

MEETING: Rail Industry Coronavirus Forum (RICF)
DATE: 2nd September 2021
SUBJECT: Cab access – transitioning away from bubbles and testing
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1. Purpose

- 1.1 The purpose of this paper is to set out a proposal that will enable the industry to transition back to pre-COVID arrangements with regards to cab access.

2. Background

- 2.1 The coronavirus (COVID-19) pandemic caused the industry to agree and implement a range of mitigation measures to reduce transmission risk in the workplace. These measures included the introduction of the training bubble concept, whereby interactions between different employees were effectively managed through a buddying arrangement, keeping employees together in pairs throughout the duration of related activities where social distancing guidelines could not always be maintained. Furthermore, asymptomatic and temperature testing was introduced to provide participating employees with a level of assurance with regards to the health of the bubble.
- 2.2 The SARS-CoV-2 coronavirus will not be eradicated but will become endemic, continue to circulate, mutate and cause local or seasonal waves of infection, much like flu. In countries where vaccination is high or other control measures are in place (such as border screening in New Zealand), negative impacts from the presence of the virus including death, illness and social isolation will lessen.
- 2.3 The COVID-19 vaccine trials demonstrated high levels of efficacy. This has been further supported by real-world vaccine effectiveness studies which indicate 50 to 70% protection against infection or mild disease after a single dose of either BNT162b2 [Pfizer/BioNTech] or AZD1222 [Oxford/AstraZeneca], 75 to 85% protection against hospitalisation or death. After two doses effectiveness reaches 65 to 90% against infection or mild disease, and 90 to 100% against severe disease.^[1]
- 2.4 The real-world vaccine effectiveness studies appear to support the UK Government's decisions to ease restrictions, as the protection afforded by the vaccines are proven to protect against infection, mild disease, hospitalisation, or death.

¹ [Whitaker, H.J. Et Al \(2021\) Pfizer-BioNTech and Oxford AstraZeneca COVID-19 vaccine effectiveness and immune response among individuals in clinical risk groups.](#) Online [Accessed 28.07.2021]

- 2.5 The UK vaccination programme utilises vaccines that are clinically proven to be 65 to 90% effective against infection or mild disease, and 90 to 100% against severe disease; and with >75% of the adult population having received their 2nd dose it would seem the UK vaccination programme is mitigating the risk of severe disease.
- 2.6 However, even though the UK vaccination programme is proving to be effective, the virus (COVID-19) is still in circulation and will continue to present a public health risk for years to come, but for the majority of the population, particularly those fully vaccinated, the impact is expected to be short-term and less severe in terms of symptoms.

3. Proposal

- 3.1 The success of the vaccination programme when coupled with the results of the real-world vaccination studies should provide us with the confidence to now review the temporary arrangements that were put in place to mitigate workplace transmission in the context of in-cab activities involving more than one person.
- 3.2 It is proposed that going forward employers can assume that the majority of employees have had the opportunity to be fully vaccinated. As a consequence, the mandatory default requirement for training bubbles and associated asymptomatic / temperature testing arrangements are to be withdrawn (see section 3.3). The return to pre-pandemic arrangements will be supported by a communication campaign that explains the basis for the change and amplifies the Government's expectation for citizens to help mitigate residual risk by following their guidance on how to stay safe and help prevent the spread of the virus^[2].

Note for guidance: In accordance with pre-COVID arrangements the booked driver has the right to refuse access to their driving cab for other than those scenarios covered within the Rule Book.

- 3.3 It is acknowledged that a small proportion of employees will continue to be anxious about participating in in-cab training, development or assessment activities, for example, due to not being fully vaccinated or personal factors that cause legitimate concern. Therefore, employers with support from trade unions will encourage such employees to raise their personal concerns with their employer directly or through their local representatives so that the individual's specific circumstances will be discussed and reasonable adjustments considered as part of the employer's individual risk assessment process.

Note for guidance: The request for employees to identify themselves is legitimate, as it enables the employer to continue to satisfy their obligation(s) to the employee with regards to their health, safety and wellbeing in the workplace. The employee should be assured that identifying themselves will be treated confidentially, not be associated with any stigma or lead to them being treated unfairly. This will enable the employer to discuss the reasonable adjustments necessary to mitigate the risk of transmission in the workplace and/or to address individual circumstances.

² [GOV.UK: Coronavirus – how to stay safe and help prevent the spread](https://www.gov.uk/coronavirus-how-to-stay-safe-and-help-prevent-the-spread). Online [Accessed 28.07.2021]

- 3.4 Where the employer identifies a legitimate reason that an employee is not reassured then the employer will brief them on the generic measures that are in place to mitigate the risk, that is to say those measures emerging from their COVID risk assessment, for example, cab cleaning regimes and the use of active cleaning products. The employer may determine there is a need for further reassurance³, which may include: limiting exposure to the risk by reducing interactions with others throughout the in-cab activities by offering access to a training bubble concept.
- 3.5 Employers requiring employees to access the cabs of other train operators⁴ should review their current arrangements to assure themselves and others that in-cab transmission risk can be effectively mitigated, taking into consideration existing control measures, including the protection afforded by vaccination.
- Note for guidance: The arrangement between train operators to facilitate cab access should be robust and provide employees with assurance that any other employee seeking to access a driving cab is authorised to do so and fully vaccinated, or transmission risk is mitigated effectively through reasonable adjustments.*
- 3.6 The above proposal recognises the changing risk profile of the virus (COVID-19) and objectively sets out the rationale to facilitate the removal of the temporary cab access arrangements for the majority of employees; but makes provision for employees to access additional assurance on a case-by-case basis through reasonable adjustments.
- 3.7 Assuming the proposal set out above is supported then each employer should collaborate with their trade union representatives to develop a migration plan that delivers the change. The timescales associated with this will be determined by each employer, taking into consideration the need to communicate the change to all affected, and to provide sufficient time for reasonable adjustments to be implemented. The expectation is that all employers will have completed the transition by the 20th September 2021.

4. Recommendations

- 4.1 The Rail Industry Coronavirus Forum **DISCUSSED** the content of this paper on the 2nd September 2021 and **ENDORSED** the proposal set out in section 3, **NOTING** that it would subsequently be presented to trade union Executive Committees.

³ Employees can utilise the Government's free lateral flow tests (LFTs).

⁴ The freight sector is not represented at RICF, therefore cab access arrangements between freight and passenger operators require further consideration / consultation