

Back to Business Playbook:

Compliance and Risk Management
Considerations during the COVID-19
Pandemic

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The COVID-19 pandemic challenges all aspects of work. As businesses attempt to return to work, there are many new liability risks and employer obligations to consider. How an employer assesses, implements, and communicates new policies and procedures will have a lasting impact on employee productivity, engagement, and commitment.

[HUB Risk Services](#) developed this playbook to assist clients in developing their risk mitigation strategy and coverage-specific issues related to people, property, and loss prevention. The team is available to help clients navigate the uncharted and uncertain territory ahead.

I. Employee Health, Safety and Compliance

As state and local officials begin to loosen and lift restrictions, employers want to return employees to the workplace or continue managing the essential employees who have remained at work. Each federal agency charged with the health and safety of workers has issued new guidance regarding employee relations and business operations in the COVID-19 crisis. Employers must develop and implement strategies for employee safety, legal liabilities, and planning for future setbacks or changes in requirements.

Reduce anxiety by consistently implementing policies and procedures. Additionally, employers should provide clear and regular communication about working conditions along with any scientific, public policy, and/or medical guidance changes.

A. Employer's Obligations and Liability for Safety

The OSHA General Duty Clause states that each employer:

1. shall furnish to each employee, employment and a place of employment which are free from recognized hazards that are causing or are likely to cause death or serious physical harm to his employees;
2. shall comply with occupational safety and health standards promulgated under this Act.

Each employer must comply with occupational safety and health standards pursuant to the General Duty Clause which are applicable to the employee's own actions and conduct.

In addition to the OSHA obligations, employers may also face liability from employees seeking compensation. In most situations, employers believe an employee who experiences an injury or illness in the workplace may be covered by workers' compensation insurance. However, workers' compensation generally does not respond to a pandemic unless there is demonstrable proof that the condition was solely contracted within the course and scope of the job duties. For example, most workers' compensation carriers have agreed that first-responders and healthcare



professionals would likely receive coverage for a COVID-19 claim, but this will vary from state to state.¹

Most workers' compensation state statutes include a provision called the "exclusive remedy" provision. The exclusive remedy provision provides that an employee's only course of action and remediation is through the workers' compensation claims process unless the employee experiences retaliation by the employer.

Because workers' compensation carriers may not cover COVID-19 cases, the exclusive remedy provision does not apply and employee-litigants (and their attorneys) are free to pursue other legal causes of action (absent any state statutes to the contrary). Consequently, one area of litigation that appears to be gaining traction is employer negligence. Recently, cases have been filed against employers arguing that the employer did not act reasonably to provide a safe working environment to their employees. Most recently, in a case filed against Wal-Mart, the plaintiff-employee's estate claimed that Wal-Mart did not provide Personal Protective Equipment (PPE) to its employees, did not provide cleaning or disinfectant products, and did not pre-screen workers to prevent the transmission of the virus. It is likely there will be more litigation like this alleging negligence by the employer.

It's important that employers understand their obligations and their rights to mitigate and manage the risk of working in the new COVID-19 environment.

B. Employer Policies

Employers should consider creating new policies and standards of conduct for employees in the workplace related to COVID-19. More specifically, employers should set forth clear rules, processes, and expectations for employee behavior.

New policies may include:

1. Standards of conduct including handwashing, hand sanitizing, sharing of equipment, dissemination of hard-copy documents, donning and doffing of PPE, social distancing, and workstation cleaning and disinfecting.
2. Details and consequences regarding prohibited conduct and failure to comply with the standards of conduct such as coming to work with COVID-19 symptoms, failure to socially distance in the workplace, failure to wear and utilize PPE, and failure to disinfect/clean working areas and equipment.
3. Rules regarding entering and exiting the building to ensure social distancing – for example only two people in an elevator at one time and/or the requirement to wash one's hands before entering the office or workspace.

¹ For those states that are part of the NCCI (National Council on Compensation Insurance), refer to the latest information at: <https://www.ncci.com/>. For other states or provinces, refer to that jurisdiction's Department of Labor website for guidance.

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4. New procedures and policies regarding calling in sick, incentives to remain home when sick rather than come into the office (even if the employee feels they can work), and what circumstances or symptoms require (or mandate) employees to remain home.
 5. As schools remain closed, employees will continue to face the challenges of balancing child-care and work. When employers begin to recall employees, employees will find themselves facing childcare challenges and may request permission to bring children to the workplace. Employers will face a significant challenge adhering to social distancing requirements if they allow employees and their children to be present in the workplace. In fact, in the early stages of re-opening, employers will likely bring back a small percentage of the total employee population to facilitate social distancing and limit risk and exposure. Adding children to the number of people in the workplace would be counterproductive and hinder the employer's efforts to mitigate the risk of COVID-19 in the workplace.

Employers should disseminate new policies to employees and require the employees to sign an acknowledgement that includes the obligation to read and comply with the policies. In addition, employers should explain the consequences for failure to comply. Finally, the acknowledgement should remind employees that they are employed “at will” and that compliance does not provide a guarantee of continued employment. In an effort to limit risk and exposure, employers should consider leveraging their technology to deliver employee communications including new policies. Most HR, payroll and/or learning management systems have functionality to enable electronic distribution and acknowledgement tracking. Consider leveraging these systems to complete this process, which in turn align with new safety protocols.

i. Medical Questions – the General Rule

Confidentiality of Medical Information

As employers begin to learn about employee's individual medical concerns and conditions, it is important to remember that several laws have very specific confidentiality requirements. FMLA, ADA, and Workers' Compensation laws all contain provisions that protect the confidentiality of an employee's medical information. Employers have the obligation to ensure that all medical information obtained about an employee is private and confidential. Medical information gathered through the FMLA, ADA, disability insurance, workers compensation, or other sick-leave documentation is generally not protected under HIPAA but is confidential.

Health Insurance Portability Accountability Act (HIPAA) Requirements

Depending on the source of the medical information, employers may also face HIPAA privacy obligations. While HIPAA can be a complex law, in a nutshell, if the employer learns of the employee's medical information, condition, diagnosis etc. through the health plan, then that information is likely protected under HIPAA.

Generally, HIPAA obligations manifest themselves most frequently in employers with a self-funded health program that have access to claims information. Self-funded programs include health flexible spending arrangements and health reimbursement arrangements. However, employers that receive employee's Explanation of Benefits (even if fully insured)

may unintentionally subject themselves to HIPAA. HIPAA also generally prohibits an employer from discriminating against an employee who has a medical condition.

1. Recruiting and Hiring

Prior to the impact of COVID-19 in the United States, the primary resources candidates used to find jobs were: (1) online job boards (60%); (2) social professional networks (56%); and (3) word of mouth (50%).² Today, in the new COVID-19 environment, many employers have already transitioned to a virtual workforce. Likewise, employers will have to rethink their recruitment and hiring strategies.

With the implementation of social distancing rules, the days of in-person applications, interviews, and new-hire orientation may be over (at least for some time into the near future). This means employers who have not already implemented online recruitment and remote interviewing methods will find themselves in uncharted territory. Likewise, the employer screening process for rehires may also change.

The good news is that technology and virtual recruiting and hiring is not new to the recruitment and hiring industry. More specifically, many employers have been relying on job-boards, virtual interviews, and online onboarding for many years. For example, online Applicant Tracking Systems (ATS) are a standard module of most HR Information Systems (HRIS). Employers should connect with their current payroll providers to explore their system's capabilities to assist with online staffing efforts. Additionally, HUB clients have access to technology consultants who can assist clients with selecting and implementing online recruitment and hiring technology.

In addition to online recruitment resources, state agencies may prove to be a robust candidate resource. According to the Department of Labor:

*The advance number for seasonally adjusted insured unemployment during the week ending April 11 was 15,976,000, an increase of 4,064,000 from the previous week's revised level. This marks the highest level of seasonally adjusted insured unemployment in the history of the seasonally adjusted series.*³

This means that there are now hundreds of thousands of job candidates registered with each state's unemployment agencies. Along with paying wage replacement benefits to unemployed Americans, unemployment agencies (the names for these agencies vary by state) also provide job search and recruitment support. For example, Florida's Department of Economic Opportunity (the Florida agency charged with managing unemployment claims) has an entire division dedicated to reemployment providing job opportunities, offering resume assistance, and providing interviewing tips. As part of their recruitment strategy, employers may partner with their state unemployment agency to identify qualified talent. The even better news is that most unemployment agencies are set up for online sourcing, searching, and recruitment.

2. Temp Employees (Labor Contractor Protocols)

² https://business.linkedin.com/content/dam/business/talent-solutions/global/en_us/c/pdfs/Ultimate-List-of-Hiring-Stats-v02.04.pdf

³ <https://www.dol.gov/ui/data.pdf>



Another recruitment and hiring solution for employers may be contract labor (i.e. “temps”). One of the advantages of contract labor is that the agency generally takes on the responsibility for recruitment and hiring of the worker. Outsourcing the recruitment and hiring provides some relief to employers that are not prepared for remote, virtual, and online processes. Additionally, employers will be able to set the standards for pre-screening candidates. For example, many employers currently require their staffing agencies to conduct pre-employment drug screening and background checks and may specifically identify the scope and nature of these prescreening programs. Today, employers may add another form of prescreening – employers may require the staffing agency to conduct COVID-19 diagnostic testing for each candidate. Therefore, candidates may now have to satisfy criminal, drug, and medical testing – all of which a staffing agency can perform (generally through third-party vendors) for their employer-clients.

3. Screening Applicants and New Hires

Employers that are hiring and filling open positions may screen applicants for symptoms of COVID-19. More specifically, an employer may screen job applicants for symptoms of COVID-19 after making a conditional job offer, if it does so for all entering employees in the same type of job. Such screening may include requiring the applicant to successfully complete a COVID-19 pre-employment diagnostic test. Likewise, a hiring employer may take an applicant’s temperature as part of the post-offer/pre-employment medical exam. However, employers should be aware that some individuals with COVID-19 do not have a fever or show any signs of symptoms from the virus.

