



# Planning for the next normal at work

Keeping your workforce safe and healthy



05/11/20

# Introduction and Purpose

As COVID-19 restrictions begin to lift, you're managing evolving health concerns and regulations to regain productivity and prevent a resurgence of the virus. Major operational changes may be needed in order to meet public health guidelines to maintain a safe and healthy workforce.

At Kaiser Permanente, we're here to support your care and coverage needs so you have the right benefit guidance, clinical access to testing, and care and resources to support members' physical, mental, and social well-being.

*This playbook is provided for informational purposes and should not be considered comprehensive or definitive instructions for safely returning your employees to work. As the environment continues to quickly evolve, we encourage you to stay up to date with the guidance from the Centers for Disease Control and Prevention (CDC), your local department of health, and any relevant national and local regulations.*

*Kaiser Permanente does not necessarily endorse the services mentioned. Any organizations listed are for easy identification only.*

# How to use this playbook

This playbook is meant to offer useful tools for you and your leadership teams to make your workplaces as safe as possible and support your employees in the best way possible. It includes:

- A framework outlining the various dimensions of health to consider as your employees start returning to work in this “next normal” post–COVID-19 era.
- Guidance, recommendations, and curated tools and resources on how to safely restart work, according to the dimensions of health outlined in the framework.
- Information on our clinical services and resources available to your employees who are Kaiser Permanente members.

We’ll continue to evolve this content as guidance and circumstances change. For additional questions, please contact your Kaiser Permanente account manager.

# How Kaiser Permanente can support you

- **Industry assessments:** Review, locate, and leverage our curated collection of tools and assessments.
- **Webinars:** Watch the most up-to-date videos to inform your approach to workforce and workplace considerations in the COVID-19 era.
- **Quality care and consultations:** Get care in person, online, and by phone, and consult on programs and benefit design (e.g., employee assistance program, workers' compensation, disability/leave management) where appropriate.
- **Thinking beyond physical health:** Access our wide spectrum of clinical self-care tools and other resources to support employees' mental and social well-being
- **Data insights:** Leverage our robust data and reporting capabilities for insights on your employee population and their potential risks/vulnerabilities.

## Other helpful resources:

- “Resources to lead effectively amid COVID-19” — [Harvard Business Review](#)
- “Leading through the duration of the COVID-19 emergency” — [Strategy+Business](#)
- “Leadership in the time of coronavirus: COVID-19 response and implications for banks” — [McKinsey & Company](#)

# Framework overview

## Dimensions of health to consider when restarting your workforce

COVID-19 and the shelter-in-place orders have had significant impacts on physical, mental, and social health, and we've developed this framework to help you address them as your employees start returning to work.

### Physical Health



#### Workplace Safety

Modify workplace safety plans, communicate policies, and stay up to date with critical information from the CDC and Occupational Safety and Health Administration (OSHA).



#### Testing & Return to Work

Learn about current COVID-19 testing protocols, our role in disability and leave management, and the role of the federal guidance in employee screenings.

### Mental & Emotional Health



#### Well-Being

Address the impact of mental health, stress, and anxiety on your workforce and how we can support with mental health and addiction care.

### Social Health



#### Social Drivers

Learn about the social and economic needs of your workforce and how to help the communities where your employees live and your businesses are located.

### Policies & Environment

**HR Policy:** Considerations and resources to develop or modify HR policies to support a healthy workforce and mitigate the spread of COVID-19.

**Regulations:** Regulatory and legislative guidance to reference based on where your employees live and work.

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# Chapter 1

# Modify workplace safety plans for COVID-19

From sanitation guidelines to ventilation capabilities in your office, you can begin preparing your workplace for your employees' return to work.

### Key takeaways:

- Mitigate risks of transmission using:
  - 1) Employee sanitation
  - 2) Environmental sanitation
  - 3) Containment strategies
- Monitor CDC and OSHA guidance
- Communicate frequently

### Data points



91%



62%



1/3

In an ongoing Mercer survey on COVID-19, the vast majority of nearly 500 US employers that responded are taking action to protect their workforce, like enhancing cleaning and disinfecting (91%) and providing masks (62%).

According to Mercer's COVID-19 survey, about a third of employers are planning to perform some type of health screening on site, most commonly temperature checks and a questionnaire or self-assessment.

1.  Mercer pulse survey, April 2020

# Mitigate risks of transmission in the workplace



**Employee sanitation**



**Environmental sanitation**



**Sickness containment**



# Promote employee sanitation guidelines in the workplace

Follow federal and state guidelines for a safe workplace that include but are not limited to the following recommendations from the CDC pertaining to employee sanitation behaviors:



Promote frequent handwashing



Provide hand sanitizer containing at least 60% alcohol in multiple locations



Institute universal masking whenever possible



Place tissues and trash receptacles throughout the workplace



Encourage respiratory etiquette, including covering coughs and sneezes with a tissue or elbow



Provide space between workstations (at least 2 arm lengths from person to person)



Prohibit large gatherings, and limit other gatherings to 10 people or fewer



Identify and provide the type of personal protective equipment needed in your workplace

# Increase ventilation, air circulation, and worksite disinfection

Consider hygiene updates to the work environment, including an increase in:

- Ventilation rates
- Outdoor air circulation into the building
- Routine cleaning and disinfecting of all frequently touched surfaces (e.g., doorknobs, workstations, keyboards, handrails, and other work equipment)



# Isolate exposure to the virus

Limit exposure to the virus by communicating with your employees and training them for:

- **Contact tracing** — If an employee becomes infected with COVID-19, contact tracing enables you to alert other employees that they've been exposed and to quarantine to stop further spread of the virus.<sup>1</sup>
- **Sick-day policies and procedures** — Ensure sick-day policies aren't punitive, and communicate expectations for employees to stay home at first signs of sickness.
- **Isolation protocol** — OSHA recommends educating employees about policies and procedures for isolation of sick people when appropriate, including designated isolation rooms.



For more information and guidelines tailored for a specific industry to reduce the risk of exposure at the worksite, [visit the OSHA website](#).

1. Information sharing must be in compliance with Americans with Disabilities Act (ADA)



# Communicate health and safety guidelines clearly and frequently

Clearly communicate expectations for employee sanitation (physical distancing, hand sanitation, respiratory etiquette, personal protective equipment, etc.), environmental sanitation, and staying home upon first signs of sickness.

Strategies for communicating could include a campaign focused on:

- Hand hygiene to stop the spread of COVID-19
- What employees should do if they or a co-worker have symptoms of COVID-19
- A centralized website to house up to-date workplace procedures and policies, using visuals whenever possible



# Monitor travel guidance

At this time, it's recommended to suspend all nonessential travel. Any necessary travel should follow [CDC recommendations](#) to prevent the spread of disease. These recommendations include measures to deal with potentially infectious travelers and steps to reduce the risk of onboard transmission.



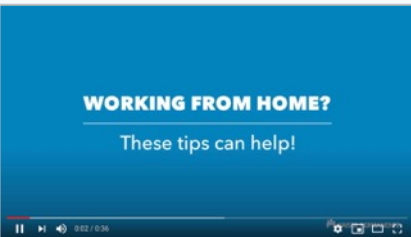
If travel is critical, check the [CDC's Traveler's Health Notices](#) for guidance by country, and be aware of travel advisories that may impact the trip.



# Workplace health considerations: Remote working

To reduce the potential risk of infection between employees and customers, consider continuing remote work arrangements whenever possible. The following resources will help you and your employees stay safe and effective in this remote work environment.

**VIDEO:**  
[6 quick tips for working from home](#)



**FLYER:**  
[COVID-19 work-from-home wellness for employees](#)



**FLYER:**  
[COVID-19 work-from-home wellness for managers](#)



## Workplace safety checklist

### To prepare the workplace for employees' reentry, take the following steps:

- Refer to agencies and community organizations that offer emergency financial assistance
- Add a section to your safety plan to include an infectious disease preparedness and response plan
- Identify areas where employees could be a higher risk of spreading infection, like elevators and break rooms
- Promote frequent handwashing
- Provide hand sanitizer containing at least 60% alcohol in multiple locations, and place tissues and trash receptacles throughout the workplace
- Follow respiratory etiquette, including covering coughs and sneezes with a tissue or elbow
- Provide space between workstations (at least 2 arm lengths from another person). Consider markings on the ground to show employees the distance needed between one another.
- Prohibit large gatherings
- Identify and provide the type of personal protective equipment needed in your workplace
- Establish environmental changes such as increasing ventilation rates and outdoor air circulation in addition to routine cleaning and disinfecting of all frequently touched surfaces in the workplace (doorknobs, workstations, keyboards, handrails, and other work equipment).
- Train HR/safety officers on contact tracing in case someone is infected and you need to alert other employees of possible exposure.
- Develop a communication campaign reinforcing your expectations for employees as they return to the workplace, including actions to take if someone starts showing signs of sickness.

## Curated tools and information for you to reference as needed

### Workplace safety resources:

- [National Institute for Occupational Safety and Health \(NIOSH\)](#)
- [Workers' compensation policies by state:](#)
  - [State of California Department of Industrial Relations](#)
  - [Washington State Department of Labor & Industries](#)
  - [Oregon Workers' Compensation Division](#)
  - [State of Hawaii Disability Compensation Division](#)
- [State-specific COVID-19 response and planning](#)
- [Department of Homeland Security](#)
- [Business Group on Health](#)



## Chapter 2

# COVID-19 testing and returning to work safely

The unprecedented and evolving response to COVID-19 requires vigilance in your screening, leave policies, and return-to-work guidelines to ensure safety and business continuity.

### Key takeaways:

- Develop a return-to-work policy under COVID-19.
- Evaluate your leave-of-absence (LOA) policies — flexibility is key.
- Provide LOA guidance to employees.
- Plan and prepare managers to address changes in productivity.

