



THE PROBLEM

The COVID-19 pandemic has created an unprecedented worker health and safety crisis. Thousands of Massachusetts workers have been infected while employers continue to fail to provide basic, life-saving workplace safety protections. Government agencies responsible for protecting worker and public health at the federal and state level have failed to hold employers responsible, choosing to save businesses rather than save lives.

This report is meant to capture the devastating impact of the COVID-19 pandemic on worker safety and health.



WORKERS ARE GETTING SICK AND DYING

We know that people are being exposed to the coronavirus at work. What we don't know is how many workers have tested positive and how many have died as a result of their exposure at work. On April 10, a week before Massachusetts hit its peak of COVID-19 cases, OSHA relaxed the requirement to record work-related cases of COVID-19 for most businesses. The weaker regulation remained in effect until the end of May, causing work-related cases of COVID-19 to go unreported. In Massachusetts, health officials only began reporting the occupation of people tested for COVID-19 in July, after MassCOSH and the MA Public Health Association's COVID-19 Equity Task Force pushed legislators to pass a law requiring the data be collected. Even now, occupation data is still largely missing. Nearly 70% of positive COVID-19 case records from March 10 to July 31 - and 97% of all COVID-19 test records in that time - are missing the individual's occupation.



Not once has the state recorded the infected person's industry or employer, or whether they had worked during the prior two weeks.

In a survey conducted by MassCOSH, 12 essential worker unions reported that 1,350 of their members tested positive for COVID-19. Data from the Massachusetts Department of Public Health (DPH) total 14,950 cases with a known occupation. These numbers are just the tip of the iceberg, as 87,000 Massachusetts working-age residents (ages 20-69) tested positive for COVID-19 from March 10 to July 31.

According to data from DPH, 1,349 working-age (18-69) Massachusetts residents died of COVID-19 from March 10 through July 31. In most of those cases, there is no record of the individual's occupation, industry, employer, or whether the individual had worked outside the home during the two weeks before becoming sick. This report lists the 59 workers known to MassCOSH who died of COVID-19 after potentially being exposed at work.

Sadly, that number, which is already 59 too high, will likely continue to rise as we learn of more workers who were infected on the job and lost their lives.

313

The number of MA workplace safety complaints sent to the Attorney General's Office that mentioned employers failing to require that symptomatic employees stay home (from May through August).

TOP 10 JOBS WITH MOST COVID-19 CASES IN MA (MARCH 10 - JULY 31)

Rank	COVID-19 cases ¹	% of COVID-19 cases with known occupation ²			
#1	6,857	46%		MEDICAL PROFESSIONAL (including public health worker	
#2	1,936	13%		RETAIL FOOD WORKERS (restaurant & grocery store)	
#3	1,092	7%		ADMINISTRATIVE & OFFICE SUPPORT	
#4	1,081	7%		CONSTRUCTION	
#5	611	4 %	\$	SALES	
#6	599	4 %		EDUCATION & CHILDCARE	
#7	512	4%	₽ P	FIRST RESPONDERS (police, fire, EMS)	
#8	599	3%		TRANSPORTATION & MATERIAL MOVING OCCUPATIONS	
#9	472	3%	Misk	BUSINESS & FINANCIAL OPERATIONS	
#10	327	2%		HUMAN SERVICES (includes adult daycare workers)	

¹ From MA DPH Chapter 93 State Numbers. In addition to the case records above, another 9,124 cases listed "Other" under occupation.

² These 10 occupation categories total 94% of all cases with a known occupation. Engineers, food processing plant workers, computer specialists, hair & nail salon workers, correctional officers, and animal related professions make up the remaining 6%.

WORKERS ARE RAISING THE ALARM ABOUT DANGEROUS WORKING CONDITIONS...

This pandemic has created dangerous conditions at countless workplaces in Massachusetts. Workers on the frontlines have raised the alarm in unprecedented numbers. Missing from the statistics below are complaints made directly to local Boards of Health (BoH), which conduct a significant amount of health & safety enforcement, as well as complaints made to DPH at the beginning of the pandemic.