Employers who are concerned about starting an applicant with symptoms may delay the applicant’s start date. In fact, the CDC is clear that an individual who has COVID-19 or associated symptoms should not be in the workplace. Likewise, an employer may withdraw a job offer when it needs the applicant to start immediately but the individual has COVID-19 symptoms. However, the employer may **not** postpone the start date or withdraw a job offer because the individual is 65 years old or pregnant, both of which place them at higher risk from COVID-19. The fact that the CDC has identified those who are 65 or older, or pregnant women, as being at greater risk does not justify unilaterally postponing the start date or withdrawing a job offer to a candidate. However, an employer may choose to allow telework or discuss with these individuals whether they would like to postpone the start date.

4. Screening Current Employees

In addition to pre-screening applicants, employers may conduct daily COVID-19 related pre-screening of employees who are going to the work location (see the employee screening form at the end of this bulletin). In fact, the CDC specifically recommends:

- a. Consider conducting routine, daily COVID-19 health screening (e.g., temperature and symptom screening) of all employees.
- b. Employers that implement daily COVID-19 health screening must ensure they do so in a manner that protects the confidential medical information of the employees (see above Confidential Medical Information).
- c. Encourage employees who are sick to stay at home.

People with COVID-19 have had a wide variety of symptoms – ranging from mild to severe illness. Symptoms may appear 2-14 days after exposure to the virus. People with [these CDC Symptoms](#) may have COVID-19. The CDC list does not include all possible symptoms. CDC will continue to update [this list](#) as it learns more about COVID-19.

- Fever/Chills
- Fatigue
- Headache
- Sore Throat
- Nausea/Vomiting
- Shortness of Breath/Difficulty Breathing
- Cough
- Muscle/Body Aches
- New Loss of Taste/Smell
- Congestion/Runny Nose
- Diarrhea

Employers may also ask employees:

- Are you currently waiting for COVID-19 test results?
- Have you tested positive for COVID-19?

5. Current Employees Exposure to Others

Likewise, employers should ask the following questions of current employees coming into the work location regarding their exposure to others who may have COVID-19:

- a. Have you self-quarantined? If so, how many days and why? (remaining in your home and participating in outdoor activities without coming closer than 6-feet from others)
- b. Have you been exposed to anyone currently waiting for COVID-19 test results?
- c. Have you been exposed to anyone who has tested positive for COVID-19?
- d. Have you been exposed to anyone with any of the CDC specified symptoms (see above)?
- e. Have you traveled outside your state or regional area?

It is important to note that employers may only ask these questions of employees who are coming into the workplace. Employers may not ask COVID-19-related medical questions of employees working remotely and telecommuting. Likewise, employers are not free to ask other medical questions unrelated to COVID-19 unless those questions are consistent with the ability to perform the essential functions of the job.

Employers should ensure that the person conducting the screening follows and complies with Personal Protective Equipment (PPE) guidelines such as wearing a mask, gloves, protective eyewear, and other devices to ensure their safety. The employer and the person handling the temperature checking (and any other screening measures) must ensure that they follow and enforce safety measures such as social distancing. For example, the “screener” must ensure that employees who are “waiting to be screened” remain at least 6 feet apart before entering the workplace. There should also be considerations made for the proper documenting, handling and managing the medical results of employees to ensure the information is kept confidential.

Note: Non-exempt employees who are “waiting” to be screened at the beginning of each workday may need to be paid for that “waiting” time. Therefore, employers should check with local employment law counsel regarding the wage and hour (FLSA) requirements.

ii. Employee COVID-19 Diagnostic Testing

On April 23, 2020, the EEOC provided [updated guidance](#) (see FAQ A.6) paving the way for employers to conduct COVID-19 diagnostic testing.⁴ More specifically, the EEOC specifically reminded employers that any mandatory medical test of employees be “job related and consistent with business necessity.” It is within this framework that the EEOC has stated that employers may take steps to determine if [employees entering the workplace have COVID-19](#) because [an individual with the virus will pose a direct threat](#)⁵ to the health of others.

Consistent with the ADA standard, employers should ensure that the tests are accurate and reliable. The EEOC suggests that employers review guidance from the U.S. Food and Drug Administration about what may or may not be considered safe and accurate testing, as well as guidance from CDC or other public health authorities, and check for updates. It is also important for employers to consider the accuracy of the testing and the incidence of false-positives or false-negatives associated with a particular test. The EEOC cautions that accurate testing only reveals if the virus is currently present; a negative test does not mean the employee will not acquire the virus later.

⁴ It's important to note that antibody testing has not been approved by the EEOC.

⁵ “Direct threat” means a significant risk of substantial harm that cannot be eliminated or reduced by reasonable accommodation. 29 C.F.R. §1630.2(r)(1998). Direct threat determinations must be based on an individualized assessment of the individual's present ability to safely perform the essential functions of the job, considering a reasonable medical judgment relying on the most current medical knowledge and/or best available objective evidence. Id. To determine whether an employee poses a direct threat, the following factors should be considered: (1) the duration of the risk; (2) the nature and severity of the potential harm; (3) the likelihood that potential harm will occur; and, (4) the imminence of the potential harm. 42 U.S.C. §12112(d)(3)(1994); 29 C.F.R. §1630.14(b)(1998).

1. How to Test

Employers may adopt one of at least two approaches to testing:

a. **Employer Administered Testing**

Employer testing of employees is wrought with complexity and is not something that an employer should take lightly or casually. Testing for COVID-19 is a medical diagnostic test that obtains confidential and private health information from an employee in the employment setting which means handling and managing this information is highly regulated. Additionally, the testing requires taking a nasal swab from the employee – this is the procurement of a bodily fluid which in turn subjects the employer to rigorous OSHA rules, including the very complex [Blood Borne Pathogen](#) rules. It would be prudent for employers to work with their outside counsel and the HUB Risk Services Division to set up an internal program.

b. **Vendor/Outsourced Testing**

Employers may choose to outsource their testing program. In this case, employee testing would resemble other similar employment physical and screening programs. Employers should be sure that they thoroughly vet testing vendors including the testing methods and accuracy and efficiency of the equipment/test-kits. They likewise should have their attorney review the program, process, and service agreement (if any). In fact, the EEOC contemplates that employers may outsource these services advising that “[a]n employer also may be given reliable information by a credible third party that an employee has a medical condition, or the employer may observe symptoms indicating that an employee may have a medical condition that . . . will pose a direct threat.” Outsourcing the testing program may shift some of the compliance obligations directly to the vendor which may provide some relief to the employer.

2. When to Test

Employers may adopt a regularly scheduled approach to medical testing or may choose to test on case-by-case basis if an employee manifests symptoms or exposure. For example, if an employee presents with symptoms during a daily screening (see above) the employer may require the employee to receive a test provided by a third-party vendor (similar to reasonable suspicion testing). Likewise, employers may require an employee to submit to a COVID-19 test if they learn of an employee’s symptoms through a co-worker. The EEOC provides the following very relevant example:

Example: *Bob and Joe are close friends who work as copy editors for an advertising firm. Bob tells Joe that he is worried because he has just learned that he had a positive reaction to a tuberculin skin test and believes that he has tuberculosis. Joe*

encourages Bob to tell their supervisor, but Bob refuses. Joe is reluctant to breach Bob's trust but is concerned that he and the other editors may be at risk since they all work closely together in the same room. After a couple of sleepless nights, Joe tells his supervisor about Bob. The supervisor questions Joe about how he learned of Bob's alleged condition and finds Joe's explanation credible.

Because tuberculosis is a potentially life-threatening medical condition and can be passed from person to person by coughing or sneezing, the supervisor has a reasonable belief, based on objective evidence, that Bob will pose a direct threat if he in fact has active tuberculosis. Under these circumstances, the employer may make disability-related inquiries or require a medical examination to the extent necessary to determine whether Bob has tuberculosis and is contagious.

The employers' approach to mitigating risk through employee screening should be part of a larger and more holistic risk management program that also includes other infection control practices (such as regular cleaning, disinfecting, social distancing, regular handwashing, PPE, and other measures) in the workplace to prevent transmission of COVID-19.

iii. **Responding to Symptomatic and/or Diagnosed Employees**

Part of any workplace readiness program should include specific protocols for managing scenarios that include symptomatic and/or employees diagnosed with COVID-19. The [CDC specifically recommends](#):

1. Conduct daily COVID-19 health screening
2. Employees with symptoms (CDC list of Symptoms) at work should immediately be separated and sent home.
3. Establish procedures for safely transporting anyone sick to their home or to a healthcare facility.
4. Notify local health officials, staff, and customers (if possible) immediately of a possible case while maintaining confidentiality consistent with the Americans with Disabilities Act (ADA) and other applicable federal and state privacy laws.
5. Close off areas used by the sick person until after cleaning and disinfection. Wait 24 hours to clean and disinfect. If it is not possible to wait 24 hours, wait as long as possible before cleaning and disinfecting. Ensure safe and correct application of disinfectants and keep disinfectant products away from children.
6. Inform those who have had close contact to a person diagnosed with COVID-19 to stay home and self-monitor for symptoms, and to follow CDC guidance if symptoms develop. If a person does not have symptoms follow appropriate CDC guidance for home isolation.

- 7. Sick employees should not return to work until they have met CDC's criteria to discontinue home isolation (see below as well).

iv. **Return to Work for Symptomatic and/or Positively Diagnosed Employees**

The decision to discontinue home isolation for persons with confirmed or suspected COVID-19 should be made in the context of local circumstances. The CDC [options include a symptom-based \(i.e., time-since-illness-onset and time-since-recovery strategy\) or a test-based strategy.](#)

1. **For Persons with COVID-19 Under Isolation**

a. **Symptom-based strategy**

Persons with COVID-19 who have symptoms and were directed to care for themselves at home may discontinue isolation under the following conditions:

- At least 3 days (72 hours) have passed *since recovery* defined as resolution of fever without the use of fever-reducing medications and improvement in respiratory symptoms (e.g., cough, shortness of breath); and,
- At least 10 days have passed *since symptoms first appeared*.

b. **Test-based strategy**

A test-based strategy is contingent on the availability of ample testing supplies and laboratory capacity as well as convenient access to testing.

