***Just-in-Time from NEHA* Transcript**
Title: Workplace Employee Health Best Practices

Narrator: Businesses of all types must do their part to prevent and slow
the potential spread of COVID-19, and employers should institute
workplace controls to reduce transmission among employees. CDC
suggests employers take several steps to ensure a safe environment in
keeping with the variance among workplaces and business locations.

To begin with, employers should have a plan to manage impact and be
aware of COVID-19 basics. This effort includes implementing a COVID-
19 *Employee Health Plan* along with additional hygiene, sanitation, and
social distancing protocols outlined by CDC. In addition, employers
should stay informed regarding developments about the virus as well
as local, state, and federal response to the pandemic.

Let's start with basic information about the virus and its symptoms.

COVID-19 is thought to spread mainly from person-to-person, between
people who are considered to be in close contact, less than 6 feet
apart, through respiratory droplets produced
when a person talks, coughs, or sneezes.

Recent studies suggest the virus can be spread by people who do
not show symptoms. It may be possible that a surface or object that
has the virus on it can transmit COVID-19. This may happen when a
person touches a surface contaminated with the virus and
then touches their mouth, nose, or possibly eyes. However, this is not
thought to be the primary way the virus spreads, and there is still more
to be learned about certain modes of transmission.

People with COVID-19 have varied symptoms that may range from
mild to severe. Symptoms may appear 2-14 days after exposure to the
virus.

Though this is not a list of all possible symptoms, COVID-19 symptoms may include cough, shortness of breath or difficulty breathing, fever, chills, muscle pain, sore throat, and loss of taste or smell.

Less common symptoms include gastrointestinal symptoms such as nausea, vomiting, or diarrhea.

If a person shows any of the following emergency warning signs, they should seek medical care immediately. These include: trouble breathing, persistent pain or pressure in the chest, new confusion, inability to wake or stay awake, or bluish lips or face.

A medical provider can address other symptoms that may be severe or concerning. Call 911 and call ahead to the emergency facility. Be sure to notify the representative that you are seeking care for someone who has or may have COVID-19.

To manage the transmission of COVID-19 among employees, a *COVID-19 Employee Health Plan* can be created. When developing a plan, employers should take into account the level of disease transmission in the community and design a plan that is responsive to location and community conditions.

A COVID-19 Employee Health Plan should include: a "Health Screening Checklist," to include a touchless body temperature measurement, an attendance log, and an "Exclusion & Return-to-Work Policy."

A health screening checklist will standardize the checks to be made on employees as they arrive. A checklist can include documentation for each employee's:
1. Touchless body temperature measurement, taking action if fever of 100.4°F or greater is present
2. A list of primary and emergency COVID-19 symptoms
3. Documentation of close contact (within 6 feet) with someone that has symptoms or has tested positive for the coronavirus
4. Designated emergency contact information including name, relationship, address, and phone number

A COVID-19 attendance log will help employers spot trends and track responses to symptomatic individuals or exposures. It can include:
- Employee name
- Date
- Documentation of close contact with a person that has COVID-19 (such as a household member)
- Body temperature measurement
- Recorded symptoms present
- Date of exclusion
- Conditions met to return to work if excluded
- Date returned to work

An exclusion and return-to-work policy should be written to address when employees must be excluded and when symptomatic, asymptomatic, positive-tested, or exposed individuals may return to the workplace. We will cover where to find additional important information about return-to-work statements in a moment. First, let's look at exclusion statements and follow up.

An exclusion policy should include a statement advising employees to self-report symptoms or possible exposure before coming to the workplace. Employees should also:
- Stay home if they are sick, except to get medical care and follow CDC recommendations
- Inform their supervisor if they have a sick family member at home with COVID-19.

An exclusion policy should include a statement regarding what to do when an employee exhibits active symptoms upon arrival or while at work.
Employers should have:
1. A procedure *to* separate anyone exhibiting symptoms from other employees, customers, and visitors
2. A procedure in place for safe transport in the event an employee becomes sick at work and requires transport home or to a medical provider.
3. Contact information for each employee's emergency contact in the event an employee presents with symptoms.

Employees who exhibit symptoms must be advised to:
- Stay at home except to get medical care
- Separate from other people
- Monitor their symptoms
- Call ahead before visiting a doctor, and inform the location that they may have COVID-19
- Wear a cloth covering over their nose and mouth
- Cover coughs and sneezes
- Wash their hands often
- Avoid sharing personal household items
- Clean all "high-touch" surfaces daily
- Follow CDC guidance including recommendations for when to return to work

A return-to-work policy should reflect CDC guidance as well as state and local health department guidance. It is important to keep in mind that the ability to characterize the spectrum of symptoms, transmission, and the duration of viral shedding is limited. Any guidance by CDC is based on available information and subject to change as new information becomes available.

When developing a return-to-work policy, it's also important to remember that there are different COVID-19 circumstances for people, just as there are differences in community response. For instance:
- People with COVID-19 may or may not have had a lab test and diagnosis.
- Some people may have tested positive but remain asymptomatic.
- Some people remain in home-isolation and some people must be hospitalized.
- Some people have conditions that may extend the duration of time in which they shed the virus, lasting beyond their recovery from symptoms.

In keeping with this variance, CDC provides different criteria and calculations for when an individual can discontinue home-isolation. The guidelines are organized by:

1. People who have COVID-19 symptoms. This includes a:
   - Symptom-based strategy
   - Test-based strategy
2. People who do not have COVID-19 symptoms, but who have tested positive. This includes both a:
   - Time-based strategy
   - Test-based strategy

For people with confirmed or suspected COVID-19, any decision to discontinue home isolation should ideally be made in consultation with a healthcare provider and must be in keeping with state and local health department policies. Employers may consult CDC guidance for a more thorough treatment of scenarios and recommended isolation terms including the resource titled, *Discontinuation of Isolation for Persons with COVID -19 Not in Healthcare Settings,* for specific details.