910

The number of workplaces inspected for unsafe COVID-19 working conditions by the Massachusetts Department of Labor Standards (DLS), from the first day of Reopening Massachusetts (May 18) to September 2.

689

The number of worker complaints made to OSHA about COVID-19 in Massachusetts as of August 23.

2,954

The number of complaints of unsafe workplace conditions made by workers and customers to the Attorney General's Office from mid-May (5/19) until the end of August (8/28).



...AND ARE BEING LEFT TO FEND FOR THEMSELVES

Enforcement of workplace health and safety standards is lacking in Massachusetts. When it does happen, it is in response to workers' complaints or a worker death, rather than proactive safety inspections. Instead, businesses have been allowed to reopen or remain open simply by "self-certifying" that they meet guidelines - without any third-party inspection.

42%

The percentage of worker complaints that led to DLS finding violations of COVID-19 safety requirements (in direct response to those complaints).

32

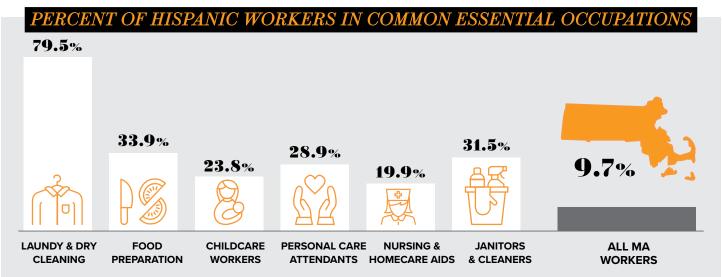
The number of OSHA inspections in MA related to COVID-19. Of these, only 9 are in response to a worker complaint. The other 23 are investigating a the death of a worker.

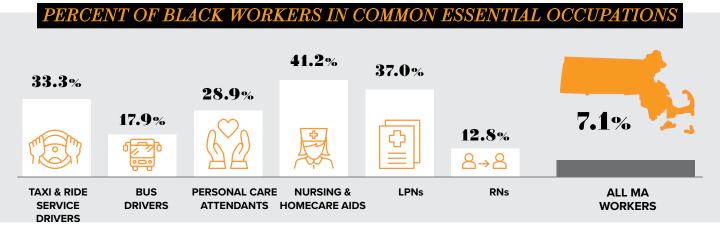
1

The number of workplaces cited by OSHA in Massachusetts for COVID-19 workplace safety violations, despite hundreds of worker complaints.

WORK IS PART OF WHY BLACK & BROWN WORKERS ARE HIT HARDEST BY COVID-19

People of color are more likely to work in essential and frontline jobs than white people, putting them at higher risk of workplace exposure to the coronavirus.





30% AND 14%

Hispanic residents make up 12% of the population, but their rate of positive cases is nearly 30%. Black residents represent about 7 percent of the population, but their rate of positive COVID-19 cases is double that, at 14 percent. The racial inequality of the pandemic is particularly notable in cities that are predominantly Black and Brown like Chelsea and in Boston's Mattapan, Hyde Park, Dorchester, and East Boston neighborhoods. Those areas, which have high proportions of essential workers, have had some of the highest rates of COVID-19 cases.

10 OUT OF 31

or 37% of elder care facility (nursing homes, etc.) workers who died were Black/African-American. Black people make up 7% of the Massachusetts workforce.



COVID-19 & A CORPORATE COVERUP CLAIM A WORKER'S LIFE

On May 3, **Yok Yen Lee**, a 69-year old Walmart employee in Quincy, passed away from COVID-19. Over a month before her death, store employees had complained to the Quincy Health Department that their co-workers were being allowed to work while showing symptoms of COVID-19. On April 3rd, a Walmart employee's positive COVID-19 test was reported to the Quincy Health Department. This would turn out to be the first of a 34-person outbreak among Quincy Walmart workers and family members.

In mid-April, Lee began to feel sick. Having been assigned to work outdoors in the chilly early Spring weather, she first suspected it was a cold. But by April 19th, Lee was too sick to work. The next day, her daughter, Elaine Eklund, couldn't reach her on the phone.