Persons who *have* COVID-19 who *have* symptoms and were directed to care for themselves at home may discontinue isolation under the following conditions:

- Resolution of fever without the use of fever-reducing medications;
- Improvement in respiratory symptoms (e.g., cough, shortness of breath); and
- Negative results of an FDA Emergency Use Authorized COVID-19 molecular assay for detection of SARS-CoV-2 RNA from at least two consecutive respiratory specimens collected ≥ 24 hours apart (total of two negative specimens). All test results should be final before isolation is ended. Testing guidance is based upon limited information and is subject to change as more information becomes available. See [Interim Guidelines for Collecting, Handling, and Testing Clinical Specimens from Persons for Coronavirus Disease 2019 \(COVID-19\)](#).

2. **Persons who have NOT had COVID-19 Symptoms but Tested Positive and are Under Isolation:**

Options include both a time-based strategy and test-based strategy.

a. Time-based strategy

Persons with laboratory-confirmed COVID-19 who have not had any symptoms and were directed to care for themselves at home may discontinue isolation under the following conditions:

- At least 10 days have passed since the date of their first positive COVID-19 diagnostic test assuming they have not subsequently developed symptoms since their positive test.
- **If they develop symptoms, then the symptom-based or test-based strategy should be used.** Note, because symptoms cannot be used to gauge where these individuals are in the course of their illness, it is possible that the duration of viral shedding could be longer or shorter than 10 days after their first positive test.

b. Test-based strategy

Persons with laboratory-confirmed COVID-19 who have not had any symptoms and were directed to care for themselves at home may discontinue isolation under the following conditions:

- Negative results of an FDA Emergency Use Authorized COVID-19 molecular assay for detection of SARS-CoV-2 RNA from at least two consecutive respiratory specimens collected ≥ 24 hours apart (total of two negative specimens). See [Interim Guidelines for Collecting, Handling, and Testing Clinical Specimens from Persons for Coronavirus Disease 2019 \(COVID-19\)](#).
- Note, because of the absence of symptoms, it is not possible to gauge where these individuals are in the course of their illness.

The symptom-based, time-based, and test-based strategies may result in different timeframes for discontinuation of isolation post-recovery. For all scenarios outlined above, the decision to discontinue isolation should be made in the context of local circumstances.

3. Employees Exposed to COVID-19 but Not Diagnosed

CDC recommends 14 days of quarantine after exposure based on the time it takes to develop illness if infected. Thus, it is possible that a person *known* to be infected could

leave isolation earlier than a person who is quarantined because of the *possibility* they are infected.

v. **Managing High-Risk Employee Safety**

Employers should create specific response and operational protocols for each category of employee that may occur as a result of COVID-19 daily screening:

1. High-risk employees
2. Employees exposed to someone with symptoms or diagnosed with COVID-19
3. Employees with their own symptoms of COVID-19
4. Employees diagnosed with COVID-19 (see Return to Work for Symptomatic and/or Positively Diagnosed Employees above)

Additionally, employers should provide employees with the proper and appropriate protective equipment and workplace rules (see sections below regarding workplace health and safety).

High-Risk Employees

The CDC has identified a number of conditions that can potentially put individuals at greater risk if they contract COVID-19. As a threshold matter, employers should not ask employees about any underlying health conditions or if they are in the CDC high-risk categories. However, they may open the door for employees to self-identify. Employees likewise may not single out high-risk employees and treat them differently than the rest of the employees. For example, employees may not require all employees over age 65 or immune compromised to work from home. But, if the employee requests a change in his/her working arrangements due to an underlying medical condition outlined by the CDC, the employer is responsible for following the interactive process under ADA to determine if a reasonable accommodation can be made.

The EEOC instructs that there may be low-cost solutions available to employers that will provide an accommodation for the employee. For example, there may be “materials already on hand or easily obtained [that] may be effective.” Employers may make changes to the work environment including one-way hallways, social distancing in common areas, reduced seating capacity in conference and break rooms, and installing barriers between employees and customers. Employers may also consider temporary job restructuring, temporary transfers to a different position, and modifying work schedules.

However, employers should proceed with some caution. The EEOC has made clear that an employer may not exclude an employee from the workplace solely because he/she is someone that the CDC has identified as a higher-risk for serious illness with COVID-19. An employer may only do so if the employee’s condition poses a “direct threat” to the employee’s health and that direct threat cannot be eliminated by a reasonable accommodation. It’s important to note that the “direct threat” is a very high standard and requires a case-by-case assessment. Employers must rely on reasonable medical judgment about the specific employee’s disability (not a generalized assessment) using the most current medical knowledge and/or the best objective evidence. However, even if the employee’s condition does pose a direct threat to the employee’s health, the

employer still may not exclude the employee from the workplace unless there is no available reasonable accommodation that will not pose an undue hardship on the business.

Telecommuting

In addition to enabling employers to continue operating their business during the COVID-19 crisis, a remote working environment offers employers an avenue to mitigate the risk of community spread of the virus in the workplace. It's against this backdrop that employers may consider (or reconsider) their current approach and policy for telecommuting as an alternative work-arrangement most especially for their high-risk employees.

Employers that continue to utilize telecommuting in their workforce should ensure they have a clear telecommuting policy and agreement provided to (and signed by) each telecommuting employee. Telecommuting policies may include provisions such as:

- Eligibility for a telecommuting arrangement
- Description of policies that remain in effect while working remotely
- Time and attendance expectations – most especially for non-exempt employees
- Confidentiality and data security requirements
- Expenses
- Workers compensation
- Employee acknowledgement including a statement of that “at will” relationship
- Accountability and consequences for non-conforming behavior

Employee's Household Member's Condition

As a threshold matter, under certain circumstances, an employee may be eligible for Emergency Paid Sick Leave (see above discussion). The ADA does not apply if the employee is asking for an accommodation because the employee lives with someone who is at a greater risk of complications if they contract COVID-19. Under the ADA, reasonable accommodations are only required for an employee's own disability and does not cover disabilities of other individuals that the employee lives or interacts with. It's important to note that the Genetic Information Non-discrimination Act prohibits an employer from asking an employee about his/her family member health conditions.

Employers may consider a telecommuting arrangement for an employee requests a variance in his/her position because of a high-risk individual at home. Additionally, employers may also consider job variances to allow an arrangement that will address the employee's safety concerns such as job sharing, staggered schedules, or a temporary reassignment of duties. Likewise, an employer may re-visit its paid time off programs to identify some flexibility or expansion of wage replacement benefits.⁶

vi. Employee Obstacles to Return to Work

Employees Afraid to Return to Work

⁶ Employees working for employers with under 500 employees may be eligible for expanded benefits under the Families First Coronavirus Response Act. See DOL page: <https://www.dol.gov/agencies/whd/pandemic/ffcra-employee-paid-leave>

“Being afraid to come to work” is not a qualifying leave reason under any federally regulated leave entitlement program. The underlying reason for the employees’ request to work from home is an important factor. Employees who are merely afraid to come to work may not be eligible for work from home. Likewise, fear alone is not a protected reason under federal leave or accommodation programs – in other words, federally protected leaves, job accommodations, and/or job restoration rights likely will not apply to an employee who is simply afraid to come to work.

While merely “being afraid to come to work” (without more) is not a qualifying leave reason under any federally regulated leave entitlement, employers may nonetheless consider flexibility in their leave of absence and paid time off policies. For example, employers may consider providing employees with expanded paid time off or what some refer to “pandemic pay”. Employers may build their program based on criteria that it establishes but must be sure to be both clear and consistent. Alternatively, employers may allow an employee to remain on furlough or leave of absence without pay for an extended period of time.

Employees Receiving Unemployment

Employers may be surprised to receive resistance to return to work from employees who are receiving unemployment. It’s important to know that an offer to return to work cuts off an employee’s eligibility for unemployment. Employers should document their offer in writing (see above and recall letter in this appendix). When an employee objects to return to work, employers should first talk with the employee to better understand the employee’s reasoning. If the employee’s sole objection is because he/she is receiving unemployment, then the employer may notify the state of the employee’s rejection of its offer to return. If the employee provides other health or safety reasons, the employer should address those concerns and conditions (see above sections).

vii. OSHA Recordkeeping

In a memo issued on May 19, 2020 (effective as of May 26, 2020), OSHA rescinded its previous interim enforcement guidance regarding treatment of COVID-19 with respect to the occupational illness recordkeeping requirements of 29 CFR 1904. OSHA’s revised stance is now that COVID-19 cases shall be treated as recordable illnesses if the following conditions are met:

1. The case is a confirmed case of COVID-19, as defined by the Centers for Disease Control and Prevention (CDC);
2. The case is work-related as defined by 29 CFR 1904.5; and
3. The case involves one or more of the general recording criteria set forth in 29 CFR 1904.7.

OSHA acknowledges the potential difficulty in determining work-relatedness and is therefore exercising discretion with enforcement. In determining whether an employer has complied with this requirement, Compliance Safety and Health Officers (CSHOs) are being advised to apply the following considerations:

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1. The reasonableness of the employer's investigation into work-relatedness.
 2. The evidence available to the employer.
 3. The evidence that a COVID-19 illness was contracted at work.