### Data point

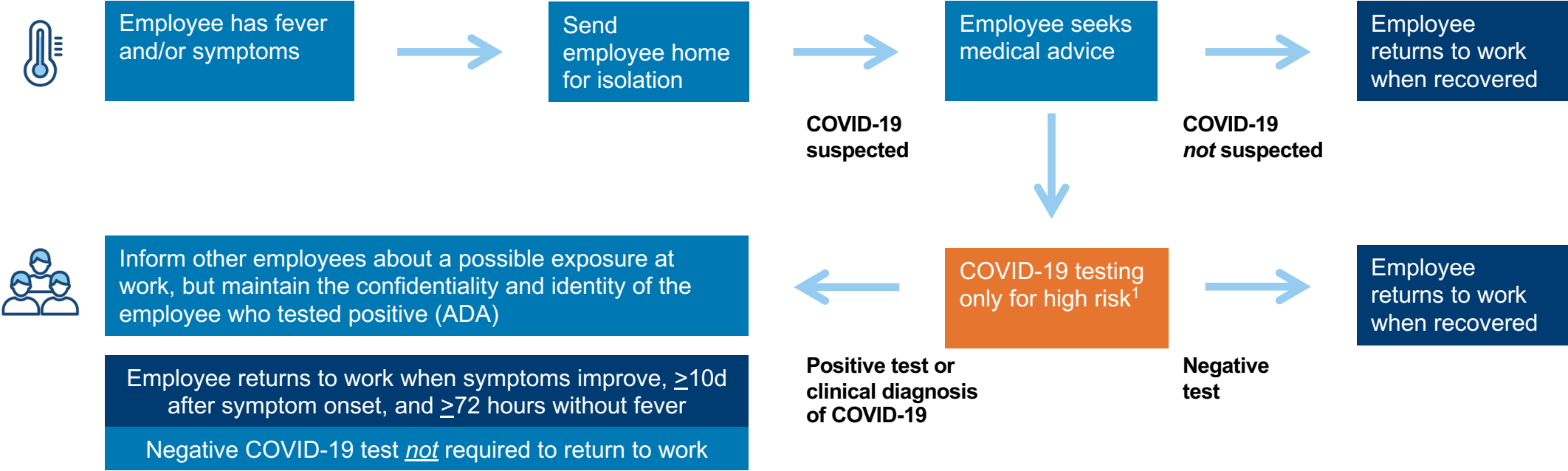


60%

According to the Mercer survey, 60% of employers have not updated their return-to-work policies for COVID-19.<sup>1</sup>

1. Mercer pulse survey, April 2020

# What happens when an employee has symptoms?



1. Testing criteria are changing on a daily basis as our capacity to test more members increases. Currently, we are testing symptomatic patients who require hospitalization or are considered high risk (adults >65, immunocompromised, cancer, transplant, advanced HIV, chronic lung and/or heart disease, diabetes with A1c >8.0, pregnancy, morbid obesity, and homeless) and symptomatic health care workers and first responders.

# COVID-19 testing protocols for workers

Establish or update policies to guide leave management and return-to-work guidelines that include employee self-reporting of symptoms, appropriate testing, and medical documentation.

## CDC PRIORITIES FOR COVID-19 TESTING

### High-priority workers (with symptoms)

- Health care facility workers
- Workers in congregate living settings<sup>1</sup>
- First responders (law enforcement, firefighters, corrections officers, and emergency medical technicians)

*1. Congregate living settings implies shared housing including but not limited to: apartments, condominiums, student or faculty housing, long-term care facilities, transitional housing, and domestic violence and abuse shelters*

Please note that certain states have differing prioritization guidelines for other essential workers who have regular contact with large numbers of people, including grocery store, pharmacy, food service, transportation, delivery, and other critical infrastructure workers.

# Kaiser Permanente medical documentation for leave

Situation	Documentation
Patient is evaluated by a physician	Work Status Form (WSF) with instructions for return to work as appropriate
Patient is high risk for COVID-19	COVID-19 High Risk Patient Letter
Patient is asymptomatic and not evaluated by a physician	Attestation between employee and employer
Patient needs to care for a sick relative	Documentation will need to be issued by the provider treating the patient in question, similar to other Family and Medical Leave Act (FMLA) requests

“Employers should *not* require a doctor’s note to validate an employee’s illness, qualify for sick leave or as a prerequisite to return to work.”

—CDC, April 27<sup>1</sup>

1. [“Interim guidance for businesses and employers to plan and respond to coronavirus disease 2019 \(COVID-19\).”](#) accessed 05/06/2020

# Employee screening guidance

## Key takeaways



Employers must screen everyone with the same role equally



Employers may take employees' temperatures

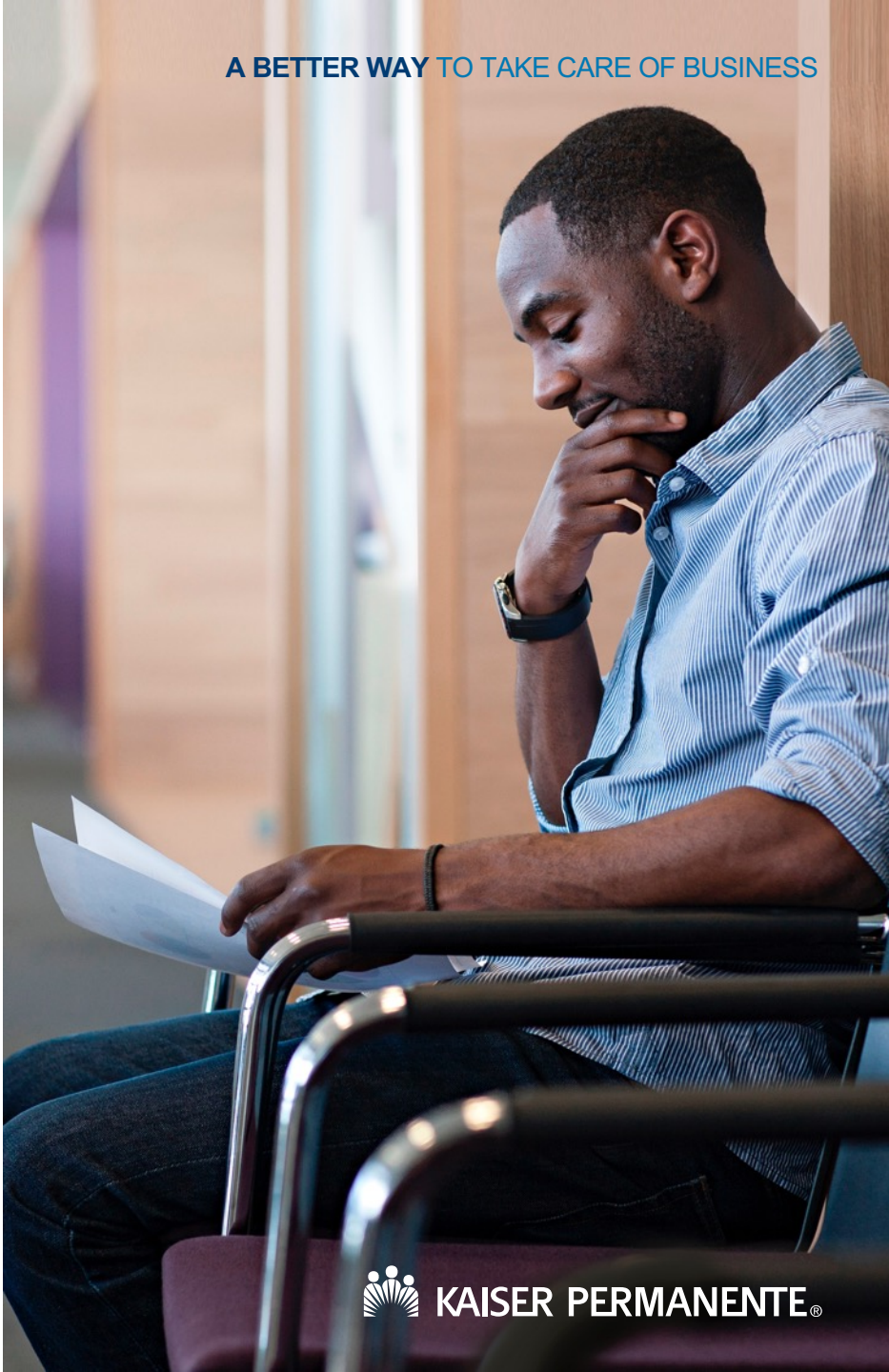


Employers may ask employees if they're experiencing symptoms of COVID-19<sup>1</sup>



All information must be kept separate and secure<sup>2</sup>

1. Symptoms are being updated regularly. [Centers for Disease Control - Symptoms of Coronavirus](#)
2. [Pandemic Preparedness in the Workplace and the Americans with Disabilities Act](#)



# Guidance around sick days and documentation

According to the ADA, your pandemic planning should include an identified pandemic coordinator and/or team with defined roles and responsibilities for preparedness and response planning. Your staff should include those with expertise in the Equal Employment Opportunity Commission (EEOC) laws.

## Documentation

- You are limited in what you can request from an employee who calls in sick.
- You are permitted to require physician notes certifying that an employee is fit for duty. Both NIOSH and OSHA are advising employers not to require such documentation. We are following their guidance and support their recommendation.
- As a practical matter, however, doctors and other health care professionals may be too busy during and immediately after a pandemic outbreak to provide fitness-for-duty documentation.
- As guidelines evolve, new approaches may be necessary.

## Dismissal/Leave

- The ADA and CDC allow you to send employees home if they have flu-like symptoms. The CDC states that employees who become ill with symptoms of influenza-like illness at work during a pandemic — as defined by World Health Organization (WHO) — should leave the workplace.
- The EEOC's ADA regulations explain that "direct threat" means a significant risk of substantial harm to the health or safety of the individual or others.