"

"I knew something was wrong," Eklund said. She asked her mother's neighbor to check on her, but Lee didn't come to the door.

The building manager had to cut the lock, where Lee was found unresponsive. "She couldn't tell what month it was." Eklund said.

"She didn't know what was going on."

"

Lee was brought to the hospital. The EMTs told her daughter that if she had been found only a few hours later, they would not have been able to sustain her breathing. "She would have died that day."

Lee had been trying to get time off since she first started feeling sick. Back in March, Walmart wrote to its employees about its new COVID-19 policy. Executives claimed "we want any associate who is not feeling well to stay home." But the nearly 240-billion-dollar company's policy required employees to use "regular paid time off options" if they chose to stay home. Because she had run out of sick time, a manager told Lee's sister that Lee should use vacation time.

Her time off had still not been approved by the time Lee was hospitalized. It was another week before Lee's time off was approved -- five days before she died.





This wasn't the first time that Walmart made it difficult for Lee to take sick time. Earlier, Lee had to take additional sick time when a doctor's appointment was rescheduled last minute.

According to her daughter, a manager said "this is the last time you take sick time, Lee."t

Eklund blames the lack of transparency at Walmart for her mother's death. Store managers pressured sick employees to take vacation time, apparently violating the company's own policy to pay employees under quarantine. Store management then covered up the outbreak, informing employees that their sick co-workers were on vacation.

Quincy Health Commissioner Ruth Jones was frustrated by that same lack of transparency when investigating the outbreak. Quincy's public health nurses had called the Walmart three times to do contact tracing and found managers uncooperative. "[...] we weren't given information very quickly," Jones told Boston 25 News.

After Lee's death, Jones and the Quincy Health Department forced the store to close and implement workplace safety protections. Before allowing the store to reopen, Jones and the Quincy Health Department inspected the store to ensure that it was in compliance with the requirements.

The Quincy location was not the only Walmart store hit hard by COVID-19. A Walmart employee in Lynn also died of COVID-19, and 81 employees tested positive during an outbreak at the Walmart in Worcester. At least 21 Walmart workers across the country have died of COVID-19 and 2000 have tested positive according to United for Respect, a retail worker advocacy group.



"It's ridiculous what Walmart did to her, how little they did to acknowledge it."

> - Elaine Eklund Daughter of Walmart worker Yok Yen Lee

IN MEMORIAM

The following is a list of workers who lost their lives to COVID-19 while working outside of their homes during the pandemic. We do not know how many Massachusetts workers have lost their lives to COVID-19. We do know of 59 workers who died of COVID-19 after potential workplace exposures. We honor them here, as we think of the many others whose names we may never know.

While the following list includes 61 entries, it includes two overlaps of nursing home workers who worked multiple jobs, increasing their exposure to, and potential transmission of, the coronavirus.



- ► RILEY RUMRILL

 Manager, Transdev/Boston Public Schools
- ► ANDY WONG, Inspector, MBTA
- ► VITALINA WILLIAMS, Retail Worker, Salem Market Basket and Lynn Walmart
- ► JAMES FOOTIT

 Radiology Technician, Family Care Medical Center
- ► MARIA KRIER

 Nurse, Life Care Center of Nashoba Valley
- ► **KETTELY DESIRE**, Certified Nursing Assistant (CNA), Alliance Health Brockton
- ► Rose Taldon, Nurse, New England Baptist Hospital
- ► CHARLES "CHARLIE" HOY
 Bus Driver, Transdev/Boston Public Schools
- ► JOSE FONTANEZ
 Police Officer, Boston Police Department
- ► LEON MARIN
 Grocery Store Worker, Swampscott Whole Foods

- ► PAUL MOORE, Maintenance Director, Charlwell House Health & Rehabilitation Center
- ► CATHY CAREY

 Housekeeping Worker, Lifecare Center of Attleboro
- **EMPLOYEE**, Brockton VA Hospital
- ► YVES EDOUARD