Additional information including situational examples are contained in the complete memo:
[Revised Enforcement Guidance for Recording Cases of Coronavirus Disease 2019 \(COVID-19\)](#)

C. Reducing Exposure- Practical Workplace Examples

Guidance for Employers by Exposure Risk Classification

Worker risk of occupational exposure to COVID-19 during an outbreak may depend in part on the industry type and need to be within 6 feet of people known to have, or suspected of having, COVID-19. OSHA has provided the following guidance and has divided job tasks into four risk exposure levels:

<p>Lower Exposure Risk (Caution) Lower exposure risk (caution) jobs are those that do not require contact with people known to be, or suspected of being, infected with COVID-19 nor frequent close contact with (i.e., within 6 feet of) the general public. Workers in this category have minimal occupational contact with the public and other coworkers.</p>		
<p>Engineering Controls</p> <p>Additional engineering controls are not recommended for workers in the lower exposure risk group. Employers should ensure that engineering controls, if any, used to protect workers from other job hazards continue to function as intended.</p>	<p>Administrative Controls</p> <p>Monitor public health communications about COVID-19 recommendations and ensure that workers have access to that information. Frequently check the CDC COVID-19 website: https://www.cdc.gov/coronavirus/2019-ncov/</p> <p>Collaborate with workers to designate effective means of communicating important COVID-19 information.</p>	<p>Personal Protective Equipment</p> <p>Additional PPE is not recommended for workers in the lower exposure risk group. Some states may require that all employees wear some form of face covering. Workers should continue to use the PPE, if any, that they would ordinarily use for other job tasks.</p>
<p>Medium Exposure Jobs that require frequent/close contact with people who may be infected, but who are not known or suspected patients. Workers in this category include:</p> <p>Those who may have contact with the general public (e.g., schools, high-population-density work environments, some high-volume retail settings), including individuals returning from locations with widespread COVID-19 transmission.</p>		
<p>Engineering Controls</p> <p>Install physical barriers, such as clear plastic sneeze guards, where feasible.</p>	<p>Administrative Controls</p> <p>Consider offering face masks to ill employees and customers to contain respiratory secretions until they are able leave the workplace (i.e., for medical evaluation/care or to return home). In the event of a shortage of masks, a reusable face shield that can be decontaminated may be an acceptable method of protecting against droplet transmission. See CDC/NIOSH guidance for optimizing respirator supplies, which discusses the use of surgical masks, at: http://www.cdc.gov/coronavirus/2019-ncov/hcp/respirators-strategy/index.html</p> <p>Keep customers informed about symptoms of COVID-19 and ask sick customers to minimize contact with workers until healthy again, such as by posting signs about COVID-19 in stores where sick customers may visit (e.g., pharmacies) or including COVID-19 information in automated messages sent when prescriptions are ready for pick up.</p> <p>Where appropriate, limit customers' and the public's access to the worksite, or restrict access to only certain workplace areas.</p> <p>Consider strategies to minimize face-to-face contact (e.g., drive through windows, phone-based communication, and telework).</p> <p>Communicate the availability of medical screening or other worker health resources (e.g., on-site nurse; telemedicine services).</p>	<p>Personal Protective Equipment</p> <p>When selecting PPE, consider factors such as function, fit, decontamination ability, disposal, and cost. Sometimes, when PPE will have to be used repeatedly for a long period of time, a more expensive and durable type of PPE may be less expensive overall than disposable PPE. Each employer should select the combination of PPE that protects workers specific to their workplace.</p> <p>Workers with medium exposure risk may need to wear some combination of gloves, a gown, a face mask, and/or a face shield or goggles. PPE ensembles for workers in the medium exposure risk category will vary by work task, the results of the employer's hazard assessment, and the types of exposures workers have on the job.</p> <p>In rare situations that would require workers in this risk category to use respirators, see the PPE section beginning on page 14 of OSHA's booklet – Guidance on Preparing Workplaces for COVID-19, which provides more details about respirators. For the most up-to-date information, visit OSHA's COVID-19 webpage: http://www.osha.gov/covid-19.</p>

<p>High Exposure Risk</p> <p>Jobs with a high potential for exposure to known or suspected sources of COVID-19. Workers in this category include: Healthcare delivery, healthcare support (hospital staff who must enter patients' rooms), medical transport, and mortuary workers exposed to known or suspected COVID-19 patients or bodies of people known to have, or suspected of having, COVID-19 at the time of death.</p> <p>AND/OR</p> <p>Very High Exposure Risk</p> <p>Jobs with a high potential for exposure to known or suspected sources of COVID-19 during specific medical, postmortem, or laboratory procedures. Workers include: Healthcare and morgue workers performing aerosol-generating procedures on or collecting/handling specimens from potentially infectious patients or bodies of people known to have, or suspected of having, COVID-19 at the time of death.</p>		
<p>Engineering Controls</p> <p>Ensure appropriate air-handling systems are installed and maintained in healthcare facilities. See "Guidelines for Environmental Infection Control in Healthcare Facilities" for more recommendations on air handling systems at: www.cdc.gov/mmwr/preview/mmwrhtml/rr5210a1.htm</p> <p>CDC recommends that patients with known or suspected COVID-19 (i.e., person under investigation) should be placed in an airborne infection isolation room (AIIR), if available.</p> <p>Use isolation rooms when available for performing aerosol-generating procedures on patients with known or suspected COVID-19. For postmortem activities, use autopsy suites or other similar isolation facilities when performing aerosol-generating procedures on the bodies of people who are known to have, or suspected of having, COVID-19 at the time of their death. See the CDC postmortem guidance at: http://www.cdc.gov/coronavirus/2019-ncov/hcp/guidance-postmortem-specimens.html.</p> <p>OSHA also provides guidance for postmortem activities on its COVID-19 webpage: http://www.osha.gov/covid-19.</p> <p>Use special precautions associated with Biosafety Level 3 when handling specimens from known or suspected COVID-19 patients. For more information about biosafety levels, consult the U.S. Department of Health and Human Services (HHS) "Biosafety in Microbiological and Biomedical Laboratories" at: http://www.cdc.gov/biosafety/publications/bmbl5.</p>	<p>Administrative Controls</p> <p>If working in a healthcare facility, follow existing guidelines and facility standards of practice for identifying and isolating infected individuals and for protecting workers.</p> <p>Develop and implement policies that reduce exposure, such as cohorting (i.e., grouping) COVID-19 patients when single rooms are not available.</p> <p>Post signs requesting patients and family members to immediately report symptoms of respiratory illness on arrival at the healthcare facility and use disposable face masks</p> <p>Consider offering enhanced medical monitoring of workers during COVID-19 outbreaks.</p> <p>Provide all workers with job-specific education and training on preventing transmission of COVID-19, including initial and routine/refreshers training.</p> <p>Ensure that psychological and behavioral support is available to address employee stress.</p>	<p>Personal Protective Equipment</p> <p>Most workers at high or very high exposure risk likely need to wear gloves, a gown, a face shield or goggles, and either a face mask or a respirator, depending on their job tasks and exposure risks.</p> <p>Those who work closely with (either in contact with or within 6 feet of) patients known to be, or suspected of being infected with COVID-19, should wear respirators. In these instances, see the PPE section beginning on page 14 of OSHA's booklet – Guidance on Preparing Workplaces for COVID-19, which provides more details about respirators. For the most up-to-date information, also visit OSHA's COVID-19 webpage: http://www.osha.gov/covid-19.</p> <p>PPE ensembles may vary, especially for workers in laboratories or morgue/mortuary facilities who may need additional protection against blood, body fluids, chemicals, and other materials to which they may be exposed. Additional PPE may include medical/surgical gowns, fluid-resistant coveralls, aprons, or other disposable or reusable protective clothing. Gowns should be large enough to cover the areas requiring protection. OSHA may also provide updated guidance for PPE use on its website: http://www.osha.gov/covid-19.</p> <p>NOTE: Workers who dispose of PPE and other infectious waste must also be trained and provided with appropriate PPE. The CDC webpage "Healthcare-associated Infections" https://www.cdc.gov/hai/ provides additional information on infection control in healthcare facilities.</p>

D. Creative and Adaptive Staffing Models

The best time to make changes or experiment with new models is when there is a high degree of ambiguity. Companies now have a better understanding of what it means to be agile, but the path forward is not particularly clear. Managers now have first-hand experience with work that may be successfully performed virtually and work that should be performed on-premises. With this new insight, leadership can take what they learned, go a step further and test new staffing models to better manage work place density and promote employee engagement.

Employers may consider at least two different scheduling approaches.

1. **Split Teams** -- the organization may divide a department or function into two teams that rotate between working in the office and working remotely. This approach may be especially beneficial when there is insufficient work space to maintain necessary social distancing.

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2. **Phased-in Returning Employees** - employees may return in smaller groups such as 20-25% of the location population at a time. The company benefits from a phased approach which may include the following:
 - a. New screening, cleaning, and social distancing protocol can be effectively tested, updated, and re-deployed with less confusion.
 - b. There is more time to build an adequate PPE inventory and re-configure work spaces if needed.

Employers may consider a number of criteria to identify the teams/segments of employees that may return in each phase including:

- a. the criticality of a role;
- b. the necessity of specialized equipment to complete assigned tasks;
- c. the level of personal risk individual employees may have;
- d. individuals who feel their productivity has been negatively impacted by work at home environments; and/or
- e. employees that volunteer to return

Human resources, legal counsel, and leadership should collaborate to develop a practical and legally defensible staffing approach and plans. Employers should be sure to develop clear, transparent, and consistent communication regarding its criteria for the return to work process.

E. 10 Tips to Protect Employee Health and Safety

1. **Actively encourage sick employees to stay home.** Develop policies that encourage sick employees to stay at home without fear of reprisals, and ensure employees are aware of these policies.
2. **Develop other flexible policies** for creative work scheduling and telework (if feasible) and create leave policies to allow employees to stay home to care for sick family members or care for children if schools and childcare close.
3. **Promote etiquette for coughing and sneezing and handwashing**. Provide tissues, no-touch trash cans, soap and water, and hand sanitizer with at least 60% alcohol.
4. **Perform routine environmental cleaning.** Routinely clean and disinfect all frequently touched surfaces, such as workstations, countertops, handrails, and doorknobs. Discourage sharing of tools and equipment if feasible.
5. **Provide education and training materials** such as fact sheets and posters in an easy to understand format and in the appropriate language and literacy level for all employees.

