



Returning To Work In The COVID-19 Environment | What It Means For Your Business & Employees

May 8, 2020

As some states begin to lift “shelter in place” orders or re-evaluate which industries are considered “essential,” it is critical to have a plan in place to restart operations and bring facilities back online. USI has prepared the following guidelines for workplaces that have been impacted by COVID-19.

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Category	Potential Requirements
Worker Health and Wellness Precautions	<p>At this moment, there has been little formal guidance from Centers for Disease Control and Prevention (CDC), Occupational, Safety & Health Administration (OSHA), or other government agencies on reopening “non-essential” businesses and how to return workers back to work. OSHA’s guidance and recommendations for “essential” businesses, (i.e. healthcare and construction) is a good resource for developing your plan to restart an idled facility or operation. Businesses should begin by updating their infectious disease preparedness, response plan, and corresponding infection prevention measures to include identifying risk levels in workplace settings and determine any appropriate control measures to implement, such as social distancing, symptom checking, hygiene, decontamination procedures and training.</p> <p>In addition to physical health and wellness precautions, businesses should remind employees of any and all benefit and wellness programs that may be accessed by employees to help them adjust mentally and emotionally to the reopening of the business.</p>

<p>Reopening: Administration Guidelines</p>	<ul style="list-style-type: none"> ▪ Identify Executive/Administrative Team to develop reopening plan. ▪ Continue to review guidance and recommendations from Federal, State, local, tribal, and/or territorial health agencies, and determine if those recommendations and guidance should or can be incorporated into workplace-specific plans. ▪ Identify where, how and what workers and guests can be exposed to COVID-19 and from what sources. ▪ Evaluate business processes/tasks and identify additional health controls to protect employees from COVID-19 while they perform their activities. ▪ Identify personnel to enforce and monitor the controls. ▪ Develop a schedule to stagger start dates for returning employees, starting with critical employees first, then other positions returning the following days/weeks. Consider operating on multiple shifts if possible, or staggering start times. ▪ Make sure that all employees are aware of any attendance and scheduling changes that impact them. ▪ Maintain an accurate tracking system of any overtime work being performed by any non-exempt (not salaried) employees. Regulations regarding overtime and minimum wage issues are established by the Fair Labor Standards Act (FLSA). ▪ Install controls (physical barriers, testing stations, etc.) and evaluate supplies such as thermometers, face covers, antibacterial wipes, soap and hand sanitizer. ▪ Coordinate with vendors, contractors, and suppliers on delivery and service procedures. ▪ If using any temporary staffing agencies or Professional Employer Organizations (PEOs), ensure a clear understanding of each employer’s role in protecting employees from COVID-19. It is recommended host employers set out the responsibilities for COVID-19 compliance in their contracts before temporary staff enter an employer’s facilities. ▪ Conduct tests/drills with controls in place to identify any deficiencies before employees return. ▪ Initiate training of employees of the new COVID-19 procedures immediately when the employees return to work.
<p>Recommended Measures for Reopening Facilities</p>	<p>Personnel who were initially involved in idling the facility should be available to assist with the reopening. If formal notice of building closure was provided to the police and fire department, notify them of your intention to reoccupy the premises. Now is also a perfect time to update your organization’s emergency contact information and confirm that local authorities have access to that information. Ensure the facility’s rapid access system “Knox Box” is accessible and has up-to-date access tools and information.</p> <p>Inspect the building envelope. This would include a visual inspection of perimeter walls, doors and windows to look for signs of forced entry or weather damage. Inspect for signs where animal and rodents may have entered the building. Review current integrated pest management strategies and implement or revise strategies as required. Inspect the roof for signs of damage, ponding water or leakage. Make sure roof drains are free from debris and flowing freely. Inspect the underside of the roof for any signs of leakage. Confirm that there are no combustible materials (idle pallets, lumber, trash, vegetation, etc.)</p>

being stored immediately adjacent to the exterior perimeter walls. Confirm that access limiting property features such as walls, fencing, and gates are intact and secured.

Inspect the building interior. All lighting systems should be operational including emergency lighting and exit signage. Make sure that required exits are operational and paths of egress remain clear.