# The science around antibody testing is evolving

- Antibody testing is not currently effective to manage an individual patient
  - Antibody testing quality varies and many tests are unreliable
  - The role of antibodies and immunity in recovered COVID-19 patients is not fully understood at this time
- Antibody tests remain a valuable tool for epidemiologists and public health officials to develop local policies
- Kaiser Permanente continues to investigate antibody testing and follow evidence-based medicine



## Additional resources and information

- [ADA](#): The Americans with Disabilities Act is a federal civil rights law that applies to people with disabilities and protects them from discrimination.
- [CDC](#): Centers for Disease Control and Prevention
- [DOL](#): Department of Labor
  - [FMLA](#): Family and Medical Leave Act
  - [EEOC](#): The Equal Employment Opportunity Commission a federal agency that enforces the sections of the ADA that prohibit employment discrimination.
- [IBI](#): Integrated Benefits Institute
- [DMEC](#): Disability Management Employer Coalition
- [OSHA](#): Occupational Safety and Health Administration
- [NIOSH](#): National Institute for Occupational Safety and Health
- [WHO](#): World Health Organization



# COVID-19 workplace scenarios *(Continued)*

Situation	Documentation issued by Kaiser Permanente	How members obtain documentation
<p>An employee has been out for suspected COVID-19 but did not receive a test confirming presence of the disease</p>	<p>None</p>	<p>No medical documentation will be issued. Employees will need to attest to their illness and compliance with CDC and physician guidance for returning to work.</p>
<p>An employee is <b>symptomatic</b> and cannot work due to suspected or confirmed COVID-19</p>	<p>A <b>Work Status Form (WSF)</b> is issued</p>	<p>WSF is issued once the member is evaluated by the provider, and time off is recommended as part of treatment plan.</p> <p>The employee will be advised on care instructions they should be following, and <b>symptomatic patients will be issued the appropriate off-work WSF.*</b></p> <p><b>However, they will not issue a separate return-to-work clearance unless the patient was tested and the results were negative.</b></p>

# COVID-19 workplace scenarios *(Continued)*

Situation	Documentation issued by Kaiser Permanente	How members obtain documentation
<p>An employee is <b>asymptomatic</b> but <b>at risk due to a pre-existing condition</b></p>	<p>A standard <b>COVID-19 High Risk Patient Letter</b> will be sent to the member to share with their employer, and it should initiate the interactive process.</p> <p>A WSF/letter is not issued as the individual is not symptomatic (unless the individual has specific limitations, in which case a WSR* will be issued).</p>	<p>The letter will be issued if the medical condition is already documented or once the member is evaluated by the provider.</p> <p>Members can request documentation through an e-visit or secure messaging at <a href="https://kp.org">kp.org</a>.</p> <p>The original letter and current CDC guidelines should be used for return-to-work documentation.</p>
<p>Employee is <b>asymptomatic</b> but <b>has had exposure and is required to self-isolate</b></p>	<p>None</p>	<p>Documentation involves employee attestation of exposure, which can be made directly to the employer.</p> <p>A return-to-work notice will not be issued. The original attestation and CDC guidelines should suffice.</p>

# COVID-19 workplace scenarios *(Continued)*

Situation	Documentation issued by Kaiser Permanente	How members obtain documentation
Employee is <b>asymptomatic</b> but needs <b>leave to care for a sick relative</b> or has a <b>family member</b> who is <b>high risk</b>	None	<p>Documentation will need to be issued by the provider treating the patient in question, similar to other FMLA requests.</p> <p>A return-to-work notice will not be issued. The original employee documentation and CDC guidelines should suffice.</p>
An employee has been out for <b>confirmed COVID-19</b>	WSF issued	<p>The WSF provides return-to-work guidance.</p> <p>You and your employees should follow CDC guidance and physician instructions for safe return to work.</p>

## Chapter 3

# Mental health and emotional well-being

COVID-19 and the shelter-in-place orders have had significant impacts on employees' mental health.

### Key takeaways:

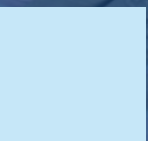
- Anticipate a surge in mental health symptoms that may coincide with the timing of returning to work.
- Build or reinforce a psychologically healthy workplace where employees feel safe, respected, and empowered.
- Offer self-care tools, employee assistance programs (EAP), and clinical resources for the unique stressors of your workplace.

### Data points:

93%

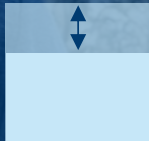
of employees believe that companies that survive COVID-19 will be those who support their employees' mental health<sup>1</sup>

1933



25%

2020



15%

As of April 23, the unemployment rate was 15%<sup>2</sup> and climbing, with 33 million Americans unemployed. In 1933, during the Great Depression, the unemployment was at an all-time high of 25%.<sup>3</sup>

1. "COVID 19 four radical changes in U.S. worker mental health needs," *Ginger*, April 2020
2. *Fortune*, April 2020
3. *National Conference of State Legislatures*, April 2020

# Mental health and wellness during a time of crisis

COVID-19 has had a sudden and dramatic impact on our collective mental health. Numerous factors associated with the COVID-19 pandemic are taking a toll on:

- **the mental health of individuals**
- **social isolation**
- **health-related anxieties**
- **fear of uncertainty**
- **change in routines**
- **financial stress**
- **loss**
- **grief**
- **trauma**
- **increased substance use**

In addition, so many of the social rituals (including those we participate in at work) that we use to support each other and ourselves through crisis and disruption have themselves been disrupted or entirely canceled.



# The unique stressors of different work populations



**Health care workers, first responders, and essential workers** have had high levels of stress and may experience burnout, stress, and even PTSD.



**Virtual workers** are still managing the recent adjustment and anxiety of transitioning back to a shared physical workspace.



**Furloughed or laid-off workers** are facing stress and uncertainty.

# Planning for the “next normal”

## Offer and promote available resources



**Ensure access to robust mental health services —** Make sure your employees know how to engage in the mental health care offered by their health plan.



**Promote and optimize EAP services —** Communicate what is offered and remind employees that their participation is confidential (a common misunderstanding of EAP services), including work-life services; leverage support for managers; and consider expanding the number of EAP sessions or temporarily providing on-site EAP services.



**Provide self-care tools for resilience —** Promote the use of emotional well-being resources available through your employer health and wellness partners.



# Planning for the “next normal” *(continued)*

## Build or reinforce a psychologically healthy workplace



Offer tools and programs to increase **mental health awareness**.

- **Resources:** [National Alliance on Mental Health \(NAMI\)](#), [Mental Health First Aid \(MHFA\)](#)



Commit to mental health **stigma reduction**. Our FindYourWords public health campaign has tools for members and non-members. Numerous organizations have tools and resources to break down barriers around mental health.

- **Resources:** [Mental Health America](#), [FindYourWords](#)



Ensure policies and processes to address **workplace bullying and discrimination**. Stress may exacerbate workforce tensions, political differences, and differing perspectives about the safety of returning to work.



Strengthen your overall **workforce health strategy** and offer programs addressing exercise, nutrition, smoking session, sleep, stress, etc.



**Promote a sense of purpose.** Shared meaning builds strong connections. Helping employees to find meaning in their work and understand the mission of your organization can help them feel more connected and protect them against the harmful effects of loneliness.



Provide **managers** with training, resources, and support.



# Kaiser Permanente is here to support you and your workforce

## Employee mental health and addiction care

We offer a wide array of services to meet members where they are, including:

- ❑ Screening for mental health symptoms (e.g., depression, anxiety, substance abuse) in primary care and other specialties
- ❑ Feedback-informed specialty mental health care with demonstrated outcomes
- ❑ Mental health telehealth as clinically appropriate
- ❑ Case management, including mental and social health
- ❑ Depression care management
- ❑ Digital self-care tools, including [myStrength](#)
- ❑ Individual therapy, group therapy, psychiatric care, support groups, intensive outpatient, inpatient, addiction care, and more



# Kaiser Permanente is here to support you and your workforce *(continued)*

## Workforce mental health

- ❑ EAP collaboration and consultation to ensure coordination of care
- ❑ Support to increase mental health awareness, including in-person Mental Health First Aid training
- ❑ Mental health stigma reduction public health campaign: [FindYourWords](#)
- ❑ Workforce-specific offerings (e.g., first responders, schools)
- ❑ Consultation around building a psychologically health workplace
- ❑ Employer-focused data and reporting to provide insights around areas of opportunity and risk



# Mental Health & Addiction Care Numbers

Regions	Mental Health	Addiction Medicine
<b>California</b> – Northern	1-800-464-4000	1-800-464-4000
<b>California</b> – Southern	1-800-900-3277	1-800-900-3277
<b>Colorado</b> – Denver/Boulder	1-303-471-7700	1-303-471-7700
<b>Colorado</b> – Northern	1-866-359-8299	1-866-359-8299
<b>Colorado</b> – Mountain & Southern Colorado	1-866-702-9026	1-866-702-9026
<b>Georgia</b>	1-404-365-0966 1-800-611-1811	1-404-365-0966 1-800-611-1811
<b>Hawaii</b> – Oahu	1-808-432-7600	1-808-432-7600
<b>Hawaii</b> – Neighbor Islands	1-888-945-7600	1-888-945-7600
<b>Mid-Atlantic States</b>	1-866-530-8778	1-866-530-8778
<b>Northwest</b>	1-855-632-8280	1-855-632-8280
<b>Washington</b>	1-888-287-2680	1-888-287-2680

# Additional mental health and wellness resources

## Workforce mental health resources:

- [Mental Health First Aid](#)
- [Aon](#)
- [Working Well Toolkit – Leading a Mentally Healthy Business](#)

## General mental health resources:

- CDC: [Stress and coping with COVID-19](#)
- NAMI: [Resource and information guide on mental health related to COVID-19](#)
- APA: [Resources for supporting mental health](#)
- [Mental Health America](#)
- [American Foundation for Suicide Prevention](#)

- [FindYourWords](#): Stigma reduction
- [kp.org/mentalhealth](#): Mental health support
- [kp.org/selfcare](#) or [kp.org/selfcareapps](#): Self-care and resilience tools
- [business.kp.org/coronavirus](#)