 Bus Driver, Transdev/Boston Public Schools
- ► CRESENCIA COLLETTI

 Grocery Store Worker, Belmont Star Market
- ► EMPLOYEE, Encompass Health Rehabilitation Hospital
- ► NORIUS "NONO" VALBRUN
 Bus Driver, Transdev/Boston Public Schools
- ► CATHERINE DROUIN

 Social Worker, Palm Center Chelmsford
- ► CERTIFIED NURSING ASSISTANT (CNA)
 Traditions Wayland
- ► CERTIFIED NURSING ASSISTANT (CNA)
 Alliance Health at Braintree

- ► YOK YEN LEE, Retail Worker, Quincy Walmart
- ► EMPLOYEE, Baypointe Rehabilitation & Skilled Care Center
- ► EMPLOYEE

 East Boston Neighborhood Health Center Winthrop
- ► CINDY LOCKLEAR, Licensed Practical Nurse (LPN), Marlborough Hills Rehabilitation Center
- ► **EMPLOYEE**, Tewksbury State Hospital
- ► ROSANNA "ROSE" WILSON, Certified Nursing Assistant (CNA), East Longmeadow Skilled Nursing Center
- ► **EMPLOYEE**, Benjamin Healthcare Center (1)
- **EMPLOYEE**, CareOne at Lowell
- Nurse, Jeanne Jugan Residence
- ► HOUSEKEEPING WORKER
 Lifecare Center of Attleboro
- ► HOUSEKEEPING WORKER

 Lifecare Center of Merrimack Valley (1)
- ► HOUSEKEEPING WORKER
 Lifecare Center of Merrimack Valley (2)
- ▶ NURSE, Benchmark Senior Living at Putnam Farm
- ► **IOHN SONGY**, Police Officer, Rutland Police Department
- ► **EMPLOYEE**, Benjamin Healthcare Center (2)
- ► **EMPLOYEE**, CareOne at Lexington
- ► CERTIFIED NURSING ASSISTANT (CNA), CareOne at Weymouth
- ► **EMPLOYEE**, Jeanne Jugan Residence
- ► BERNARD HAILSON, Holy Family Hospital Haverhill
- **EMPLOYEE**, Benjamin Healthcare Center (3)
- **EMPLOYEE**, St. Joseph Manor
- ► **EMPLOYEE**, Wingate at Silver Lake
- ► PATRICIA "PATTY" GOODALE, Certified Nursing Assistant (CNA), Life Care Center of Leominster
- ► CERTIFIED NURSING ASSISTANT (CNA)
 Life Care Center of the South Shore
- ► MYRNA GLORIA FAMANIA
 Certified Nursing Assistant (CNA), Whitney Place
- ▶ ROBERT DOIRON, Mental Health Counselor, UMass Memorial Hospital Marlborough



- ► CERTIFIED NURSING ASSISTANT (CNA)
 Blaire House of Tewksbury
- ► EMPLOYEE

 The Oxford Rehabilitation & Healthcare Center
- ▶ Francis Mee, Nurse, Tewksbury State Hospital
- ► CERTIFIED NURSING ASSISTANT (CNA)
 Bridges by Epoch at Sudbury
- ► **EMPLOYEE**, Maplewood Rehab and Nursing
- ► CERTIFIED NURSING ASSISTANT (CNA)
 All American Assisted Living at Hanson
- ▶ FOOD PREP WORKER, Garden Place Healthcare
- ▶ Nurse, Southwood at Norwell Nursing Center
- ▶ **DRIVER**, Stonebridge at Burlington
- ▶ Nurse. The Fitch Home
- **EMPLOYEE**, CareOne at Lowell (2)
- **► EMPLOYEE**, Highview of Northampton
- **EMPLOYEE**, Waltham Crossings
- ► CERTIFIED NURSING ASSISTANT (CNA)
 CareOne at Northampton
- Nurse, Connemara Senior Living

WHAT NEEDS TO BE DONE

TO STOP WORKERS FROM GETTING SICK AND DYING FROM COVID-19

Systemic racism has exacerbated COVID-19's impact on communities of Color. The following policies must be implemented equitably by prioritizing the needs of those hit hardest - Black, Brown, immigrant, and indigenous workers and communities.