Perform an inspection of the fire sprinkler system. It would be a good idea to arrange for a 2- inch drain and inspector’s test to be performed to verify water supply integrity and alarm function. Drain tests should be performed annually while alarm tests should be conducted quarterly. The central station alarm monitoring firm should be notified prior to testing. Closely observe the sprinkler system water supply valves to confirm that they are in the fully open position. Ascertain that the valves are properly sealed and/or equipped with chains and locks. Inspect the fire department connections to confirm that the protective caps are securely in place.

If the sprinkler system is supplied by a fire pump, perform a churn test with no flow to verify operation. If the pump has not been flow tested within the last 12-months, arrange for a full flow test.

Mechanical Systems. Perform an inspection of mechanical systems including idled HVAC systems, boilers, chillers, and compressors. If the boilers have not had a State-required jurisdictional inspection within the last 12-months, arrange an inspection with a licensed inspection authority. Perform a test of combustion safety controls for gas-fired heating or production equipment.

Air filters. Air filters should be changed on a frequent basis using appropriate Personal Protective Equipment (PPE) including respirators and gloves. Systems should be off when changing filters. Adjust air handlers to bring in as much outside air as possible. Ventilation systems should be brought up to operating speed well before normal occupancy times, and for a period thereafter. Ventilation systems should not be completely shut off on weekends.

Electrical. If not performed within the last 5 years, perform a thermographic scan of critical electrical distribution systems to detect overheating due to loose connections or dirt accumulation.

Critical Production Equipment. Perform an inspection of critical production equipment and operating components including safety devices. Check equipment for lubrication and adjustment. Established lock out, tag out procedures should be followed.

Raw Materials. Conduct a raw materials inventory and check for shelf life. Verify that suppliers are still able to provide raw materials for production.

Drinking Water Supply. Flush drinking water sources prior to reopening and consider treating building piping systems with a hypo-chlorination treatment to help minimize the risk of legionella or bacterial biofilms having built up in stagnant plumbing systems.

- [EPA Drinking Water Requirements](#)
- [CDC Building Water System](#)

<p>Recommended Measures for Protecting Employees and Guests</p>	<ol style="list-style-type: none"> 1. Require anyone who is sick or not feeling well to stay home, except to get medical care. 2. Have employees inform their supervisors if they have a sick family member at home with symptoms of COVID-19 or if they or their family members have tested positive for COVID-19.
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3. If an employee becomes sick during the day, they should be sent home immediately. Surfaces in their workspace should be cleaned and disinfected according to CDC recommendations – [CDC Implementing Safety Practices](#).
4. If an employee becomes sick during work or reports they are COVID-19 confirmed positive, organizations should compile a list of contacts the ill employee had during the time the employee had symptoms and 2 days prior to symptoms. The employee should be sent home immediately for a 14-day shelter in place quarantine. Others at the facility with close contact within 6 feet of the employee during this time would be considered exposed.
5. Create a central entry point to the facility and maintain a daily attendance log of all workers and guests. Be sure to have a documented screening process in place. If you have a gathering of people at the central entryway, place markings on the floor 6 feet apart to assure a safe distance and allow for proper screening.
6. Practice social distancing by maintaining a minimum 6-foot distance from others.
7. Preclude gatherings of any size and ensure minimum 6-foot separation any time two or more people must meet.
8. Strengthen logistics management including food delivery and express deliveries.
9. Follow proper classification of workers' exposures to COVID-19 by providing PPE such as gloves, goggles, face shields and face masks as appropriate for the activity being performed and as required to meet the assigned risk exposure level as recommended by OSHA guidance.
10. Designate a site-specific supervisor to enforce COVID-19 guidance.
11. Identify "choke points" and "high-risk areas" where workers are forced to stand together, such as hallways, elevators, break areas, and on shuttles/terminals, and control them so social distancing is maintained.
12. Minimize interactions when picking up or delivering equipment or materials; ensure minimum 6-foot separation.
13. Stagger starting times to reduce density and ensure that a minimum 6-foot separation/social distancing is always adhered to.
14. Discourage workers from using/sharing others' work tools and equipment. Require that all general facilities, tools and equipment are cleaned and disinfected before and after each shift.
15. Take precautions when using cleaning chemicals. Do NOT mix cleaning products that contain bleach and ammonia. Dangerous gases can be released and can cause severe lung damage. Provide sufficient ventilation (airflow); protective clothing, gloves and safety goggles, when needed; properly label containers of cleaning chemicals; train on the hazards of the cleaning chemicals you are using; and always follow safe work practices.
16. Post, in areas visible to all workers, required hygienic practices including: not touching their faces with unwashed hands or with gloves; washing hands often with soap and water for at least 20 seconds; using hand sanitizer with at least 60% alcohol, cleaning AND disinfecting frequently-touched objects and surfaces such as workstations, keyboards, telephones, handrails, machines, shared tools, elevator control buttons, doorknobs and portable commodes; covering the mouth and nose when coughing or sneezing; and other hygienic recommendations by the CDC.

