/coveralls).</p> <ul style="list-style-type: none"> Dispose of all infectious material as bio hazardous waste in accordance with local, State, or Federal guidelines.
<p>11. Cleaning and Disinfection of Vessels and Ships</p> <p>Note: Cruise ships have higher incidence of exposure and risk levels may go up.</p>	Med	Potential exposure to COVID-19 contaminated areas in general.	<ul style="list-style-type: none"> COVID-19 can live for prolonged periods (from hours to a couple days depending on conditions, temp, etc.) of time on hard surfaces, door knobs, handrails, light switches, and other frequently touched surfaces. Frequent cleaning and disinfection should be performed when working with potentially infected populations. Surface disinfection should be performed after interaction with a suspected sick individual as well as periodically through a work shift. There are products such as Clorox and Lysol wipes, sprays, and bottles (for large clean-up jobs) that are recommended and effective against COVID-19. These cleaning and disinfection products are effective for CBP workplaces and around the home and are readily available. Always follow manufacturers' cleaning and disinfection guidance and use prescribed PPE for large jobs, especially where COVID-19 is known to have been present. For a complete list of EPA Registered COVID-19 cleaners and disinfectants check the EPA list of COVID-19 Cleaning and Disinfection Products at https://www.epa.gov/sites/production/files/2020-03/documents/sars-cov-2-list_03-03-2020.pdf Follow CDC guidance for ships/vessels here https://www.cdc.gov/quarantine/maritime/recommendations-for-ships.html Follow general precautions outlined above for general areas. Wear nitrile or fluid impermeable gloves while cleaning and follow all manufacturers' guidelines for cleaning products.
<p>12. Cleaning and Disinfection of Kojak Fingerprint Kiosks</p> <p>General cleaning and disinfection of these areas MUST be done in accordance with manufacturers recommendations in order to avoid damage to equipment</p>	LOW	Low Risk of Exposure Due to Persons Who May Have Used Kojak Fingerprint Kiosks	<ul style="list-style-type: none"> General cleaning and disinfection of these areas MUST be done in accordance with manufacturers recommendations in order to avoid damage to equipment. Specific Guidance for Cleaning and Disinfection of Kojak Fingerprint Kiosks can be found at https://cbpgov.sharepoint.com/sites/oit/pspo/training/catalog/kojak.aspx The use of alcohol based hand sanitizers or wipes will BURN the Platen and void the manufacturer's warranty. Only Use the following moisturizers with the Kojak Fingerprint Kiosks <ul style="list-style-type: none"> Nivea Soft Moisturizing Cream Aveeno Daily Moisturizing Lotion Gold Bond Ultimate Healing Hand Cream

Notes:

1. This JHA and PPE Assessment only applies to CBP operations related to exposure to 2019 Novel Coronavirus or COVID-19). At the time of developing this JHA, new cases are being reported in countries around the globe, including the United States. See below links to CDC, WHO, OSHA, DHS, and other COVID-19 resources and information.
2. **CBP Respiratory Protection**. All CBP Frontline Personnel, Officers, and Agents who may be in work situations that place them at increased risk of exposure to COVID-19 due to processing passengers or travelers from COVID-19 affected countries who may have to wear an N95 respirator as outlined in the above risk based scenarios are considered to be in “mandatory use” N95 Respirator Programs. As such, the mandatory use of an N95 respirators requires a medical clearance, fit testing, and have a clean shaven face and no facial hair between the mask seal and the face in accordance with OSHA 1910.134 and CBP HB 5200-08B. Frontline and uniformed personnel have had these programs in place for years within CBP due to other work situations that also require an N95, such as exposure to TB, Handling of Fentanyl and other Narcotics, Ebola Response, Pandemic and PEID Response Plans, and now COVID-19.
3. **Voluntary Use of N95 Respirators**. The voluntary use of N95 respirators is allowed by employers when there is no work task that makes the N95 use “mandatory”, however circumstances such as allowing mission support, administrative, or HQ personnel that do not typically wear a respirator, who would like to wear one for protection to exposer that are not related to specific work tasks such as traveling to and from work in congregate settings such as large metropolitan transit systems, buses, etc. would be considered “Voluntary Use”. In these cases, “Voluntary Use” of N95 Respirators does not require a medical clearance or a fit test, however it does require approval from a supervisor to ensure the use won’t create a hazard for the employee, impact N95 supplies needed for critical frontline “Mandatory Use” situations, or that would cause undue confusion and conflicting policy guidance such as “Voluntary Use” by frontline officers in primary passenger processing when they aren’t performing any work that requires “Mandatory Use” as outlined above. All Respiratory Protection Program, whether “Mandatory Use” or “Voluntary Use”, situations will be run in accordance with OSHA 1910.134 standards and policies outlined in CBP HB 5200-08B, Chapter 26.
4. While COVID-19 is a respiratory disease and the use of N95 respirators and other PPE is needed in certain conditions and work environments as outlined in this JHA below, the use of PPE is but one component of COVID-19 disease prevention and the use of N95 respirators and masks is NOT the most effective or primary way of preventing disease transmission. All personnel can take these basic steps to prevent exposure to and transmission of COVID-19. All personnel should practice good hygiene, wash hands frequently, cover their cough, stay away from work if ill and contact their health provider for guidance, avoid unnecessary congregate settings where COVID-19 exposure is more probable. KEEP YOUR HANDS BELOW YOUR CHIN and avoid touching mouth, eyes, nose and mucous membranes where contaminated hands can spread the disease to your respiratory system. These basic preventative measures will greatly reduce the exposure potential for ALL personnel and slow the spread of communicable diseases.

References:

- CBP COVID-19 Resource Portal: http://cbpnet.cbp.dhs.gov/HRM/Pages/covid19_resources.aspx
- CDC COVID-19 Website: <https://www.cdc.gov/coronavirus/2019-ncov/index.html>
- CDC COVID-19 Frequently Asked Questions (FAQ's): <https://www.cdc.gov/coronavirus/2019-ncov/faq.html>
- OSHA COVID-19 Webpage: https://www.osha.gov/SLTC/novel_coronavirus/
- CBP Respirator Medical Clearance's Website <https://resp-eval.foh.psc.gov/login/>
- CDC Guidance For Law Enforcement Personnel: <https://www.cdc.gov/coronavirus/2019-ncov/community/guidance-law-enforcement.html>
- OSHA Guidance For Border Workers: <https://www.osha.gov/SLTC/covid-19/controlprevention.html#border>