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- 6. Have conversations with employees about their concerns.** Some employees, such as [older adults](#) and those with chronic medical conditions, may be at higher risk for severe illness.
 - 7. Talk with companies that provide the business with contract or temporary employees about their plans.** Discuss the importance of sick employees staying home and encourage them to develop non-punitive “emergency sick leave” policies.
 - 8. Plan to implement practices to minimize face-to-face contact between employees if social distancing is recommended by state or local health department.** Actively encourage flexible work arrangements such as teleworking, split teams, staggered shifts or phased staffing.
 - 9. Consider the need for travel and explore alternatives.** Check CDC’s [Travelers’ Health](#) website for the latest guidance and recommendations. Consider using teleconferencing and video conferencing for meetings when possible.
 - 10. If an employee becomes sick while at work,** they should be separated from other employees, customers, and visitors and sent home immediately. Follow [CDC guidelines](#) for cleaning and disinfecting areas the sick employee visited.



II. Premises Liability & Customer Safety

Organizations need to consider their premises liability exposures when re-opening their business and take steps to reduce the risks associated with customer and employee interaction. To assist in developing an action plan, below are steps an employer may follow to develop their own premises liability risk mitigation program:

Assessment – Representatives from management, along with employees, should evaluate operations to identify risk mitigation opportunities. Look for conditions on the premises that may contribute to potential exposures that could present adverse risk and result in claims.

Planning – Management should create guidelines to standardize the practical considerations that arise from the assessment. Managers should specifically identify the measures and steps it must take to remedy the conditions identified in the “Assessment” phase.

Implementation – Management will execute the plan and risk mitigation steps and strategies. Execution includes training for the new policies / procedures and related documentation.

Evaluation – Once the organization has implemented the premises liability risk mitigation program, it’s important to establish an ongoing evaluation and review of the program. The company should engage in a continual review of the process, policies, procedures, and outcomes.

A. Phase 1 – Assessment

1. Create a working group that consists of stakeholders from various levels in the organization to perform an assesment to determine feasibility, timing and process for re-opening. The working group should also assist in developing and enforcing policies, procedures, and guidelines.
2. Consider identifying a single point of contact for employees, vendors, and customers regarding the above.
3. Confirm that local, state, and/or federal organizations have authorized your business to re-open.
4. Determine the occupancy of the building/space to assist with phased occupancy and to meet social distancing standards.
5. Identify physical items that could expose customers, vendors, or employees to COVID-19.
6. Identify areas where frequent employee/customer/vendor interactions occur and where customers, visitors, and/or employees may gather; establish a game-plan to ensure social distancing and limit exposure risks in these areas (for example, points of sale,

elevators, public restrooms, vending machine areas, breakrooms, smoking areas, conference rooms, reception areas).

7. Business owners may want to consider varying and/or limiting hours of operation to limit risk to employees and visitors/customers.
8. If there are customer seating areas or table service, consider a plan to establish safe social distancing placement or potentially postponing these services until full occupancy becomes safely possible. Additionally, consider closing or limiting break room and conference room access.
9. Review, evaluate, and determine which vendors are essential to immediate operations. Organizations should consider which vendors are essential to operations or what contractual obligations and duties may require continued services.
10. In addition to developing policies, organizations should also consider signage putting people on notice of specific rules and expectations. For example, organizations may identify areas where signage regarding hand sanitizer/wipes, social distancing, and prohibited entry for individuals with the CDC identified symptoms. Be sure to inform visitors of the organization's expectations and encourage proper sanitary practices, respiratory etiquette, and social distancing measures. There are a [variety of signs available on the CDC website](#).

B. Phase 2 – Planning

The planning stage should incorporate all the items that were evaluated in the assessment phase and support the development of standardized processes for staff, vendors, and customers to follow.

1. Create a checklist of high traffic areas that need to be sanitized. This may include shared electronic equipment, or shared items such as display merchandise, carts, baskets, parking terminals/meters, doors, handles, etc.
2. Consider limiting occupancy of a building or space as part of a phased re-opening strategy, keeping the following considerations in mind:
 - i. Limit occupancy in elevators, stairwells, etc. depending on the layout and location of the business
 - ii. Continually monitor the effectiveness of limiting maximum occupancy. This will largely depend on the size and layout of the building or space
 - iii. Defer to local regulations and officials to assess regional impact of the pandemic

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3. Consider limiting occupancy of the building or space to between 25-50% (or less) of maximum capacity for the first 2 weeks of re-opening:
 - i. Note that this may also include limiting occupancy in elevators, stairwells, etc. depending on the layout and location of the business
 - ii. Continually monitor the effectiveness of limiting maximum occupancy. This will largely depend on the size and layout of the building or space
 - iii. Defer to local regulations, as they may be more stringent than the guidelines provided above
 4. Consider identifying and allocating staff to monitor customers/visitors entering and exiting the location during peak hours. Some businesses may need to institute a “one-in/one-out” policy during peak hours, with staff or security on standby at entrances/exits to monitor and control customer traffic.
 5. Once all high traffic areas are accounted for, consider creating a checklist of the areas that require frequent sanitizing and develop a corresponding schedule.
 - i. Document cleaning activities
 - ii. Determine areas that need sanitizing on an ongoing basis vs. on a schedule, such as a Point of Sale (PoS) system that is frequently handled.
 6. Depending on the nature of the operations consider suspending certain services that pose a significant threat to public health (e.g. self-service food and beverage stations, table service, etc.).
 7. Consider creating partitions between employees and customers in areas where there is significant customer-employee interaction (e.g. order terminals and other PoS).
 8. Create signage to alert customers if employees are being tested and monitored for COVID-19.
 9. Prior to giving access to vendors, consider sending a document to them electronically, requiring their agreement, that their employees will not be allowed to continue services if they have had any COVID-19 symptoms including fever, dry cough or difficulty breathing ([CDC Symptoms](#)), have been exposed to anyone who has tested positive for COVID-19 or is currently waiting for test results.
 10. Defer non-essential vendor use. Consider developing a vendor credentialing or screening program and access list with a disposable badge that they receive if needed to enter. This should be a one-time-only use badge to identify they are approved to be “on-site.”
 11. Follow public health guidelines regarding the use of face coverings for employees, customers, visitors, vendors and the general public. Current CDC guidance is to wear cloth face coverings in public settings where social distancing measures are difficult to

maintain (e.g., grocery stores and pharmacies), especially in areas of significant community-based transmission.

12. Planning should include various communications designed to provide information on what the organization is doing, why it is being done, and how guidelines are being applied in a consistent manner.

C. Phase 3 – Implementation

As employers engage in re-opening activities, they should focus on the following aspects of their operation including; access, disinfection, communication, and evaluation.

Access

1. Have controls in place to maintain social distancing for high-traffic areas:
 - i. Areas of concern may include: entrances/exits, elevators, stairwells, points of sale, shared electronic equipment such as ATMs and vending machines, areas where queues may form, etc.
 - ii. Consider marking the floor with spaces that are at least 6 feet apart and placing signage alerting customers of the system in place.
 - iii. In addition, provide hand sanitizer/wipes or have staff on standby to sanitize these areas frequently throughout operating hours.
2. During this period of Phased Occupancy, consider that seating areas, tables, etc. may still need to be eliminated or at least limited until it is deemed safe for people to congregate in larger groups.
3. Limited operating hours: Consider implementing a process by which only certain customers are permitted in a location during certain hours (i.e. opening an hour early for higher risk customers like those who are elderly or have certain medical conditions that make them more susceptible to contracting COVID-19).
4. Confirm all lighting (exterior and interior) is in good working condition.
5. Verify that all security cameras are in good working condition, being monitored, and continuing to save footage.
6. For general housekeeping, verify the refuse collection company has been advised to resume their regular pickups. All walking paths and means of egress must be cleared in accordance with standard maintenance procedures.
7. Encourage all non-essential rooms or areas to keep doors closed.
8. Continue to require 6ft / 2m social distancing in all areas.

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9. Elevator use should be restricted to 1-2 employees at one time, dependent upon elevator size (with signage posted).
 10. Consider closing office break areas/kitchens and shared coffee machines, water machines or other kitchen appliances. Consider supplying bottled water. If a refrigerator is shared, provide wipes and require that the refrigerator be wiped down before and after each individual use.
 11. Where possible, maintenance work “shift” times should be staggered.
 12. Limit, when possible, the locations where vendors are permitted to go in the facility.
 13. Stagger the vendor on-site dates and times so that vendors are provided access during times that have the least customer or employee presence.
 14. Provide a separate and specific intake area solely for vendors (separate from areas that would be used by customers or employees) and ensure that this area is disinfected regularly and has disposal for PPE.
 15. Limit or deny vendor access to common areas such as bathrooms and breakrooms.
 16. Limit vendors from entering facilities if they can provide the service outside (e.g., packages, food delivery, etc.)
 17. If possible, require a contactless temperature check prior to vendors having access to facilities.
 18. Please see the property section for more information on engineering and building equipment maintenance.

Disinfecting

1. High traffic areas will need to be cleaned and sanitized with increased frequency.
2. Depending on the nature of operations, high traffic areas will differ, some may include the following:
 - Entrances and exits (including door handles)
 - Stairwells
 - Elevators
 - Shared terminals or electronic equipment (ATMs, areas where customers place orders, points of sale, parking terminals, vending machines, gas pumps, etc.)
 - Public restrooms
 - Areas where queues form
 - Coolers or display cases

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- Food or beverage dispensers
 - Seating areas and tables
 - Customer assistance items like carts, baskets, electronic wheelchairs, etc.
3. Stock all standard cleaning supplies for janitorial staff on site, regardless of whether there is a contract with a 3rd party cleaning company for COVID-19 cleaning.
 4. If contracts, invoices, or other documents need to be signed, offer electronic signatures first. If that is not available, either use a disposable pen or clean and disinfect after each use including clipboards, PoS systems, or other similar items.
 5. Provide disinfecting wipes and hand sanitizer in the main entrances, conference rooms, kitchen/break area for employee usage on door handles, light switches, etc.
 6. All disinfectants should be approved by the [EPA for COVID-19 use](#).
 7. Provide notice / signage of chemicals used during cleaning process.
 8. Clean and disinfect all shared areas such as offices, bathrooms, break rooms, shared electronic equipment (tablets, touch screens, keyboards, remote controls).
 9. Close off and deep clean any areas where a probable or confirmed case of COVID-19 was identified.
 10. Contract with a licensed and insured 3rd party cleaning company to clean the facility regularly.
 11. Coordinate with landlords (and communicate expectations) to have common building areas cleaned at increased frequencies. Focus areas should include but not be limited to: public lobbies and hallways, public bathrooms, security desks, access control points, elevators, and parking garage access points.
 12. Request an increased frequency of cleaning (at a minimum of daily) for washrooms and common areas.