## Community Mental Health & Addiction Resources

- [Alcoholics Anonymous](#)
- [Al-Anon & Alateen](#)
- **Caregiver Help Desk:** 1-855-227-3640. Staffed by caregiving experts, the help desk helps you find the right information you need to help you navigate your complex caregiving challenges.
- [Celebrate Recovery](#)
- **Crisis Text Line:** Text “NAMI” to 741741 to chat with a trained crisis counselor. Free 24/7 text line for those in crisis (English only).
- [GriefShare:](#) Hosts free, in-person grief recovery support groups across the country.
- [Narcotics Anonymous](#)
- **NAMI Helpline:** Call 1-800-950-NAMI (1-800-950-6264) or email [info@nami.org](mailto:info@nami.org).
- [NAMI National HelpLine Warmline Directory](#)
- **National Domestic Violence Hotline:** Victims and survivors can call 1-800-799-7233 (TTY 1-800-799-7233). If you're unable to speak safely, log onto [thehotline.org](http://thehotline.org) or text LOVEIS to 22522.
- [Personal Grief Coach:](#) For help coping with grief, trauma, and distress assistance after suicide.
- [Refuge Recovery](#)
- [SMART Recovery](#)
- [Spiritual Resources from Harvard](#)

## Community Mental Health & Addiction Resources (Continued)

- **The National Sexual Assault Telephone Hotline:** Call 1-800-656-HOPE (1-800-656-4673) to be connected with a trained staff member from a sexual assault service provider in your area.
- **The Partnership for Drug-free Kids Helpline:** Call 1-855-378-4373 if you are having difficulty accessing support for your family or a loved one struggling with addiction faces during COVID-19.
- **The Steve Fund:** Young people of color can text keyword “STEVE” to 741741 to connect with a trained crisis counselor 24/7.
- **The Trevor Project Resources:** Call 1-866-488-7386, instant-message a counselor on their website, or text “START” to 678678 24/7.
- **[The Unlonely Project](#):** Building community in social isolation.
- **Trans LifeLine:** Call 1- (877) 565-8860 24/7. Trans LifeLine is a trans-led organization.

## Chapter 4

# Impact of COVID-19 on the Social Drivers of Health

Where your employees live and their ability to meet their everyday needs (food, housing, job security, etc.) impact their health and productivity at work.

### Key takeaways:

- Address the social and economic needs of your entire workforce (including those who are furloughed, laid off/terminated, or on reduced hours).
- Consider ways to help the communities where your employees live and where your businesses are located.

### Stats:



Nearly 2 in 3 Americans believe that the economic impact will have a bigger impact on them than the virus itself <sup>1</sup>



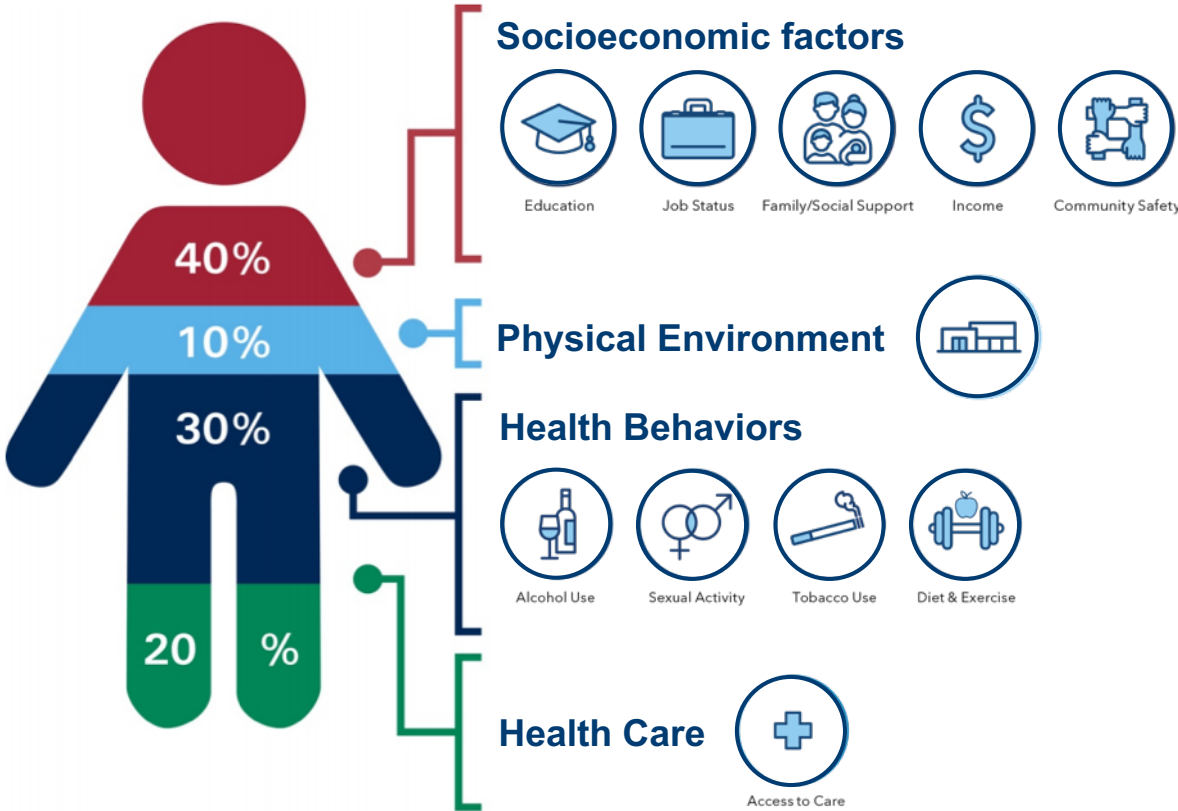
Over half of those with social needs reported a negative mental health impact from COVID-19 <sup>2</sup>

1. Harris Poll, Wave 7, online, nationally representative sample, April 11-13, 2020, n=2,013  
2. 2020 KP National Social Needs Survey: Preliminary Findings

# Social Drivers of Health account for up to 40% of health outcomes

The **social drivers of health** (also known as the social determinants of health) are the conditions in which people live, work, and play. They account for up to 40% of health outcomes, which impact both employee health and business productivity.

**Social and economic factors** play a significant role in how people meet the everyday demands of life, like food, housing, and transportation.



Source: Institute for Clinical Systems Improvement; Going Beyond Clinical Walls Solving Complex Problems October 2014 Graphic designed by ProMedica



# Social and economic factors may impact employee productivity

- Paying bills or taking public transportation to work may impact focus at work and overall business productivity.
- Affordable and safe childcare will be top of mind as employees return to the workplace.
- Furloughed or laid-off employees or their partners/spouses may experience financial strain. Low-wage workers are particularly vulnerable.
- Unmet food, housing, and other social needs may be more acute as many employees struggled to meet these needs before COVID-19. Many employees will have to prioritize their social needs over health care, which can be particularly concerning for people with chronic conditions.



# Planning for the “next normal”

Address your employees’ potential social needs by looking into your demographic and utilization data. Work with your business partners to identify the:

- Percentage of employees who access their 401(k)/retirement funds early
- Number of requests for early paycheck release
- Paycheck release EAP utilization and types of assistance needed
- Percentage of employees earning \$25,000 or less ([U.S Bureau of Labor Statistics](#)). **Note:** There may be regional variation of low wage threshold.



# Offer and promote available resources



**Optimize EAP services** — Communicate what’s offered, including work-life balance resources (referrals to financial services, legal services, day care).



**Offer financial services** — Highlight the counseling services that may be available, and host webinars.



**Promote community resources** — Share self-serve platforms such as **211** or **findhelp.org**. Consider exploring partnerships with health plans, vendors, and community-based organizations to track additional community resources and address the specific needs of your workforce.

## Consider extra assistance for vulnerable employee groups:

As you assess your workforce, anticipate the needs of vulnerable populations, workers returning to work after furlough, and low-wage earners, who more likely to experience the health and economic impacts of COVID-19 (Kaiser Family Foundation).

# Normalize conversations about need and assistance

Like with mental health, there is stigma around accessing public benefits and discounted or no-cost resources. Have open conversations with your employees to let them know it's OK to ask for help. Use statements like “during a time like this, getting support can be beneficial” or “many people are struggling.”

Consider offering additional assistance like:



**Employee Assistance Programs (EAP), Wellness Champions, or Employee Resource Groups (ERG)** to provide your workforce with more tools to succeed.



**Training for managers** to help them address and guide employees to the right resources.



# Review workplace policies to address social and economic needs

- **Allow flexible work scheduling** — Consider compressing the workweek, remote policies and varied start/end times to allow employees to balance their work and home lives.
- **Offer robust caregiver benefits** — Explore child and adult care referral systems (in places where care remains available and safe), subsidies, and flexible spending accounts (FSAs).
- **Help navigate leave-of-absence policies** — Offer clear guidance. Adjust the policies to meet employee needs during this pandemic.
- **Ensure flexible policies are available to all workers** — Provide the same guidelines to your whole workforce, regardless of gender or employee status (part-time, contract, or full-time).



# Support terminated or laid-off workers

Employees who are transitioning out of the workforce may need additional assistance and support.



**Help navigate health insurance options** — Consider subsidizing COBRA benefits or providing information/community resources to help workers enroll in Medicaid or another form of coverage on state-based health insurance exchanges.

- Kaiser Permanente will allow members to continue coverage even if they are laid off, but the employer must continue to pay the premiums and include them on their enrollment.



**Set up a benefits review** — Help employees understand how their benefits work, and provide straightforward language about unemployment benefits.



**Assist with finding a new job** — Assign an HR business partner or outplacement firm to assist with resume reviews, interview coaching, job searching tips, and LinkedIn profile updates for employees who are being let go.

# Support your community

- **Redirect your sustainability or philanthropy strategy** — Think about how to leverage your sustainability/corporate social responsibility (CSR) and other programs to address COVID-19. Visit the [Health Enhancement Research Organization \(HERO\) website](#) for employer examples. Identify the top counties/ZIP codes where your employees live. Target your efforts to supporting resources in those communities.
- **Organize COVID-19-related volunteer activities** — Corporate volunteerism has shown to increase employee satisfaction and provide a personal sense of fulfillment. There are many volunteer organizations ([American Red Cross](#), local food banks) and government-run state websites that provide information on how you can safely help your community during this difficult time.