AT THE FEDERAL LEVEL

- **Real national leadership** that coordinates prevention, testing, tracing, quarantine/isolation, treatment and vaccines, based on science and equity
- Pass the "HEROES" Act (already passed in the House as H.R. 6800), which would:
 - Promulgate an OSHA Emergency Temporary Standard to protect workers from airborne infectious disease
 - Use the Defense Production Act to increase production and supply of needed PPE and medical supplies
 - Extend unemployment insurance and expand mandated paid sick and family leave and other protections
- ▶ Return the CDC to its former status as an agency guided by science and acting in the interest of public health
- **Significant staffing increases at OSHA**, and vigorous, ramped-up enforcement of all applicable OSHA standards and of the "general duty clause" that requires employers to ensure safe workplaces
- Stop any federal efforts to expand who is deemed an "independent contractor," which would make it easier for companies to avoid providing health, safety, and other protections to workers, including low-wage, immigrant, and workers of color

AT THE STATE & LOCAL LEVEL

- Ensure that the Massachusetts Department of Labor Standards creates and enforces strong COVID-19 regulations to protect all public and private sector workers (including but not limited to those in healthcare, grocery stores, restaurants and schools), with requirements for robust ventilation and filtration systems in all indoor environments
- ▶ Promulgate an **Emergency Temporary Standard on airborne infectious diseases** for the Commonwealth of Massachusetts to cover both public and private sector workplaces
- Establish requirements, incentives and support for relevant Massachusetts employers to produce needed PPE, testing and other medical supplies
- Support the Massachusetts Department of Public Health and Local Boards of Health to improve collection of information about race/ethnicity, industry, occupation and employer in COVID-19 cases to help identify and limit workplace outbreaks and address disparate impacts on communities of color
- Provide staffing, funding and support for state, regional and local public health infrastructure to enable robust enforcement of COVID-19 Workplace Safety Regulations and timely, informed data collection and data-driven action to address this (and future) pandemic(s)
- ▶ Urge the Attorney General's Office to use the full range of its available authority to hold employers accountable and maximize the protection of Massachusetts workers
- Pass "occupational presumption" legislation so that any worker reporting to work outside their home who contracts COVID-19 during the pandemic is presumed to have become ill from workplace exposure and can get the workers' compensations benefits they deserve
- Pass legislation that would expand paid sick leave benefits and provide additional protections and needed support to immigrant and low-wage workers

WORKER ORGANIZING GETS THE GOODS

Workers have been left to fend for themselves, and so they have. Throughout the pandemic, workers across the state have fought to ensure that to earn a livelihood is not a death sentence.



FISHING FOR JUSTICE & COVID-19 WORKER PROTECTIONS AT FISH PROCESSING PLANTS

New Bedford is the most valuable fishing port in the US, but for years its largely immigrant workforce has struggled with dangerous working conditions and unfair pay. Typical conditions in fish processing plants-crowded shoulder to shoulder, messy, and wet-are potential hotbeds for spread of the virus. What protective measures company owners had taken were inadequate, and several workers had already fallen ill. Worker activists with the Pescando Justicia (Spanish for "Fishing for Justice") campaign needed their concerns to be heard. So on April 13, workers delivered letters to over 30 companies, advocating for maximum safety protocols and a pay bump that recognizes the risks they're facing. Days later, the New Bedford Health Department shuttered one of the plants for deep cleaning, and on May 5, the Mayor issued an emergency order mandating vigorous COVID-19-related safety protections at all industrial plants, and compliance with all applicable sick pay laws.

"[The fish plant owners] knew that their workers were suffering, but they just ignored it until the workers and [the Pescando Justicia] coalition delivered their letter."

- Adrian Ventura Director of Centro Comunitario de Trabajadores (CCT New Bedford).