Communication

1. Create signage alerting customers of:
 - Occupancy limitations and procedures that are in place
 - Social distancing expectations and requirements
 - Employee health testing and monitoring procedures
 - Cleaning efforts in high traffic areas
 - Face masks, social distancing, and respiratory etiquette
 - Changes to foot traffic to reduce overcrowding

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- Prohibition of anyone entering who has experienced any of the [COVID-19 symptoms](#)
 - [Other CDC notices and posters](#)
2. If an employee tests positive for COVID-19, a generic notice should be posted in a conspicuous space notifying vendors, visitors, and others (ensuring that no personal identifying information is included) of a positive test at the facility.
 3. Allow employees an opportunity to “opt-out” of returning to the workplace if they are not comfortable or not able to do so. Encourage any employees in this situation to talk with local HR.
 4. For employees returning to the workplace, consider having them sign an acknowledgement of employer workplace rules and policies established to mitigate and manage the COVID-19 risk.
 5. Consider including signage in the washroom areas reminding staff of proper handwashing protocols.
 6. Assess local situations regarding virus activity, local governmental restrictions, and consider opening to full capacity.
 7. Keep logs of all maintenance work done including time, work done, staff completing the work. This should be kept for any 3rd party work on site as well.
 8. Request the use of PPE by vendors (and all visitors) while they are on premise. That use may be limited to cloth mask face coverings, so it is recommended to have a dedicated hand-sanitizing station along with disinfectant wipes for their equipment or product they are bringing in. Do not allow vendors to use gloves; rather, have them use hand sanitizing soap prior to having access to the premises.

D. Phase 4 – Evaluation

1. As public health officials permit, consider increasing the allowed occupancy so long as it allows for proper social distancing protocols. Depending on the size and layout of the premises, the allowed occupancy may need to be limited.
2. Evaluate the effectiveness of measures provided above.
3. Re-evaluate vendor lists to determine if there is capacity to safely include more.
4. Continue all social distancing practices as outlined above.
5. Assess local situations regarding virus activity, local governmental restrictions, and consider opening to full capacity.

6. Re-evaluate deferred service.

III. Property Loss Prevention

Ramping up or restarting a business during a pandemic requires continuous adjustment. Because the COVID-19 pandemic continues to have an unprecedented impact on daily life, business owners looking forward to ramping up or re-opening operations face significant challenges. Businesses should consider re-organizing and refreshing their property and operational policies and procedures.

A. Evaluation

At the earliest, implement change management measures to:

1. Assess the facility for property damages
2. Identify all changes
3. Identify additional required controls

Understand and evaluate the new operating conditions and exposures:

1. **Authorities, state and local governmental guidance and requirements for property and facility occupation:**
Include guidance review from the Occupational Safety and Health Administration (OSHA). This includes social distancing requirements that will affect the facility operations, workspace layout, and/or redesigning the production facility.
2. **Employee shortage:**
In some cases, employers may be faced with an employee shortage which will invariably impact production and productivity. Employers will have to rethink and restructure employee workloads ensuring that employees are first assigned to the most critical tasks and projects.
3. **Employee fatigue:**
Employers should beware of employee burnout. For example, employers experiencing staffing shortages may increase workers' shift and forgo breaks. Loss experience data demonstrates that fatigued workers may result in greater losses and/or losses that may interrupt operations.
4. **Utilities and processes:**
Employers that re-open their business without established re-opening and revised operational procedures may face a strain utilities and systems. In a sense of urgency, a reduction of regular maintenance is a risk for losses.

5. **Buildings:**

Employers should conduct a complete walk through of the facility including the building and surrounding property to identify risk conditions and/or abnormal conditions. Employers should be sure not to compromise inspections despite a reduced staff and/or shifts. Employers should identify conditions that create risk before a loss occurs.

6. **Supplies and Inventory:**

Shortages in the supply chain can compromise an organization's ability to meet production demands. Conversely, increased inventory can create significant fire hazards and/or damages. For example, inventory stored outside the facility but on the premises and too close to the building may create a fire hazard.

B. Guidance

Before re-opening, seek the expertise of legal, insurance and other professionals.

1. **Policies and Procedures**

Prior to re-opening, employers should review current policies and procedures and identify changes responsive to the COVID-19 work environment. If the employer makes changes to its policies and procedures, it should likewise train its employees.

2. **Emergency response plans (ERP)**

New rules and laws designed to mitigate the risk of spreading COVID-19 may impact the employer's ERP. For example, social distancing rules may impact an employers' ERP. At a minimum, employers should update the emergency procedures and contact list and train all employees. Egress plans may likewise need to be modified to include distance requirements and new facility layout.

3. **Housekeeping**

One of the ways to mitigate risk is to ensure that employers maintain housekeeping and waste disposal standards. For example, housekeeping may be adversely affected if production, storage, and waste increase. Employers should consider increasing the frequency of cleaning to keep pace with increased production and/or facility needs. Specifically, employers should increase cleaning frequencies to maintain control over processes producing fugitive combustible dusts or oily residues.

4. **Hot Work Policy**

Do not allow hot work to be performed in a permit-required area without following all elements of a hot work permit system.

5. **Restarting utilities and processes**

Refreshing should be done to employees starting up the business or the production. Allow only qualified persons to turn on utilities or restart processes. Qualified persons may include electricians, plumbers/gasfitters (for fuels), or process equipment operators. The qualified person is more likely to detect and correct abnormal conditions before damage may occur.



6. Maintenance

Proper maintenance programs should be in place, even with reduced shift. Annual inspections including thermographic inspections for electrical systems should be in place. Inspection of the fire protection systems should be in place including the inspection of the sprinkler systems, the fire extinguishers, and standpipes.

Follow a deliberate start-up process that allows time to detect abnormal conditions that could lead to equipment breakdown. Keep in mind equipment breakdown could be accompanied by an ensuing fire.

7. Fire protection and impairment procedures

Avoid un-necessary shut down of fire protection systems. However, for those impairments which do occur, follow all elements of a fire protection impairment program and contact the insurance broker or insurer.

IV. Job Aids and Checklists

A. Health Screening Questionnaire

Name:

Facility Address:

Date:

Manager:

MAY ONLY BE USED FOR EMPLOYEES/WORKERS COMING ON-SITE – MAY NOT BE USED FOR REMOTE EMPLOYEES/WORKERS

Section 1: Employee Health and Wellness Checklist	YES	NO	NA	Comments	How long have you experienced these symptoms?
Are you experiencing any of the following symptoms or combination of symptoms? CDC - COVID-19 Symptoms	<input type="checkbox"/>	<input type="checkbox"/>	<input type="checkbox"/>		
• Cough	<input type="checkbox"/>	<input type="checkbox"/>	<input type="checkbox"/>		
• Shortness of Breath	<input type="checkbox"/>	<input type="checkbox"/>	<input type="checkbox"/>		
• Fever (100.4 or higher)/ Chills	<input type="checkbox"/>	<input type="checkbox"/>	<input type="checkbox"/>		
• Nausea or Vomiting	<input type="checkbox"/>	<input type="checkbox"/>	<input type="checkbox"/>		
• Congestion of runny nose	<input type="checkbox"/>	<input type="checkbox"/>	<input type="checkbox"/>		
• Muscle Pain	<input type="checkbox"/>	<input type="checkbox"/>	<input type="checkbox"/>		
• Headache	<input type="checkbox"/>	<input type="checkbox"/>	<input type="checkbox"/>		
• Sore Throat	<input type="checkbox"/>	<input type="checkbox"/>	<input type="checkbox"/>		
• New Loss of Taste/Smell	<input type="checkbox"/>	<input type="checkbox"/>	<input type="checkbox"/>		
• Diarrhea	<input type="checkbox"/>	<input type="checkbox"/>	<input type="checkbox"/>		
Are you currently waiting for COVID-19 test results?	<input type="checkbox"/>	<input type="checkbox"/>	<input type="checkbox"/>		
Have you tested positive for COVID-19?	<input type="checkbox"/>	<input type="checkbox"/>	<input type="checkbox"/>		

DO NOT ASK ABOUT FAMILY MEMBER HEALTH CONDITIONS

Section 2:

Social Distancing & Employee Exposure	YES	NO	NA	Comments	Additional Notes
Have you self-quarantined? If so, how many days and why? (remaining in your home and outdoor activities without coming closer than 6-feet from others)	<input type="checkbox"/>	<input type="checkbox"/>	<input type="checkbox"/>		
Have you been exposed to <u>anyone</u> currently waiting for COVID-19 test results?	<input type="checkbox"/>	<input type="checkbox"/>	<input type="checkbox"/>		
Have you been exposed to <u>anyone</u> who has tested positive for COVID-19?	<input type="checkbox"/>	<input type="checkbox"/>	<input type="checkbox"/>		
Have you been exposed to <u>anyone</u> with any of the following symptoms or combinations of symptoms:					
• Cough	<input type="checkbox"/>	<input type="checkbox"/>	<input type="checkbox"/>		
• Shortness of Breath	<input type="checkbox"/>	<input type="checkbox"/>	<input type="checkbox"/>		
• Fever (100.4 or higher)/ Chills	<input type="checkbox"/>	<input type="checkbox"/>	<input type="checkbox"/>		
• Nausea or Vomiting	<input type="checkbox"/>	<input type="checkbox"/>	<input type="checkbox"/>		
• Congestion of runny nose	<input type="checkbox"/>	<input type="checkbox"/>	<input type="checkbox"/>		
• Muscle Pain	<input type="checkbox"/>	<input type="checkbox"/>	<input type="checkbox"/>		
• Headache	<input type="checkbox"/>	<input type="checkbox"/>	<input type="checkbox"/>		
• Sore Throat	<input type="checkbox"/>	<input type="checkbox"/>	<input type="checkbox"/>		
• New Loss of Taste/Smell	<input type="checkbox"/>	<input type="checkbox"/>	<input type="checkbox"/>		
• Diarrhea	<input type="checkbox"/>	<input type="checkbox"/>	<input type="checkbox"/>		
Have you traveled outside your state/province or regional area?	<input type="checkbox"/>	<input type="checkbox"/>	<input type="checkbox"/>		