Also, refer to CDC's *Interim Guidance for Businesses and Employers Responding to Coronavirus Disease 2019 (COVID-19)* which provides a great deal of information and is supplemented by a *frequently asked questions* page that builds on primary guidance for businesses and employers.

Several question may arise, such as:

Q: Should an employer include a physician's note to verify or validate an employee's status and inform a return-to-work action?

A: Under the Americans with Disabilities Act, employers are permitted to require a doctor's note from employees to verify that they are healthy and able to return to work. *However, as a practical matter amid the pandemic, be aware that healthcare providers and medical facilities may be extremely busy and not able to provide such documentation in a timely manner. Remember, many people with COVID-19 can recover at home and follow CDC recommendations to determine when to discontinue home isolation and return to work.* CDC states that "employers should not require a COVID-19 test result or a healthcare provider's note for employees who are sick to validate their illness, qualify for sick leave, or to return to work."

Also arising is a question of incompatible guidelines, namely:
Q: Do CDC or other health authority policies prevent an employer from complying with ADA while COVID-19 guidance is in effect?

A. Remember EEOC laws, including the ADA and Rehabilitation Act, continue to apply during the time of the COVID-19 pandemic, but they do not interfere with or prevent employers from following the guidelines set by CDC or other health authorities.

This means, for instance, there is no conflict with the ADA for employers when measuring the temperature of an employee in order to monitor employee health. In another example, authoritative COVID-19 guidance does not relieve ADA-covered employers of the obligation to provide reasonable accommodations for employees with pre-existing physical and mental disabilities. There cannot be one approach that fits all businesses and situations, and employers can expect guidance to change over time. However, an exclusion and return-to-work strategy must be written with an understanding of current federal, state, and local guidance. There is a great deal of information available online to help frame a strategy and the additional links provided with this video offer a starting point.

Once a COVID-19 Employee Health Plan is developed, employers can begin conducting health screenings as employees report to work. Screenings should be conducted with these important considerations in mind:
- If implementing in-person health checks, conduct them safely and respectfully. Employers should use social distancing, barrier controls, or personal protective equipment to protect the screener.
- Consider providing multiple screening entries into the building.
- To prevent stigma and discrimination; make screenings are as private as possible.
- Guidance from EEOC regarding confidentiality of medical records, medical history, or status
- Do not make determinations of risk based on race or country of origin.

In addition to a *COVID-19 Employee Health Plan*, employers should take additional steps as part of a comprehensive strategy. All businesses should:

- Implement measures that are specific to each workplace
- Identify all areas and job tasks with potential exposures to COVID-19
- Develop control measures to eliminate or reduce those identified exposures
- Enforce hygienic practices throughout a facility

Employers should:

- Emphasize proper, effective hand washing. This should be done using soap and water for at least 20 seconds, especially after using toilet rooms, before eating, before preparing food, and after blowing your nose, coughing, or sneezing.
- In food service, use gloves to avoid direct bare hand contact with ready-to-eat foods.
- In any setting, avoid touching eyes, nose, and mouth. Cover your cough or sneeze with a tissue, then throw the tissue in the trash and wash hands afterwards.
- Stay at least 6 feet from other people whenever possible. Employees should be able to maintain physical distancing as work duties permit. And large gatherings should be avoided.
- Encourage employees to wear a cloth face mask, following local orders at all times. Remind employees and customers that CDC recommends wearing cloth face coverings in public settings where other social distancing measures are difficult to maintain, especially in areas of significant community-based transmission. Wearing a cloth face covering, however, does not replace the need to practice social distancing.
- Disinfect and clean workspaces and equipment before and after use
- Plan more frequent cleaning of high- touch surfaces
- Avoid using other employees' phones, desks, offices, or other work tools and equipment, when possible.

Employers should examine operational processes and policies for adjustments that can be made to support a COVID-19-free

workplace. While there are many other opportunities, businesses can maintain healthy operations by implementing the following:

- Ensure flexible, consistent, supportive, and non-punitive sick leave policies.
- Offer incentives or alternatives to employees who commute to work using public transportation.
- Do not require a COVID-19 test result or a healthcare provider's note for employees who are sick to validate their illness, qualify for sick leave, or to return to work.
- Be aware that some employees may be at higher risk for serious illness, such as older adults and those with chronic medical conditions. Implement specific policies to minimize face-to-face contact between these employees or assign work tasks that allow them to maintain a distance of six feet from other workers, customers and visitors, or to telework if possible.

Employers should be actively implementing all applicable federal, state, and local public health and employee policies related to COVID-19. To ensure that an employer's response plan begins and remains appropriate, businesses must seek out the most timely and accurate information. Remember that guidance from public health authorities is likely to change as the COVID-19 pandemic evolves, therefore ongoing information monitoring is essential. Additionally, employees should have access to the guidance and recommendations that inform the workplace COVID-19 response plan.

For more information about minimizing the spread of COVID-19 in the workplace, check out the following links from NEHA.org, foodsafetyworksLLC.com, CDC, EEOC, and FDA, along with the printable resources that accompany this video.

This *Just-in-Time from NEHA* regarding COVID19 Workplace & Employee Health Suggested Practices has been brought to you by the National Environmental Health Association. Please visit our website at NEHA.org for more information about our members and our service to the environmental health community.