



Planning for the next normal at work

Keeping your workforce safe and healthy



Version 4.0

Updated 07/08/2020

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 benefits 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 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, your leadership teams, and your partner unions, to make your workplaces as safe as possible and support employees in the best way possible. It includes:

A framework outlining the various dimensions of health to consider as 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. To access the most recent version of this playbook, please [visit our website](#). For additional questions, please contact your Kaiser Permanente representative.

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 benefits 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 the 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](#)

Supporting an inclusive workforce

COVID-19 has had an undeniable impact on your entire workforce, especially vulnerable populations. With limited access to resources to combat social, health, or economic challenges, these populations are at greater risk of being impacted by the pandemic. The playbook offers guidance and solutions to ensure that all workers are protected and respected in the workplace.

Vulnerable populations

- Workers in essential industries, including first responders, fast food, grocery store, transit, cleaners, and health care workers.
- Workers living in densely populated areas and multigenerational homes
- Workers with underlying chronic conditions, and older workers at greater risk for contracting COVID-19
- Immigrant workers
- Workers with limited or no English language proficiency
- Workers with disabilities
- Workers struggling with social needs (paying for food, housing, and other bills)
- Workers facing job loss or reduced pay
- Workers living in low-income communities
- Workers of color who are at increased risk for discrimination, contracting COVID-19, and/or dying from it
- Workers who are dependent on public transportation
- Workers with limited access to the internet

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 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 Centers for Disease Control and Prevention (CDC) and Occupational Safety and Health Administration (OSHA).



Screening & returning to work

Learn about current COVID-19 testing protocols, Kaiser Permanente's 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 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 employees to return.

Key takeaways:

- Tailor your safety plan to your workplace, including a hazard assessment
- Mitigate risks of transmission using:
 1. Employee sanitation
 2. Environmental sanitation
 3. Containment strategies
- Monitor Centers for Disease Control and Prevention (CDC) and Occupational Safety and Health Administration (OSHA) guidance
- Communicate frequently and consistently

Data points

**91%****62%****1/3**

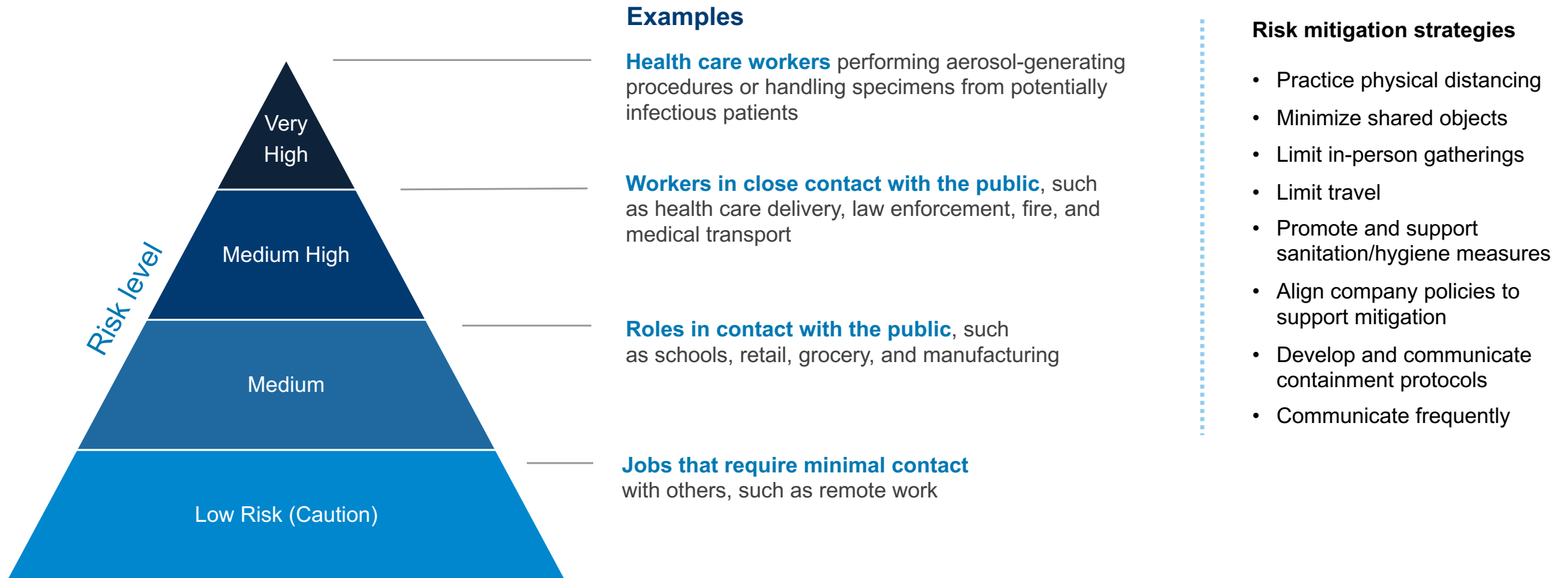
In an ongoing Mercer survey on COVID-19, the vast majority of nearly 500 U.S. employers that responded said they're taking action to protect their workforce, like enhancing cleaning and disinfecting (91%) and providing masks (62%).

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.](#)

Assessing safety when returning to work

As you plan employees' return to the workplace, consider the levels of employee health risk.



Source: [OSHA](https://www.osha-slc.gov/).

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

How to wear a face mask

Do's and don'ts to protect yourself and others

Cloth mask care: If you're using a cloth mask, wash it after each use in the washing machine or by hand using a bleach solution. Allow it to dry completely.