17. Place wash stations or hand sanitizers in multiple locations to encourage hand hygiene.
18. Avoid shaking hands or making other unnecessary direct contact with staff.
19. Avoid carpooling with any staff members unless they are family members living within your household. If the case arises that others are transported in a personal or company vehicle the company or employee should follow the [CDC guidelines on cleaning and disinfection](#).
20. Whenever possible, employees should be discouraged from taking mass transit and encouraged to commute by walking, bicycling, or by other means that allow for social distancing.
21. Deposit disposable paper towels and similar waste in non-touch waste bins.
22. Instruct employees not to cough or sneeze into their hand; rather, they should direct coughs and sneezes into a cloth or tissue or, if not available, the crook of their arm at their elbow; follow established CDC guidelines.
23. Suggest that in some instances, employees should consider changing work clothes and shoes prior to leaving the workplace or arriving at home. Instruct them not to shake out clothing and not to launder their work clothes with other laundry.
24. Hold daily pre-shift meetings and employee orientations at staggered schedules.
25. Suggest telephonic or outdoor meetings when a group must convene.
26. Consider sharing known or suspected cases of COVID-19 with vendors and contractors and encourage them to do the same.
27. Remind employees of human resource department contacts and that human resource-related content and materials remain readily accessible and available.
28. If not yet established, initiate a way for employees to communicate with Human Resources anonymously so employees can voice concerns regarding work exposures and additional controls.
29. Create a policy for limiting the types of guests permitted onsite to essential vendors and contractors. Eliminate all nonessential guest visits, if possible.
30. All guests onsite should be escorted onto the premises and limited to workplace areas where work is being performed.
31. Restrict access to the premises by the general public.
32. Strictly monitor all entrances and exits limiting access points and direct all guests to a central point of entry.
33. Train reception personnel on safe practices in dealing with guests.
34. Glass screens should be placed between reception personnel and guests.
35. Utilization of a touchless registration or smartphone app to notify when a guest is arriving and to check-in at the front desk.
36. Supply all guests with proper PPE while onsite.

***For Guests
Specifically***

<p>COVID-19 Testing Options</p>	<p>Currently, there are three types of tests available to facilitate COVID-19 testing.</p> <ul style="list-style-type: none"> ▪ COVID-19 testing (PCR or nasopharyngeal testing). A positive COVID-19 test is the only way to determine if someone has an active infection during the initial illness. As of May 7, 2020, this is a hospital and lab-based test with 3 to 4-day turnaround time (some locations report 7 to 10-day turnaround time). ▪ Temperature-testing. Temperature testing using an infrared thermometer test assess if associates are potentially sick. <ul style="list-style-type: none"> – USI has compiled a list of temperature testing vendors entitled <i>USI Return to Work COVID-19 Testing Options</i>. Please contact your USI representative for a copy. ▪ Antibody testing (Blood sample). A positive test may mean that a person may have previously been exposed to the virus and may not become sick. The data is not conclusive as to whether an individual may become re-infected if they have already had COVID-19. <ul style="list-style-type: none"> – Over 200 antibody tests are on the market. Antibody testing has variable accuracy for predicting whether someone has been exposed to the virus. <ul style="list-style-type: none"> ◦ Originally tests only had to be submitted for <i>FDA Emergency Use Authorization (EUA)</i> in order to be imported into the US. ◦ Most have not been accepted under the EUA (only 12 have been accepted under the EUA as of 5/5/20). ◦ As of May 7, 2020, none of the antibody tests have been FDA approved.¹
<p>Office Work Considerations</p>	<ol style="list-style-type: none"> 1. Direct your employees to only use the equipment at their own desks. Employees should refrain from using anyone else’s desk, phone or computer equipment. 2. Eliminate or minimize the use of conference rooms. If a conference room is needed, minimize the number of employees in a room to allow for 6-foot distancing between seated areas. 3. Minimize workspace crowding and allow for proper distancing between cubicles. Whenever possible, use higher cubicle wall heights. 4. Conduct client meetings by teleconference and minimize in person meetings whenever possible. 5. Eliminate the use of personal office/cubicle fans to reduce the potential virus distribution throughout the office. 6. Temporarily eliminate the use of kitchen refrigerators. 7. Place tapelines on floors outside and behind cubicles to create 6-foot distancing. 8. Close any company gyms and other nonessential amenities that may result in overcrowding. 9. Ask employees to avoid taking the elevator or limit occupancy to 50% of maximum capacity. Place marking on the floor of the elevators for proper distancing.