Additional information that is pertinent to you returning back to the facility

Human Resources Use Only

Notes:

B. Sample Employee Recall Letter

INSERT EMPLOYER'S LETTERHEAD **RED Indicates Customized Information**

[Date]
[Name]
[Street]
[City, State, ZIP]

Dear [Employee name],

I am pleased to notify you that [Company name] would like you to return from furlough to [your previous position/the following position]. Please plan to report to work on [date]. This offer letter supersedes and replaces any previous offer letters or terms of employment. The terms of your position with the Company are:

- Job Title: [Job title]
- Supervisor: [Supervisor name]
- Responsibilities will include but not be limited to: [Responsibilities or see attached job description]
- Annualized Salary or Hourly Rate: \$[amount]
- Employment Classification: [Full-time/Part-time] and [Exempt/Nonexempt]
- Location

[FOR EMPLOYEES ON COMPANY BENEFITS: address what happens with the employee benefits:

- Was the employee's group benefits coverage terminated? If yes – will their benefits coverage be fully reinstated? If yes, when will the coverage become effective?
- Will there be a waiting period? If you are an ACA employer please be sure to follow the rehire rules.
- For employees whose coverage remained, will you require any repayment of premiums? If so, be careful of affordability requirements and ensure you make repayment arrangements i.e. a repayment plan]

Your health and safety is of paramount importance. As a result, we have made significant changes in the workplace including our facilities and workspace arrangements. We've also implemented new safety policies and protocols (see attached)*. We expect our employees to learn these new policies and adhere to them each and every day. Employees should take these safety protocols very seriously - our safety is highly dependent on each employee's compliance with our safety protocols. Once you have completed your review of these policies please sign the Policy Acknowledgement and return to HR along with the signed copy of this letter.

Our safety program includes new employee obligations such as: [CUSTOMIZE FOR YOUR ACTUAL POLICIES AND PROTOCOLS]

- Social distancing requirements
- Cleaning and disinfecting common and shared areas
- Use of masks – especially when social distancing is not possible

- Limited in-person meetings and social distancing during these meetings – we encourage the continued use of virtual meetings
- One-way hallways
- Requirements for regular hand sanitizing (contains at least 60% alcohol) and hand washing (for at least 20 seconds)
- Reporting of any COVID-19 symptoms
- Reporting of a COVID-19 diagnosis
- Immediate Reporting of exposure to someone diagnosed with COVID-19
- Scheduling and shift changes to limit the number of people in an office
- Elimination of visitors and children in the workplace

Please contact [human resources] at _____ if you are experiencing circumstances that may interfere with your ability to return to work. A failure to accept a return to work may jeopardize your eligibility for unemployment benefits, therefore it's important that you work closely with HR throughout this process.

If we do not hear back from you by _____, we will assume that you are resigning your position and we will terminate your employment with the company. We hope that this is not the case and we look forward to your return.

Sincerely,

[Company representative signature]

[Name]

Check one box below:

- I will return to work
- I am resigning my employment

Reason for Resignation or failure to return to work:

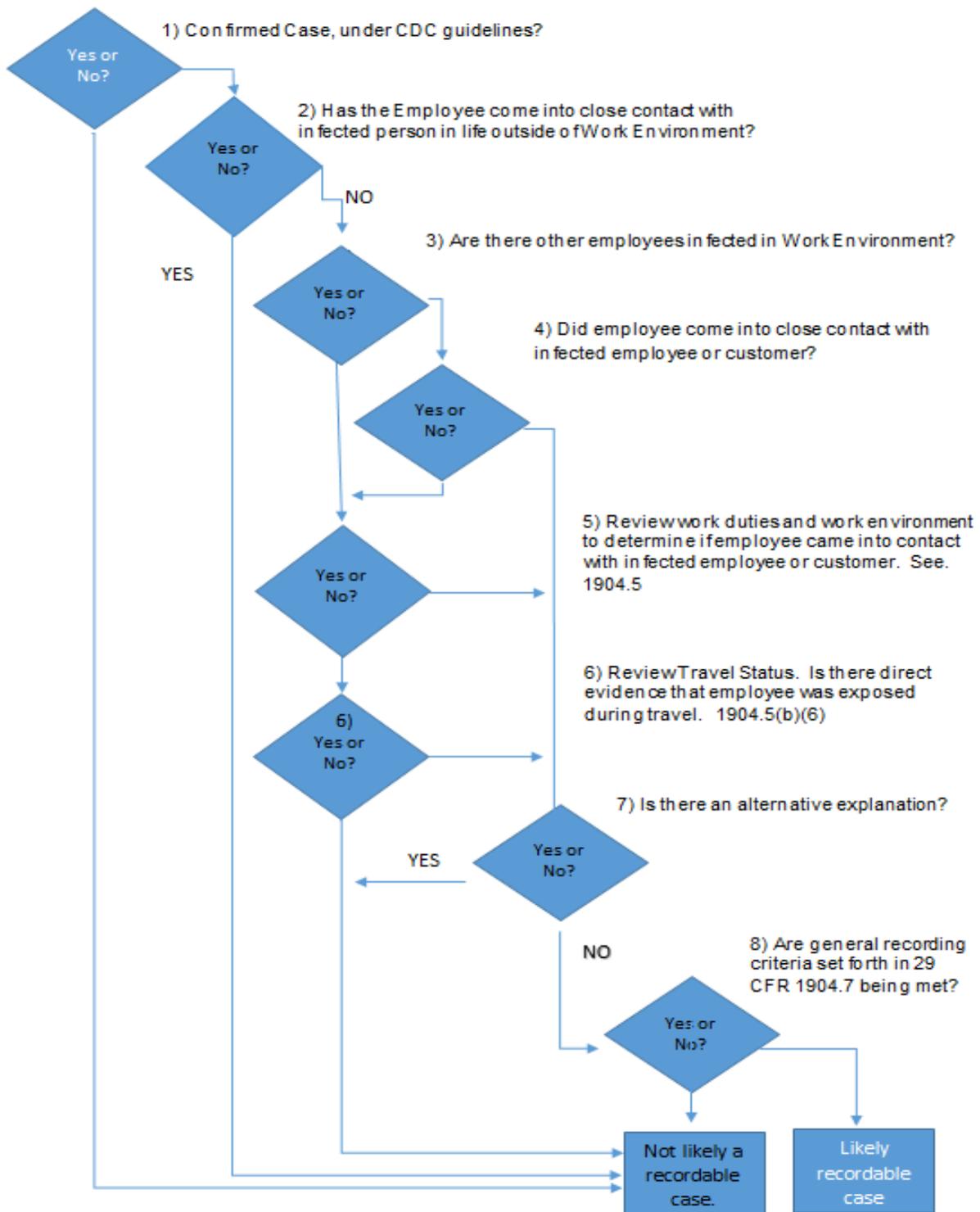
I understand and acknowledge that I remain employed “at will” and this offer to return to work does not represent a contract or guarantee of employment. I understand that I may be terminated or I may resign my employment at any time with or without advanced notice.

Signature: _____

Name (please print): _____ **Date:** _____

***Note: We recommend that employers provide employees with the new policies and procedures in advance of return and secure a signed acknowledgement**

C. OSHA Recordable Decision Tree



D. Office Re-opening Safety Checklist

Company Division:		Assessor's Name:	
Building Address:		Date:	
Floor / Suite #		Time:	

Instructions:

In safety engineering, there is what is known as a hierarchy of controls (Engineering, Administrative, Personal Protective Equipment), which are preferred in that order. When a higher level control is not feasible, the assessor should then review alternative options at the lower levels. For example: if it is not feasible to install a barrier between desks or move desks (engineering), attempt to modify schedules or develop other rules (administrative), followed by requiring employees to use masks (personal protective equipment) as a last resort. That process should be applied throughout this assessment process. Note: Social distancing is considered to be 6ft or 2m.

Category:	Elements:	Control Measures:	(Yes/No/NA)	Comments:
Engineering Controls				
Access Points	Building doors (landlord controlled)	Review plans or changes which landlord has implemented to address exposures for common building elements. Are risks adequately addressed through engineering design / redesign?		
	Lobby (landlord controlled)			
	Elevators (landlord controlled)			
	Public bathrooms (landlord controlled)			
	Doors (within company's space)	Are there any economical options to provide for automatic / no touch door opening devices? Consider disposable wipes at doors or hands free openers.		
Desk Configurations	Cubicle wall heights	For any cubicles or desks with low partitions or open desk plans, are there barriers that could be installed economically?		
	Staggered desk locations	Is it feasible to relocate desks or take desks out of service to ensure adequate social distancing?		
	Reception Area	Reception desk	Are there feasible options for physical barriers such as clear plastic / glass screens, or painted / taped spacing guidelines on floors?	
	Restrooms (within company's space)	Evaluate size and layout of restrooms, sinks and/or stalls with limited partitions. Can we feasibly take some fixtures out of service or add barriers?		
	Seating	Is it feasible to remove chairs or mark with caution tape in to maintain social distancing?		
Conference Rooms	Seating	Is it feasible to remove chairs or mark with caution tape in to maintain social distancing?		
Break Rooms	Seating	Is it feasible to remove tables / chairs or mark with caution tape in to maintain social distancing?		
Reduce Occupancy	Staggered work schedules	Is it feasible to have employees arrive at and leave the office on staggered schedules to avoid high foot traffic conditions?		