## Curated tools and information for your workforce health

### Employer resources for workforce health:

- [Business for Social Responsibility \(BSR\)](#)
- [HERO Health](#)

### Resource guides for employees:

- Where to find general employee resources:
  - [findhelp.org](#)
  - [211.org](#) (by phone: 211)
  - [helpwhenyouneedit.org](#)
- Where to find resources for Kaiser Permanente members:
  - [State resource guides](#) — To access these resources, employees will need to select their region at the top of the page. Then they can find their local resources link under “Support in your community.”
  - Medical financial assistance — Employees can [contact Member Services](#) if they’re experiencing financial hardship. (Not all employees will meet the income requirement for aid.)



## Chapter 5

# Review and update HR policies to reflect the next normal

Addressing HR policies will give your employees peace of mind so they have greater capacity to be present at work and help you meet pressing business challenges.

### Key takeaways:

- **HR** has a unique role in supporting the greatest assets of an organization — their employees and talent — during a time of uncertainty, change, economic challenges, and physical distancing.
- **Local and national governmental policies** will play a significant role in policies to help mitigate the impacts of COVID-19.



# Start with what you have and what you know

Review your plans and policies to identify which ones are still current and relevant in this new environment and which ones need adjustment. These adjustments may be temporary or highlight a longer-term shift in your approach to conducting business. Rely on your existing governance structure and modify as appropriate.

## Benefit plans

- Medical/dental
- FSA and dependent care FSA plans
- 401(k)/pension plans
- Disability
- Life
- Voluntary

## HR policies and/or protocols

- Time and attendance
- Work hours
- Bereavement
- HIPAA/privacy
- Work accommodations related to ADA
- Hiring/rehiring policies
- Severance
- Workplace safety
- Travel
- Telecommute/work from home
- Company equipment use policy



# Connect with and rely on your partners

These teams will bring expertise to your specific needs, guide you as you consider various options, and be trusted thought partners. They will help you consider and implement business process changes where plans, policies, or protocols are updated.

- **legal counsel**
- **health and welfare benefit partners**
- **cross-functional department leaders**
- **union leaders**
- **industry colleagues**



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# Share updates with your employees regularly and often

You may need to create new communication channels and repeat messages many times. People are distracted with the many demands on them at this time. Be patient with your employees and look for easy ways to help them find the information that's relevant to their situation when they need it.



Consider how your business processes will change in light of the new requirements based on CDC and DOH information, and how those changes impact your HR policies: things like working shift hours, wage earning, disability, and time off.



# Create policies that support a safe and healthy return to work

## Considerations

- Consider that during this worldwide pandemic, some new policies may be temporary while others are more long-term.
- Think creatively, as you are working to assure your people are protected and healthy.
- Understand the job concerns of employees who have no or little time off, by implementing supportive policies and practices like flexible sick leave.
- Try to “do no harm” for employees staying home due to circumstances related to COVID-19.

## Questions

- Are you considering creating paid sick leave for employees with COVID-19?
- With schools out, are you considering ways to support employees’ child care needs so they can come back to work?
- How will operating different shifts and changing normal work hours to maintain distance impact your employees?
- How do you determine who gets which work shifts?
- What policies and practices need to be created, maintained, or updated to create and safe and healthy workplace? You may have union contracts that determine some of these things.



# Understand the role of privacy and HIPAA guidelines

HIPAA regulations around privacy do not change with COVID-19. And yet, there will be a natural desire for employees to know if a co-worker tests positive or, worse, is hospitalized or passes away.

However, it's imperative that individual health data remains confidential. Remind your employees about your policies covering this topic and the other company handbook expectations.



# Review and adjust your flexible spending account benefits

**Questions to consider:**

- Depending on your plan year, how has COVID-19 impacted your employees' FSA and dependent are FSA elections and spending?
- What is your rollover policy?
- Will there be an extension on filing claims or in the amount available to roll over?

These questions will also be impacted by IRS rules.



# Curated tools and information for you to reference as needed

There are many resources online to help guide employers and businesses during this time. Kaiser Permanente is also here to be a thought partner with you as you navigate during this unprecedented time. Following are just a few resources:

## Business Group on Health

- [Position Statement on COVID-19](#)
- [COVID-19: Benefits Checklist](#)
- [Testing and Treatment: HSA/HDHPs Can Provide Pre-Deductible Coverage](#)

## Benefit Resource Inc.

- <https://www.benefitresource.com/covid/>

## HealthEquity

- [Impact of COVID-19 and the CARES Act on Consumer-Directed Benefits](#)

## CDC

- [Businesses and Workplaces: Plan, Prepare, and Respond](#)
- [Interim Guidance on Businesses and Employers Responding to COVID-19 \(May 2020\)](#)

## Connect Your Care

- [FAQs in the Moment: How COVID-19 and the CARES Act Impact Health Accounts, Lifestyle Spending Accounts, Child Care, and More](#)



# Curated tools and information for you to reference as needed *(Continued)*

## IRS

[Coronavirus and Economic Impact Payments: Resources and Guidance](#)

## SHRM

- [Coronavirus and COVID-19](#)
- [Resources and Tools Listing of Government and Other Reliable Resources for Workplace Issues Related to Coronavirus](#)

## Vanguard

[New stimulus law offers assistance to retirement savers](#)

## Business.WA.gov

[COVID-19 Business Resources for Washington State](#)

## CNBC

[How the biggest companies in the world are preparing to bring back their workforce](#)

## GEEKWire

[Ready to return to the office? Seattle employers offer advice in Madrona's "Back to Work Toolkit"](#)

## Chapter 6

# Monitor federal and local regulatory and legislative guidance

Reinforce safe and healthy workforce practices by staying connected with the latest regulatory and legislative guidance.

### Key takeaways:

- Review the White House's three-phase approach to individual and business guidelines.
- Check your state's Department of Health guidance for reopening businesses and protecting your workforce.
- Read county and municipality orders, which may be more restrictive than state guidelines.



# Federal regulatory agency guidance and resources

## General

### Department of Labor (family and medical leave, wage and hour)

- [Coronavirus resources regarding workplace safety, wages, hours, and leave](#)
- [Guidance regarding Families First Coronavirus Response Act, employee paid leave rights](#)
- [DOL Families First Coronavirus Response Act \(FFCRA\) poster](#)

### EEOC (disability accommodation, privacy)

- [What you should know about the ADA, the Rehabilitation Act and the coronavirus](#)

- [Webinar: EEOC answers questions about the pandemic and antidiscrimination laws](#)
- [Coronavirus and COVID-19 portal](#)

### IRS (taxes)

- [COVID-19-related tax credits for required paid leave provided by small and midsize businesses FAQs](#)

### OSHA (workplace safety)

- [U.S. Occupational Safety and Health Administration COVID-19 page](#)

# Federal, state, and local guidance and considerations

- Understand the White House’s “[Guidelines: Opening Up America Again](#)” and the three phases for individuals and businesses.
- Review your state Department of Public Health and governor’s websites for the latest guidance on reopening business and protecting your workforce.
- Read county and municipality orders, which may be more restrictive than state orders. Review your city/county’s Department of Public Health website for more local information.
- Try “live” trackers that show recent developments, like [Alston & Bird’s 50 State Openings Tracker](#).



# California regional guidance

## Regulatory guidance (Cal/OSHA)

### [Requirements to Protect Workers from Coronavirus](#)

#### [Infection Prevention for Logistics Employers and Employees](#)

- [Infection Prevention for Logistics Employers and Employees](#)
- [Department of Fair Employment and Housing Coronavirus-related FAQs \(disability accommodation, privacy\)](#)
- [Labor Commissioner FAQs on Laws Enforced by the California Labor Commissioner's Office \(paid sick leave, school closure leave, wage and hour\)](#)
- [Employment Development Department \(State Disability; Unemployment\)](#)
- [California Coronavirus \(COVID-19\) Response Portal \(includes links to emotional health resources, child care resources\)](#)

### [California Executive Order on Workers' Compensation Coverage](#)

## Shelter-in-place and reopening guidance

- California released a [framework for reopening the economy](#) and focused mainly on building the public health infrastructure to safely remove the stay-at-home orders that are in place. An update is available [here](#).
- California announced the [resumption of health services](#) delayed during the state of emergency. Additional guidelines are forthcoming.
- California's counties have issued additional orders that may be more restrictive than the state order.

# Colorado regional guidance

## Regulatory guidance:

[Department of Labor and Employment emergency rules](#) temporarily require employers in certain industries to provide employees with up to 80 hours of paid sick leave.

## Shelter-in-place and reopening guidance

- On April 26, Colorado released the [Safer at Home Executive Order](#), which sets forth physical distancing requirements for all Colorado residents, stay-at-home requirements for vulnerable populations, and changes going into effect for Colorado businesses on April 27, May 1, and May 4.
- Colorado issued the [Voluntary or Elective Surgeries and Procedures Executive Order](#), which permits the resumption of health services.

# Georgia regional guidance

## Regulatory guidance:

[State Department of Labor Emergency rules](#) require employers to file partial unemployment claims on behalf of employees for whom there is reduced work or no work for a short period due to COVID-19. The rules also provide that employers aren't to be charged for unemployment benefits related to the virus.

## Shelter-in-place and reopening guidance

- Georgia released the [Providing Flexibility for Healthcare Practices, Moving Certain Businesses to Minimum Operations and Providing for Emergency Response](#) executive order, which outlines changes for businesses on April 24 and April 27, including 20 mitigation measures businesses should take.
- Georgia's executive order permits resumption of health services in accordance with CDC and Centers for Medicare & Medicaid Services guidelines.

# Maryland regional guidance

## Regulatory guidance:

- [Executive order requires workers at retail and food service establishments to wear face coverings.](#)
- The state Department of Health hosted a [webinar presentation on the status of COVID-19](#) in the state and as it relates to business operations and labor and employment issues.
- [Maryland Coronavirus \(COVID-19\) Information for Business portal](#)

## Shelter-in-place and reopening guidance

[Maryland released “Maryland Strong: Roadmap to Recovery,”](#) which focuses on building the public health infrastructure to safely remove the stay-at-home orders that are in place.