¹ Insight into FDA’s Revised Policy on Antibody Tests: Prioritizing Access and Accuracy (May 4, 2020) (as visited May 5, 2020)



Worker Training	<p>Train all workers who have reasonably anticipated occupational exposure to COVID-19 about the sources of exposure, the hazards associated with exposure, and appropriate workplace protocols in place to prevent or reduce the likelihood of exposure to the virus. Training should include information about how to isolate individuals with suspected or confirmed COVID-19 or other infectious diseases, and how to report possible cases. Training must be offered during scheduled work times and at no cost to the employee. Consider using computer-based remote learning management systems to eliminate face-to-face gatherings.</p> <p>Workers required to use PPE must be trained. This training should include when to use PPE; what PPE is necessary; how to properly put on, use, and take off PPE; how to properly dispose of, disinfect, inspect for damage, and maintain PPE; and the limitations of PPE. Applicable standards include the PPE (29 CFR 1910.132), Eye and Face Protection (29 CFR 1910.133), Hand Protection (29 CFR 1910.138), Respiratory Protection (29 CFR 1910.134) standards, and temporary guidance during this pandemic.</p> <p>In addition, OSHA offers a variety of training videos on respiratory protection.</p> <p>When the potential exists for exposure to human blood, certain body fluids, or other potentially infectious materials, workers must receive training required by the Bloodborne Pathogens (BBP) standard (29 CFR 1910.1030), including information about how to recognize tasks that may involve exposure and the methods, such as engineering controls, work practices, and PPE, to reduce exposure. Further information on OSHA's BBP training regulations and policies is available for employers and workers on the OSHA Bloodborne Pathogens and Needlestick Prevention Safety and Health Topics page.</p> <p>OSHA's Training and Reference Materials Library contains training and reference materials developed by the OSHA Directorate of Training and Education as well as links to other related sites. The materials listed for Bloodborne Pathogens, PPE, Respiratory Protection, and SARS may provide additional material for employers to use in preparing training for their workers.</p> <p>As a practical matter, employee morale may be affected by whether they understand that you, as the employer, have taken all necessary measures to keep employees safe on the job. The CDC notes that employers should anticipate fear, anxiety, rumors, and misinformation, and should tailor their communications with those possible reactions in mind.</p> <p>Employers should over-communicate with employees to reiterate existing workplace rules, and outline any temporary rules, related to ensuring workplace health and safety. Employers should strongly consider preparing a written communication to employees that outline these policies and expectations to keep employees healthy and safe in connection with the COVID-19 outbreak.</p> <p>As previously stated, employers are encouraged to review CDC and OSHA strategies for minimizing the potential risk of exposure to all employees. This information is updated regularly and changes frequently.</p>
Workers' Compensation and OSHA Reporting Guidelines	<p>With no vaccine for this easily transmitted virus currently available, and businesses beginning to re-open and/or increase production up to "normal" levels in accordance with easing restrictions, businesses could see an increase in workers' compensation claims related to COVID-19. In the event an employee notifies you that they have contracted or have been exposed to the virus, and they believe it to be work related, the employer should immediately complete a thorough investigation, documenting the facts and circumstances of the employees claim and report the claim to your workers' compensation carrier for a compensability review and decision.</p> <p>Every state/jurisdiction has its own workers' compensation laws and criteria for defining compensability, with each state defining and addressing occupational disease and illness differently.</p>