ONLY WHEN IT'S SAFE -FIGHTING FOR THE HEALTH OF STUDENTS & EDUCATORS

When the Department of Elementary and Secondary Education (DESE) and many school districts ignored airborne transmission of coronavirus, educators and school staff did their homework about airborne virus aerosols and ventilation. They held and attended health & safety committee meetings, trainings, and forums, pored over scientific research, and studied air quality and building ventilation reports. But they didn't only read about the problem - they took action, too. They filled school committee hearings, bargaining tables, and the streets, demanding that in-person school resume #OnlyWhenItsSafe.



66

Only #When Its Safe

Can we ask teachers &

Students to go back to

IN PERSON LEARNING

SAY NO TO HOPSCOTCH PLAN!

At the state level, the Massachusetts Teachers Association, the American Federation of Teachers MA, and the Boston Teachers Union negotiated collectively with DESE to win a delayed start to the school year and additional time for workers to be trained and prepare for the school year. School nurses, teachers, parents, bus drivers, cafeteria workers, school librarians, support staff, and custodians formed the Coalition to Safely Reopen Schools to advocate that student and worker health be prioritized over the rush to reopen.

In districts across the state, educator and school employee unions have demanded that building ventilation and filtration systems be tested and upgraded or installed - and that buildings not reopen until then. As of the first week of September, 63 Massachusetts school districts are starting remotely, and only a handful are starting fully in person.

"Ensuring a safe return to schools and colleges is a public health issue. Educators travel to their school buildings and college campuses from dozens and in many instances from over a hundred different communities. When we travel, so do the germs and viruses that we carry. Many public health and medical experts now believe that children can carry and spread COVID-19. Educators through their unions are doing our part to advocate for safety measures to be put in place systemically and to redesign virtual learning. We will not stop until the state does its part to protect our students and families, our educators and our communities."

- Merrie Najimy President, Massachusetts Teachers Association "Let's be clear. Teachers want to get back to teaching. It's what we love. And we know that inperson classroom instruction is best. But ignoring these problems and forcing educators and students into the classroom before it is safe will only result in outbreaks that set us back. Instead of pushing school districts to open prematurely, Governor Baker and his administration should focus on removing two of the biggest obstacles to safe inperson learning: the lack of rapid virus testing, and inadequate indoor air quality."

- Beth Kontos President, American Federation of Teachers Massachusetts

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WHAT CAN WORKERS DO?

Take action with your co-workers to demand necessary workplace health protections, remote work, paid quarantine time, and more. In unionized workplaces, use contract language and collective bargaining rights to improve COVID-19 protections and protect workers from employer retaliation. Create or strengthen union health and safety committees (or COVID-19 committees) to guide the union's efforts in dealing with management on COVID-19-related issues. In workplaces without unions, worker or worker-community committees can be formed to do the same.

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- ▶ Inspection Records and COVID-19 Complaint Data, Occupational Safety and Health Administration
- ▶ Chapter 93 Elder Facilities and State Numbers Daily Reports, Massachusetts Department of Public Health
- ▶ Workplace Safety Complaint Data, Massachusetts Attorney General's Office
- ▶ Worker Health and Safety Program COVID-19 Case Tracking Data, Massachusetts Department of Labor Standards
- ▶ COVID-19 Nursing Home Dataset, Centers for Medicaid and Medicare Services
- ACLU Massachusetts review of Boston Public Health Commission Data and U.S. Census Data
- ► Massachusetts & National News Stories
- ▶ Information from the following unions: AFSCME, Beverly Police Benevolent Association, Boston Carmen's Union, Elevator Constructors Local 4, Local 888 SEIU, Massachusetts Nurses Association, Professional Fire Fighters of MA, State Police Association of Massachusetts, Transit Workers Union, United Food and Commercial Workers Local 1445, United Steelworkers Local 8751.





MASSCOSH

MassCOSH bring together workers, unions, community groups, and health, safety and environmental activists to organize and advocate for safe, healthful jobs

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MASSACHUSETTS AFL-CIO

The Massachusetts AFI-CIO empowers and supports workers in their effort to promote justice, educate the public about the value of unions, and improve the economic stability and security of working families and communities throughout the Commonwealth

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