# Oregon regional guidance

## Regulatory guidance:

- [Executive order requiring employers to facilitate telework and work-from-home for employees to the maximum extent possible, and prohibiting work in offices when telework and work-from-home options are available.](#)
- [Executive order requiring that on construction sites that remain open, an employer must designate an employee or officer to enforce social-distancing policies consistent with guidance from the Oregon Health Authority.](#)
- [Oregon Bureau of Labor and Industries temporary administrative order permitting eligible employees to take family leave to care for children whose school or place of care has been closed due to a public health emergency.](#)
- [The state has released an OSHA-specific Q&A for issues related to COVID-19](#)
- [Oregon Bureau of Labor and Industries guidance on COVID-19 as it relates to the state's predictive scheduling law.](#)
- [Oregon OSHA COVID portal](#)

## Shelter-in-place and reopening guidance

- Oregon released a [framework for reopening the economy](#) that focuses on building the public health infrastructure to safely remove the stay-at-home orders that are in place.
- Oregon issued an [executive order that allows the resumption of nonurgent health care services](#) starting May 1. Additional guidance from the Oregon Health Authority is anticipated shortly.

# Virginia regional guidance

## Regulatory guidance:

- [Department of Labor and Industry VOSH Hazard Alert for employers, providing information and guidance on the new coronavirus in the workplace](#)
- [Department of Professional and Occupational Regulation COVID-19 portal](#)

## Shelter-in-place and reopening guidance

- Virginia issued the “[Forward Virginia](#)” blueprint that describes a phased approach to reopening the economy grounded in the federal CDC guidelines.
- Virginia is permitting the resumption of nonurgent health care services starting May 1.

# Washington regional guidance

## Regulatory guidance:

- [Governor's proclamation prohibits employers from taking certain actions with respect to employees at higher risk for serious illness or death from COVID-19](#), including failing to utilize all available alternative work arrangements to protect such employees, and failing to permit such employees to use any available accrued leave or unemployment insurance when no alternative work arrangements are available.
- [Washington State Coronavirus Response portal for businesses and workers](#)

## Shelter-in-place and reopening guidelines

Washington issued a policy brief, "[Safe Return to Public Life in Washington State](#)," which focuses on building the public health infrastructure to safely remove the stay-at-home orders that are in place.

# ☆ Washington, D.C., regional guidance

## Regulatory guidance:

- [Temporary modifications regarding accrued sick and safe leave, and universal paid leave](#)
- [Emergency legislation modifies employee eligibility requirements for family and medical leave](#)

## Shelter-in-place and reopening guidelines

Mayor Muriel Bowser announced the leadership of the [ReOpen DC Advisory Group](#), which will develop recommendations on reopening the district safely and sustainably through a plan based in science and tailored to the needs of the community.

## Other resources for accommodating individuals with disabilities

[Job Accommodation Network \(COVID-19-specific\)](#)

## Chapter 7

# Industry spotlights

Your business and employees have unique needs and safety concerns as workplaces reopen.

### Key takeaways:

Review industry-specific health and safety guidance amid COVID-19 for the following workplaces:

- Manufacturing
- District and school administration
- Grocery and essential retail
- Construction
- First responders, law enforcement, firefighters, and emergency medical services
- Transportation
- Health care
- Hospitality





# Manufacturing guidance and considerations

General manufacturing considerations that can help reduce risk of exposure to the coronavirus:

- ❑ Consider limiting the duration of work activities or implementing innovative approaches where physical distancing is a challenge, like temporarily moving or repositioning workstations to create more distance or installing barriers between workstations.
- ❑ Monitor public health communications about COVID-19 recommendations for the workplace, and ensure that employees can access and understand that information.
- ❑ Train employees on how to properly put on, use/wear, remove, and maintain protective clothing and equipment.
- ❑ Allow employees to wear masks over their nose and mouth to prevent spread of the virus.
- ❑ Encourage respiratory etiquette, including covering coughs and sneezes with a tissue or elbow.
- ❑ Discourage employees from using co-workers' tools and equipment.
- ❑ Use Environmental Protection Agency–approved cleaning chemicals that are from List N or have label claims against the coronavirus.
- ❑ Promote personal hygiene. If employees do not have access to soap and water for handwashing, provide alcohol-based hand rubs containing at least 60% alcohol. Provide disinfectants and disposable towels employees can use to clean work surfaces.
- ❑ Encourage employees to report any safety and health concerns.

# Manufacturing resources

- [OSHA Guidance and Checklist](#)
- [The National Association of Manufacturing](#)
- [OSHA COVID-19 Overview](#)





# District and school administrator guidance and considerations

General K-12 school and district administrator considerations that can help reduce risk of exposure to the coronavirus:

- ❑ Review, update, and implement emergency operations plans (EOPs) in collaboration with local health departments.
- ❑ Develop information-sharing systems with local health officials and other key partners to report on and respond to potential outbreaks and changes in absenteeism.
- ❑ Train staff on healthy hygiene practices so they can teach these to students. The CDC offers several [free handwashing resources](#) that include health promotion materials, information on proper handwashing technique, and tips for families to help children develop good handwashing habits.
- ❑ Routinely clean and disinfect frequently touched surfaces (e.g., doorknobs, light switches, classroom sink handles, countertops), using all cleaning products according to the directions on the label. Review the EPA list of [products approved for use against the virus](#).
- ❑ Provide EPA-registered disposable wipes to teachers and staff so that commonly used surfaces (e.g., keyboards, desks, remote controls) can be wiped down before use.
- ❑ Ensure adequate supplies to support cleaning and disinfection practices.
- ❑ Create and test communications plans for use with the school community.
- ❑ Create communication strategies for sharing information about steps being taken by the school facility to prepare, and how additional information will be shared.



## District and school administrator resources

- [Interim Guidance for Administrators of US K-12 Schools and Child Care Programs](#)
- [The Centers for Disease Control and Prevention's COVID-19 FAQs for Administrators, Teachers, and Parents](#)
- [The Centers for Disease Control and Prevention's Implementation of Mitigation Strategies for Communities with Local COVID-19 Transmission](#)

Over the next two months, Kaiser Permanente will release additional guidance to provide practical guidance for school and district administrators to address the specific mental and physical health considerations of school communities as they relate to COVID-19.



# Grocery and essential retail worker guidance and considerations

General retail industry (e.g., pharmacies, supermarkets, big-box stores) considerations that can help reduce risk of exposure to the coronavirus:

- Provide a place to wash hands, or alcohol-based hand rubs containing at least 60% alcohol.
- Maintain regular housekeeping practices, including routine cleaning and disinfecting of surfaces.
- Practice sensible physical distancing, maintaining six feet between co-workers and customers, where possible.
- Post signage with healthy habits to be seen by both the employees and customers (e.g., bathrooms, entrance, time clock).
- Close self-serving food bars and bulk-bin options.
- Close fitting rooms.
- Encourage customers to use touchless payment options.

## Grocery and essential retail worker resources

- [Guidance for retailers reopening stores](#)
- [General OSHA Guidance](#)
- [Guidance from Cal OSHA on COVID-19 Infection Prevention in Grocery Stores](#)
- [What Grocery and Food Retail Workers Need to Know About COVID-19](#)



# Construction company guidance and considerations

General construction company considerations that can help reduce risk of exposure to the coronavirus:

- ❑ Allow employees to wear masks over their nose and mouth to prevent spreading the virus.
- ❑ Continue to use other normal control measures, including PPE necessary to protect employees from other job hazards associated with construction activities.
- ❑ Advise employees to avoid physical contact with others, and direct employees, contractors, and visitors to increase personal space to at least 6 feet, where possible. Where work trailers are used, all employees should maintain physical distancing while inside the trailers.
- ❑ Train employees on how to properly put on, use/wear, and remove protective clothing and equipment.
- ❑ Encourage respiratory etiquette, including covering coughs and sneezes with a tissue or elbow.
- ❑ Promote personal hygiene. If workers do not have immediate access to soap and water for handwashing, provide alcohol-based hand rubs containing at least 60% alcohol.
- ❑ Use EPA-approved cleaning chemicals from List N or that have label claims against the coronavirus.
- ❑ To the extent tools or equipment must be shared, provide and instruct employees to use alcohol-based wipes to clean tools before and after use. When cleaning tools and equipment, employees should consult manufacturer recommendations for proper cleaning techniques and restrictions.
- ❑ Keep in-person meetings (including toolbox talks and safety meetings) as short as possible, limit the number of employees in attendance, and use physical distancing practices.
- ❑ Clean and disinfect portable jobsite toilets regularly. Hand sanitizer dispensers should be filled regularly. Frequently touched items (e.g., door pulls and toilet seats) should be disinfected.
- ❑ Encourage workers to report any safety and health concerns.
- ❑ Consider implementing staggered work schedules.

## Construction company resources

- [OSHA Guidance and Checklist](#)
- [Staggered Work Schedules](#) – OSHA and EEOC Guidance
- [Recommended COVID-19 Response Plan for Construction Employers](#)



# First responder, law enforcement, firefighter, and emergency medical service guidance and considerations

First responders, including law enforcement, fire services, emergency medical services, and emergency management officials, have increased risk of close contact with persons with confirmed or possible COVID-19 in the course of their work.

Emergency medical services (EMS) play a vital role in responding to requests for assistance, triaging patients, and providing emergency medical treatment and transport for ill persons. However, unlike patient care in the controlled environment of a health care facility, care and transports by EMS present unique challenges because of the nature of the setting, enclosed space during transport, frequent need for rapid medical decision-making, interventions with limited information, and a varying range of patient acuity and jurisdictional health care resources.