Employees typically have the burden of proving that their injury or illness is work related - that it arose out of (what the employee was doing at the time of the injury/illness) and in the course of employment (when the injury/illness happened). The burden of proving that the Coronavirus was contracted at work, versus a public venue or activity, will be difficult to overcome. However, over the past few weeks we have seen many states introduce and/or institute new legislation related to workers' compensation, in order to cover COVID-19 losses for essential employees. How this new legislation and any future legislation will respond to employees as they re-enter the workplace, will remain to be seen. Every claim is unique and will be evaluated on its own set of facts, as well as on the state's workers' compensation laws to determine compensability.

OSHA

OSHA also recently issued interim guidance regarding Coronavirus recordkeeping requirements and while there has been some loosening of regulations, employers must still provide a safe work environment for their employees. Pursuant to the OSHA recordkeeping requirements and as codified at 29 CFR Part 1904, employers with 10 or more employees must record certain work-related injuries and illnesses on their OSHA 300 Log. Any work-related exposure resulting in a COVID-19 diagnosis is required to be recorded on your OSHA 300 Log and your local Health Department should be notified. The OSHA 300 Log COVID-19 recording requirement is only triggered if the following conditions are present:

1. The situation involves a confirmed case of COVID-19;
2. There is objective evidence that the case is work-related, as defined by 29 CFR 1904.5; and
3. The case involves one or more of the general recording criteria laid out in 29 CFR 1904.7 (e.g., days away from work or medical treatment beyond first aid).

An employee who reports symptoms common with the COVID-19 virus is not enough to warrant logging a case into your OSHA Log recording. The requirement also is not necessarily prompted when an employee exhibits symptom(s) consistent with COVID-19 at work but has not actually tested positive for the virus.

When an employee has tested positive for COVID-19, the employer must evaluate whether the illness is "work-related" per any of the three OSHA 300 Log recording conditions. If available information is insufficient to determine the proximate cause of the employee COVID-19 infection, OSHA recommends that the case be recorded on the OSHA 300 Log and later removed if it does not meet the recording conditions. Cases such as these may require Legal Counsel review.

A key best practice, OSHA suggests, is training employees about their right to report issues to OSHA without fear of retaliation. OSHA is required to investigate all complaints, no matter who submits them or what their underlying motive may be. Employers should create an open communication with employees to voice their safety concerns, to allow for corrective action to be implemented and keep accurate records of employee training/programs.

OSHA also suggests an anti-retaliation program that includes five elements:

1. Committed managers who lead by example, encourage employees to report concerns and respect confidentiality.
2. A clearly communicated system for resolving employees' reported concerns.
3. A system for receiving and responding to reports of retaliation.
4. Promotion of anti-retaliation against employees and managers.

	<p>5. Program oversight, which may include regular monitoring or audits that identify the program’s strengths and weaknesses.</p> <p>The following sources provide additional information on OSHA reporting requirements, workers’ compensation claims, and OSHA best practices for preparing workplaces for COVID-19:</p> <ul style="list-style-type: none"> ▪ Coronavirus (COVID-19) Workers’ Compensation and OSHA Advisory ▪ OSHA Coronavirus Compliance Bulletin ▪ OSHA Best Practices
<p>Employee Benefits Eligibility Guidance</p>	<p>Businesses with employees returning to work after a leave of absence, reduction in hours (e.g., furlough) or termination of employment (e.g., layoff) have questions about the implications for medical benefit eligibility and the effect on the ACA’s employer shared responsibility rules. USI’s national Compliance practice has created a document to address many of these questions. Please review Benefit Eligibility Considerations in a COVID-19 Environment – Returning to Work.</p> <p>This resource covers topics including:</p> <ul style="list-style-type: none"> ▪ Eligibility Issues ▪ ACA Full-time Status Issues ▪ Premium Payment ▪ Hours of Services ▪ Cafeteria Plan Issues

For More Information

We anticipate Federal, state, and local health authorities to provide additional guidance and considerations regarding the resumption of operations. USI risk control consultants can assist businesses in evaluating and implementing the above noted guidelines to ensure a safe and seamless reopening.

Businesses leaders should reach out to their USI representative or visit www.usi.com for more information.



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