Category:	Elements:	Control Measures:	(Yes/No/NA)	Comments:
	Alternating work days or weeks	Is it feasible to have employees alternate days Or weeks in / out of the office. (MWF / TTH) or (2 weeks in and 2 weeks home), etc.?		
	Remote work	Encourage all that can work from home to continue to do so. Reserve office capacity for critical business functions and those employees with home limitations or technology issues. Can all employees who wish to return to the office do so while continuously maintaining social distancing?		
Visitor & Vendor Management	Visitors	Can visitors be restricted to essential client business meetings?		
	Vendors	Can we reduce non-essential pick-ups / deliveries? Have we provided vendors with rules on social distancing and obtained acknowledgement from vendors?		
Social Distancing	Meetings	Is it feasible to limit in-person meetings to the revised and socially distanced capacity of our conference rooms?		
	Restrooms (public)	Have employees been instructed to practice social distancing? (Do not use sinks immediately next to others, do not overcrowd, etc.)		
	Mailroom	Is it feasible to limit to 1 employee? Can we encourage pick-up /delivery within established drop-off points to limit physical contact?		
Signage	Office signage posted as required	Procurement will develop and provide signs addressing social distancing and PPE requirements. Locations: main entrance(s), common alternate entrances, reception, break rooms. Will all required signs be posted by the opening date?		
Employee Education	Awareness training	Company to record an employee awareness training module. Will all employees be required to complete It prior to returning to the office?		

Category:	Elements:	Control Measures:	(Yes/No/NA)	Comments:
Personal Protective Equipment				
Face Coverings	Cloth masks (non-medical)	Have options been provided for employees and guests to wear cloth masks or face coverings? CDC provided guidelines: Cloth Face Coverings Note: We do not currently recommend N95 or surgical masks, as these should be reserved for high – risk professions and would require respiratory protection program per OSHA.		
Gloves	Nitrile or other non-porous, disposable gloves	Have options been provided for employees and guests to wear disposable gloves when using common office equipment?		

Category:	Elements:	Control Measures:	Complete? (Yes/No)	Comments:	
Cleaning Protocols					
Products to Stock	Hand sanitizer	Refer to US EPA guidelines for approved products for killing the virus If building provides, review supplies to determine appropriateness (consult safety team).			
	Disinfectant sprays / wipes				
	Paper towels		NA		
	Nitrile gloves		NA		
Office equipment being returned	Computers, monitors, printers, headsets, etc.	Request that employee wipe down (with disinfectant wipes) all equipment which was brought home.			
Initial “Deep” Cleaning	Refer to CDC guidance Cleaning and Disinfecting Your Facility	<u>Contract</u> with cleaning firm to conduct “deep” cleaning and disinfection per CDC guidelines.			
High Touch Areas (must be Disinfected at least daily)	Door handles Elevator controls Bathroom sinks and stalls Coffee makers Water dispensers Microwaves / toasters Vending machines Refrigerator door handles Copiers / scanners Break room tables / chairs Equipment for proposal binding Mail room surfaces Reception areas surfaces Conference / board room surfaces	<u>Contract</u> with 3 rd party services (if employees are expected to do it, issue with training, and lack of proper HazCom, SDS, etc.)			

E. Property Checklist

Several businesses have been shut down and vacant (or minimally supervised) during the COVID-19 pandemic. As businesses begin to slowly re-open, it is important to review the condition of the property to ensure damage has not occurred and the property is able to function as desired as employees and operations begin to resume.

Any worker(s) performing the task of preparing the building for occupation after a period of inactivity should be provided with appropriate training, PPE, and sanitizing equipment in order to adequately protect themselves from potential exposure or spread of COVID-19. If new chemicals or disinfectants are brought onto the premise, ensure proper safety data sheets and training is supplied. Verify that the chemicals do not post a fire hazard that could overwhelm the property's fire suppression system(s).

Note, this document only is intended to address potential property exposures and is not intended to be a comprehensive return to work document.

General Overview

Business Name:	
Address:	

Description of Operations

Number of Employees:	
Hours of Operation:	

Property and Premise Inspections (exterior)

Are access gates intact and operating properly?	<input type="checkbox"/> Yes <input type="checkbox"/> No <input type="checkbox"/> N/A
Is perimeter fencing intact?	<input type="checkbox"/> Yes <input type="checkbox"/> No <input type="checkbox"/> N/A
Are there any noticeable natural hazards (downed/damaged trees, excess standing water, other)?	<input type="checkbox"/> Yes <input type="checkbox"/> No <input type="checkbox"/> N/A
Is there damage to the exterior of building (broken windows, doors, graffiti, other)?	<input type="checkbox"/> Yes <input type="checkbox"/> No <input type="checkbox"/> N/A
Are security cameras intact?	<input type="checkbox"/> Yes <input type="checkbox"/> No <input type="checkbox"/> N/A
Perform roof inspection (standing water, vegetation, exposed areas, other)	<input type="checkbox"/> Yes <input type="checkbox"/> No <input type="checkbox"/> N/A

Property and Premise Inspections (Interior)

Are there any signs of intrusion	<input type="checkbox"/> Yes <input type="checkbox"/> No <input type="checkbox"/> N/A
Are there noticeable roof leaks?	<input type="checkbox"/> Yes <input type="checkbox"/> No <input type="checkbox"/> N/A
Is adequate lighting available?	<input type="checkbox"/> Yes <input type="checkbox"/> No <input type="checkbox"/> N/A
Is emergency lighting operational?	<input type="checkbox"/> Yes <input type="checkbox"/> No <input type="checkbox"/> N/A
Is emergency egress unobstructed?	<input type="checkbox"/> Yes <input type="checkbox"/> No <input type="checkbox"/> N/A
Is fire safety plan posted?	<input type="checkbox"/> Yes <input type="checkbox"/> No <input type="checkbox"/> N/A
Are HVAC systems tested and operational? Do filters require replacement?	<input type="checkbox"/> Yes <input type="checkbox"/> No <input type="checkbox"/> N/A
Are any modifications required to the building prior to re-opening (shielding, barriers, signage, etc.)	<input type="checkbox"/> Yes <input type="checkbox"/> No <input type="checkbox"/> N/A
Are there any changes to the operations performed within the building?	<input type="checkbox"/> Yes <input type="checkbox"/> No <input type="checkbox"/> N/A
Has electrical equipment (breaker panels, light fixtures, others) been inspected?	<input type="checkbox"/> Yes <input type="checkbox"/> No <input type="checkbox"/> N/A
Are there any required jurisdictional inspections required on the boilers / pressure vessels?	<input type="checkbox"/> Yes <input type="checkbox"/> No <input type="checkbox"/> N/A

Fire Protection Systems

Was the fire protection systems maintained / inspected while building was vacant?	<input type="checkbox"/> Yes <input type="checkbox"/> No <input type="checkbox"/> N/A
If No, is an inspection required?	<input type="checkbox"/> Yes <input type="checkbox"/> No <input type="checkbox"/> N/A
Was an automatic sprinkler system shut?	<input type="checkbox"/> Yes <input type="checkbox"/> No <input type="checkbox"/> N/A
If yes, was an automatic Impairment notification sent to Broker/Insurers?	<input type="checkbox"/> Yes <input type="checkbox"/> No <input type="checkbox"/> N/A
Was the fire protection system restored?	<input type="checkbox"/> Yes <input type="checkbox"/> No <input type="checkbox"/> N/A
Does fire protection equipment (fire extinguishers, hoses, risers, fire pumps, other) appear to be in good condition?	<input type="checkbox"/> Yes <input type="checkbox"/> No <input type="checkbox"/> N/A
Are fire extinguisher inspections up to date?	<input type="checkbox"/> Yes <input type="checkbox"/> No <input type="checkbox"/> N/A

Human Element Programs

Is the emergency response program up to date?	<input type="checkbox"/> Yes <input type="checkbox"/> No <input type="checkbox"/> N/A
Is the fire safety plan up to date?	<input type="checkbox"/> Yes <input type="checkbox"/> No <input type="checkbox"/> N/A
Are employees trained on smoking policy / locations?	<input type="checkbox"/> Yes <input type="checkbox"/> No <input type="checkbox"/> N/A
Does emergency egress plan require social distancing requirements?	<input type="checkbox"/> Yes <input type="checkbox"/> No <input type="checkbox"/> N/A
If elevators on site, are there provisions for social distancing?	<input type="checkbox"/> Yes <input type="checkbox"/> No <input type="checkbox"/> N/A
Contractor management program revision (amendment) to review social distancing requirement?	<input type="checkbox"/> Yes <input type="checkbox"/> No <input type="checkbox"/> N/A
New ways (e.g. video) to review maintenance issues?	<input type="checkbox"/> Yes <input type="checkbox"/> No <input type="checkbox"/> N/A
Review permissible occupancy requirements?	<input type="checkbox"/> Yes <input type="checkbox"/> No <input type="checkbox"/> N/A

Training

Have all personnel been retrained with the safe operation procedures including equipment operation following an extended shut down or idle period?	<input type="checkbox"/> Yes <input type="checkbox"/> No <input type="checkbox"/> N/A
Have newly hired employees been trained with the company safety policy and operation procedures?	<input type="checkbox"/> Yes <input type="checkbox"/> No <input type="checkbox"/> N/A
Have all personnel involved with Hot Works been retrained with the company Hot Work Policy?	<input type="checkbox"/> Yes <input type="checkbox"/> No <input type="checkbox"/> N/A
Have necessary maintenance employees been retrained with the automatic sprinkler impairment procedures?	<input type="checkbox"/> Yes <input type="checkbox"/> No <input type="checkbox"/> N/A
Have all employees be trained with the new Emergency Response Plan?	<input type="checkbox"/> Yes <input type="checkbox"/> No <input type="checkbox"/> N/A



Get the latest information, guidance and resources on Coronavirus (COVID-19) to help you protect what matters most at hubinternational.com/coronavirus.

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