# First responder guidance and considerations

General first responder field considerations that can help reduce risk of exposure to the coronavirus:

- ❑ Assess the hazards to which your employees may be exposed.
- ❑ Evaluate the risk of exposure. [OSHA's occupational exposure risk pyramid](#) provides examples of emergency response work tasks associated with the exposure risk levels.
- ❑ Select, implement, and ensure workers use controls to prevent exposure.

During a severe pandemic, workloads increase and staff sizes diminish as employees and their families become ill or are quarantined. These guides provide contingency planning information that can help fire and EMS departments reduce the worst impacts:

- [U.S. Fire Administration Information for First Responders on Maintaining Operational Capabilities During a Pandemic](#)
- [NIOSH Interim Training for Emergency Responders: Reducing Risks Associated with Long Work Hours](#)



# Law enforcement guidance and considerations

General law enforcement considerations that can help reduce risk of exposure to the coronavirus:

- ❑ Have a trained EMS/emergency medical technician (EMT) assess and transport anyone who may have COVID-19 to a health care facility.
- ❑ Ensure only trained personnel wearing appropriate PPE come into contact with individuals who have or may have COVID-19.
- ❑ Share your plan for exposure control with employees, and host all-hands trainings on the use of PPE for respiratory protection, when appropriate.
- ❑ Train law enforcement professionals who must make contact with individuals confirmed or suspected to have COVID-19 to follow [CDC's Interim Guidance for EMS](#). Different styles of PPE may be necessary to perform operational duties. These alternative styles (e.g., coveralls) must provide protection that is at least as great as that provided by the minimum amount of recommended PPE.





# Firefighter and emergency medical service guidance and considerations

General firefighter and EMS considerations that can help reduce risk of exposure to the coronavirus:

- ❑ Develop and share a COVID-19 health and safety plan to protect firefighter and EMS employees.
- ❑ Deliver up-to-date safety messaging on the current status of resources and protocols.
- ❑ Use National Incident Management System (NIMS) forms to document protective actions.
- ❑ Actively encourage sick employees to stay home. Employees should not return to work until the [criteria to discontinue home isolation](#) are met, in consultation with health care providers and state and local health departments. Sick-leave policies should be flexible and non-punitive.
- ❑ Fit-test personnel for appropriate respirators. Train them on [proper donning, doffing, and maintenance of all PPE](#). All PPE should be accessible to responders when needed and available.
- ❑ Implement a [specific protocol](#) with dispatch centers to determine if a caller or patient may have signs or symptoms and risk factors for COVID-19, and [communicate that information to responders](#).



# Firefighter and emergency medical service guidance and considerations *(continued)*

- ❑ Consult with state and local jurisdictions regarding access to PPE stockpiles if PPE supplies are limited. Consider establishing strike teams for suspected COVID-19 cases and sending in the fewest number of responders in full PPE as safety allows to assess the situation. Follow CDC and [NIOSH guidance for strategies for optimizing the supply of PPE](#), including:
  - Using reusable respirators that offer an equivalent or higher level of protection as N95 respirators, like elastomeric respirators, powered air-purifying respirators (PAPRs), or self-contained breathing apparatus (SCBA) facepieces.
  - Allowing [extended use or limited reuse](#) of certain types of PPE, like N95 respirators.
  - Considering the use of [PPE past their manufacturer-designated shelf life](#).
- ❑ During pre-hospital care, take steps for universal source control for anyone (e.g., EMS providers, patients, family members), regardless of whether they have symptoms:
  - [Cloth face coverings](#) are not considered PPE but can be used for source control.
  - PPE should be reserved for firefighters, EMS providers, and other first responders.
- ❑ Consult with your state and local jurisdictions regarding their policies and procedures for [critical infrastructure workers](#), like emergency first responders.
- ❑ Follow CDC guidance for when firefighters and EMS providers can return to work:
  - [following potential exposure to patients with COVID-19](#)
  - [after being diagnosed with confirmed or suspected COVID-19](#)
- ❑ Designate a person to be responsible for addressing employees COVID-19 concerns.

## First responder resources

### US Fire Administration/FEMA

- <https://www.usfa.fema.gov/coronavirus/>

### CDC

- <https://www.cdc.gov/coronavirus/2019-ncov/community/organizations/firefighter-EMS.html>
- [CDC Interim Guidance for Emergency Medical Services \(EMS\) Systems and 911 Public Safety Answering Points \(PSAPs\) for COVID-19 in the United States](#)

### Considerations, Strategies, and Resources for Emergency Medical Services Crises of Care

- [https://www.usfa.fema.gov/downloads/pdf/covid19/ems14\\_ems\\_crisis\\_standards\\_of\\_care.pdf](https://www.usfa.fema.gov/downloads/pdf/covid19/ems14_ems_crisis_standards_of_care.pdf)



# Health care worker guidance and considerations

General health care worker considerations that can help reduce risk of exposure to the coronavirus:

- ❑ Use telehealth modalities whenever possible. For care that can't be accomplished virtually, follow [CMS recommendations](#).
- ❑ Evaluate local COVID-19 incidence and trend before resuming in-person care at a health care facility.
- ❑ Prioritize surgical/procedural care for chronic disease management.
- ❑ Establish continuously monitored non-COVID care (NCC) zones that could provide necessary access to care.
- ❑ Make sufficient resources available to facilities across phases of care (including PPE, healthy workforce, facilities, supplies, testing capacity, and post-acute care) without jeopardizing surge capacity.
- ❑ Require health care professionals (HCP) to continue wearing PPE.
- ❑ Have patients seeking care wear cloth face coverings if surgical masks are in short supply.
- ❑ Keep physical distancing procedures, including minimized wait time and low patient volumes, and restrictive visitation policies in place.
- ❑ Routinely screen the incoming staff and patients for COVID-19 symptoms.
- ❑ Regularly disinfect all facilities and equipment [following CDC guidelines](#).
- ❑ Continue increasing testing capabilities at health care facilities to ensure the incoming patients and staff are COVID-19 symptom-free before attending medical procedures.

# Guidance for HCP with confirmed or suspected COVID-19

Either strategy is acceptable depending on local circumstances. For more information, follow [CDC Interim Guidance](#) (updated April 30, 2020):

## 1. Symptom-based strategy — Exclude from work until:

- 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*

## 2. Test-based strategy — Exclude from work until:

- Resolution of fever without the use of fever-reducing medications **and**
- 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  $\geq 24$  hours apart (total of two negative specimens)<sup>[1]</sup>. See [Interim Guidelines for Collecting, Handling, and Testing Clinical Specimens for 2019 Novel Coronavirus \(2019-nCoV\)](#). Of note, there have been reports of prolonged detection of RNA without direct correlation to viral culture.

<sup>1</sup>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. In persons with a persistent productive cough, SARS-CoV-2-RNA might be detected for longer periods in sputum specimens than in upper respiratory tract specimens

# Guidance for HCP with confirmed or suspected COVID-19 *(continued)*

General considerations to help reduce the risk of exposure to the coronavirus when HCP with confirmed or suspected COVID-19 return to work:

- ❑ Require HCP to wear a face mask for source control at all times while in a health care facility until all symptoms are completely resolved or 14 days after illness onset, whichever is longer. They should use a face mask instead of a cloth face covering for source control during this time period while in the facility. After this time period, they should revert to their facility policy regarding [universal source control](#) during the pandemic. Of note:
  - A face mask for source control does not replace the need to wear an N95 or higher-level respirator (or other recommended PPE) when indicated, including when caring for patients with suspected or confirmed COVID-19.
  - N95 or other respirators with an exhaust valve might not provide source control.
- ❑ Restrict HCP contact with severely immunocompromised patients (e.g., transplant, hematology-oncology) until 14 days after illness onset.
- ❑ Make HCP self-monitor for symptoms and seek reevaluation from occupational health if respiratory symptoms recur or worsen.

1. 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. In persons with a persistent productive cough, SARS-CoV-2-RNA might be detected for longer periods in sputum specimens than in upper respiratory tract (nasopharyngeal swab) specimens.





# Transportation industry guidance and considerations

General transportation industry considerations to help reduce the risk of exposure to the coronavirus:

- Provide training on proper [handwashing](#) practices and other routine infection control precautions.
- Provide employees with access to soap, clean running water, and drying materials, or alcohol-based hand sanitizers containing at least 60% alcohol at their worksite.
- Provide employees with appropriate PPE for themselves and visibly sick passengers, taking into account potential PPE shortages, and providing training on using the PPE.
- Encourage employees to limit or minimize close contact with others by maintaining a distance of at least 6 feet from each other, when possible.
- Conduct frequent cleaning of employee break rooms, rest areas, and other common areas.
- Provide tissues and no-touch disposal receptacles for employee use.

# Airline customer service and gate agent guidance and considerations

General [airline customer service and gate agent considerations](#) to help reduce the risk of exposure to the coronavirus:

- ❑ Provide employees with face masks to offer to visibly sick people.
- ❑ Avoid handling passenger and airline crew boarding passes, luggage, identification documents, credit cards, and mobile devices, where possible.
- ❑ Allow passengers to hold their own documents and scan their own boarding pass or mobile device.
- ❑ Provide appropriate supplies to allow for routine cleaning and disinfection of frequently touched surfaces (e.g., workstations, keyboards, touchscreens, printers, and computers).
- ❑ Handle service/support animals per normal guidelines.





# Airport baggage and cargo handler guidance and considerations

General airline customer service and gate agent considerations to help reduce the risk of exposure to the coronavirus:

- ❑ Provide appropriate supplies for routine cleaning and disinfection of frequently touched surfaces. These include baggage or cargo transport devices, vehicles, scanners, and shared/common 2-way radios or other mobile devices. For disinfection, use [products that meet EPA's criteria for use against SARS-CoV-2](#)[external icon](#), diluted household bleach solutions, or alcohol solutions with at least 70% alcohol, and that are appropriate for the surface. Follow manufacturer's directions for use.
- ❑ Follow normal guidance for handling animals in transit and biological cargo.



# Airport passenger assistance worker guidance and considerations

General [airport passenger assistance worker considerations](#) to help reduce the risk of exposure to the coronavirus:

- ❑ Provide face masks to employees and instruct them to limit the amount of time they are in close contact (closer than 6 feet) with others, including passengers they are assisting, to the extent feasible.
- ❑ Provide appropriate supplies for routine cleaning and disinfection of frequently touched surfaces. These include wheelchair handles, motorized carts, other transportation and assistive devices, and communication systems such as 2-way radios, tablets, or other mobile devices. Follow the directions on the cleaning product's label.
- ❑ Follow normal guidance for handling service/support animals.



# Bus transit operator guidance and considerations

- ❑ General [bus transit operator considerations](#) to help reduce the risk of exposure to the coronavirus:
- ❑ Consider asking bus passengers to enter and exit the bus through rear entry doors.
- ❑ Request passengers avoid standing or sitting within 6 feet of the bus driver.
- ❑ Instruct employees to avoid touching surfaces often touched by bus passengers.
- ❑ Provide gloves if required to touch surfaces contaminated by body fluids.
- ❑ Practice routine cleaning and disinfection of frequently touched surfaces, including surfaces in the driver cockpit commonly touched by the operator.
- ❑ Institute measures to physically separate or force distance greater than 6 feet between bus transit operators and passengers. These may include use of physical partitions or visual cues (e.g., floor decals, colored tape, or signs to indicate to passengers where they should not sit or stand near the bus operator).



# Rail transit operator guidance and considerations

General [rail transit operator considerations](#) to help reduce the risk of exposure to the coronavirus:

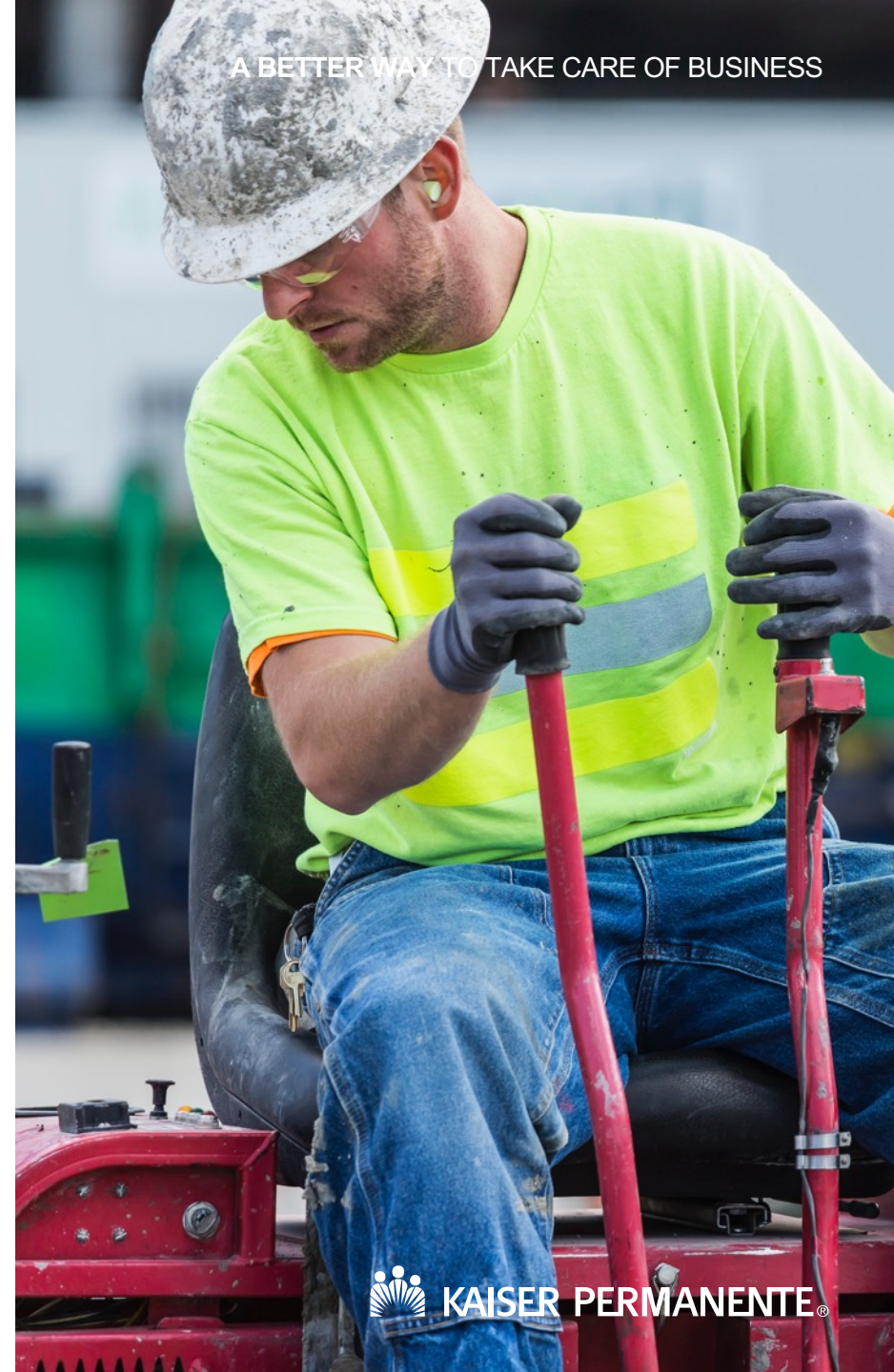
- ❑ Instruct employees to avoid touching surfaces often touched by transit passengers.
- ❑ Practice routine cleaning and disinfection of frequently touched surfaces, including those in the train cockpit commonly touched by the operator, following the directions on the cleaning product's label.
- ❑ Provide gloves if required to touch surfaces contaminated by body fluids.



# Transit station worker guidance and considerations

General [transit station worker considerations](#) to help reduce the risk of exposure to the coronavirus:

- ❑ Perform routine cleaning and disinfection of all frequently touched non-porous surfaces within the transit station on a daily basis, including kiosks, ticket machines, turnstiles, benches, handrails, garbage cans, door handles, payphones, restroom surfaces (e.g., faucets, toilets, counters), elevator buttons, and system maps.
  - Clean any visibly dirty surfaces before applying disinfectant.
  - Remove any visible contamination from soft or porous surfaces, and clean with appropriate cleansers indicated for use on these surfaces. The EPA has an approved list of [products with emerging viral pathogen claims](#).
- ❑ Use appropriate PPE for any cleaning and disinfection products.
  - After removing PPE, employees should wash their hands with soap and water for at least 20 seconds.
  - Use the warmest appropriate water setting to launder clothing worn during cleaning and disinfecting, and allow them to dry completely before reuse.





# Hospitality industry guidance and considerations

General hospitality industry guidance to help reduce the risk of exposure to the coronavirus:

- If at all possible, have guests enter through doors that are either propped open, automated, or manually operated by an employee, per California Hotel & Lodging Association COVID-19 reopening guidance, April 29.
- Clean elevator panels on a regular basis and limit the number of guests permitted per elevator.
- Arrange seating areas to accommodate physical distancing wherever possible.
- Use delivery, a drive-through window, or curbside pickup when possible.
- Do not use valet services. Employees should not open customers' vehicle doors.

# Restaurant worker guidance and considerations

General restaurant worker guidance to help reduce the risk of exposure to the coronavirus:

- ❑ Shorten customer time in store by encouraging them to:
  - Use shopping lists
  - Order ahead of time, if offered
- ❑ Set up designated pickup areas inside or outside retail establishment
- ❑ Offer curbside pickup or to place orders in vehicle trunks
- ❑ Provide safe delivery:
  - Ensure delivery coolers and transport containers are cleaned and sanitized
  - Maintain time and temperature controls for deliveries
  - Avoid cross-contamination in transit (e.g., wrap food)
  - Encourage customers to use “no touch” deliveries
  - Notify customers as the delivery is arriving by text message or phone call



# Hotel worker guidance and considerations

General hotel worker guidance to help reduce the risk of exposure to the coronavirus:

- ❑ Utilize touchless check-in and check-out procedures.
- ❑ If masks are required, be sure the hotel can provide the masks. Display appropriate signage prominently, outlining proper mask usage and current physical distancing practices in use throughout the facility.
- ❑ Remove unnecessary items from guest rooms, and consider alternatives to high-touch items such as television remote controls.
- ❑ Provide a spray bottle of sanitizer or wipes in each room for guest use, stored out of reach of small children.
- ❑ Wash all bed linens and laundry at a high temperature and in accordance with CDC guidelines. Contain/bag dirty linens in the guest room to eliminate excess contact while being transported to the laundry facility. Do not shake dirty laundry.
- ❑ In the case of a presumptive COVID-19 positive, the guest's room should be removed from service and quarantined. The guest room should not be returned to service until case has been confirmed or cleared. In the event of a positive case, the room should only be returned to service after undergoing an enhanced sanitization protocol (per county regulations, if applicable), which is encouraged to be performed by a licensed third-party service.





## Hospitality resources

1. [Reopening Checklist for Corporate Executives: Hospitality](#)
2. [Critical COVID-19 Guidance Standards for Hospitality Reopening \(Florida\)](#)
3. [California Hotel & Lodging Association:](#)
  - a. [After the COVID-19 Pandemic: Planning Now for The Return to Occupancy](#)
  - b. [Hotel Recovery Checklist \(PDF\) - Petra Risk Solutions](#)
  - c. [Post-Pandemic Back-To-Business FAQs For Employers - Fisher Phillips](#)
  - d. [Reopening Guidance for Restaurants](#)
  - e. [Hilton CleanStay with Lysol Protection Program](#)
4. [COVID-19 Resource: Global Hotel Cleaning Standards Being Introduced](#)
5. [Clean and Safe' Certification: The Future for Hotels After COVID-19](#)

This playbook is provided for informational purposes and should not be considered comprehensive or definitive instructions for safely returning your employees to work. We encourage you to stay up to date with the guidance from the Centers for Disease Control (CDC), your local department of health, and any relevant national and local regulations.

Kaiser Permanente does not necessarily endorse the services mentioned. Any organizations listed are for easy identification only.