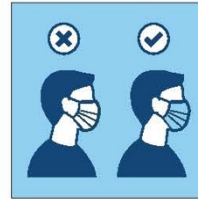
View this infographic in:

- [English](#)
- [Spanish](#)
- [Chinese](#)
- [Vietnamese](#)

Do



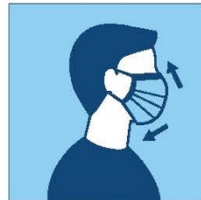
Wash your hands with soap and water or use alcohol-based hand sanitizer before you put on, touch, or take off your mask.



Put the color side of the mask on the outside.



Use the ties or loops to put your mask on and take it off.



Cover your mouth, nose bridge, and chin.



Be sure the mask fits snug against your face.



Keep your hands away from your face and head while wearing the mask.



Take off the mask while you are at least 6 feet away from other people.

Don't



Touch your mask or face without first using soap and water for 20 seconds, or alcohol-based hand sanitizer until hands are dry.



Pull the front of the mask up or down to talk, breathe, or eat—assume the front is contaminated.



Touch the front of the mask.



Touch the front of the mask when you take it off.

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 (using EPA-approved products) of all frequently touched surfaces (e.g., doorknobs, workstations, keyboards, handrails, and other work equipment). Consult the [CDC guide](#) on disinfecting frequently touched surfaces.



Isolate exposure to the virus

Limit exposure to the virus by instituting daily screenings, communicating with 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.*
- **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** — Ensure you have a plan to identify and respond when someone is sick. The Occupational Safety and Health Administration (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](https://www.osha-slc.gov).

*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, covering coughs and sneezes with a tissue or elbow, personal protective equipment, etc.), environmental sanitation, and staying home upon first signs of sickness. Communicate through the languages and modalities (e.g., announcements, emails, posters, texting) used by your workforce, and leverage bilingual government resources (OSHA, CDC, etc.) as appropriate.

Strategies for communicating could include a campaign focused on:

- Hand hygiene to stop the spread of COVID-19 and other illnesses
- The importance of getting a flu shot, especially during the COVID-19 pandemic
- 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
- How to welcome someone who has been diagnosed with COVID-19 back into the workplace



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 Travelers' Health Notices](#) for guidance by country, and be aware of travel advisories that may impact the trip.

A BETTER WAY TO TAKE CARE OF BUSINESS



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](#)



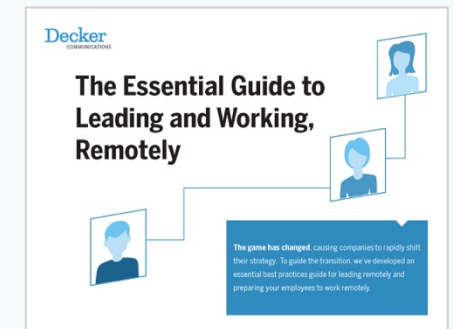
Flyer:
[COVID-19 work-from-home wellness for employees](#)



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



Brochure:
[The Essential Guide to Leading and Working, Remotely](#)



Case study: Kaiser Permanente's workforce reentry strategy and approach

Company information:

Goal: Prioritize workforce reentry and support employees physically and mentally in diverse work settings

Health care employees: Over 220,000

Locations: Multiple

Job functions: Diverse

Phases

1 Develop broad guidance as a larger framework for decision-making

Focus areas:

- ☐ Maintaining a healthy, supportive work environment
- ☐ Managing exposure and positive cases
- ☐ Building support policies and procedures
- ☐ Identifying organizational culture implications and opportunities

2 Create workforce readiness guidelines for safely returning employees to various work settings

Focus areas:

- ☐ Individual/team work-location assessments
- ☐ Well-being, inclusiveness, and belonging
- ☐ Communications

3 Build a guide to help managers understand and address their employees' unique needs and circumstances

Focus areas for employees at home:

- ☐ Setting expectations early and clearly
- ☐ Increasing communication
- ☐ Fostering shared leadership
- ☐ Creating a virtual community
- ☐ Celebrating successes

Focus areas for employees at work:

- ☐ Wearing appropriate personal protective equipment, like cloth face coverings
- ☐ Practicing physical distancing whenever possible
- ☐ Following directional signage in high-congestion areas, including maximum occupancy
- ☐ Avoiding congregations in areas like mailrooms, loading docks, restrooms, break rooms, hallways, lobbies, etc.

Case study: Kaiser Permanente's workforce reentry strategy and approach *(continued)*

Additional workforce reentry priorities



Reinforcing communication points and modifying communication tactics among all levels and types of workers, including:

- Represented/nonrepresented employees
- Varying work-from-home situations (parents, caregivers, etc.)
- Our union population



Modifying or adding benefits to support employees required to work in at-risk environments. This includes making benefits available to both clinical and nonclinical employees actively working at our facilities or in other patient care environments



Assessing the supply chain to meet the global and national demands of health care systems on traditional PPE by:

- Working diligently with our suppliers and distributors to ensure critical supplies are available now and over the long term
- Securing additional supplies through traditional as well as innovative means, such as working with our staff and local companies to begin manufacturing our own PPE

Case study: Kaiser Permanente's workforce reentry strategy and approach *(continued)*

Workforce reentry begins with business leaders objectively assessing workforce activities to determine a phased return of selected roles and individuals by location.

Workforce reentry decision gates

1. Return-to-workplace role prioritization

Monitor CDC, regulatory, and legal guidance (federal, state, local restrictions)

2. Leaders review location constraints

Reference local and national site guidelines for building status and occupancy thresholds

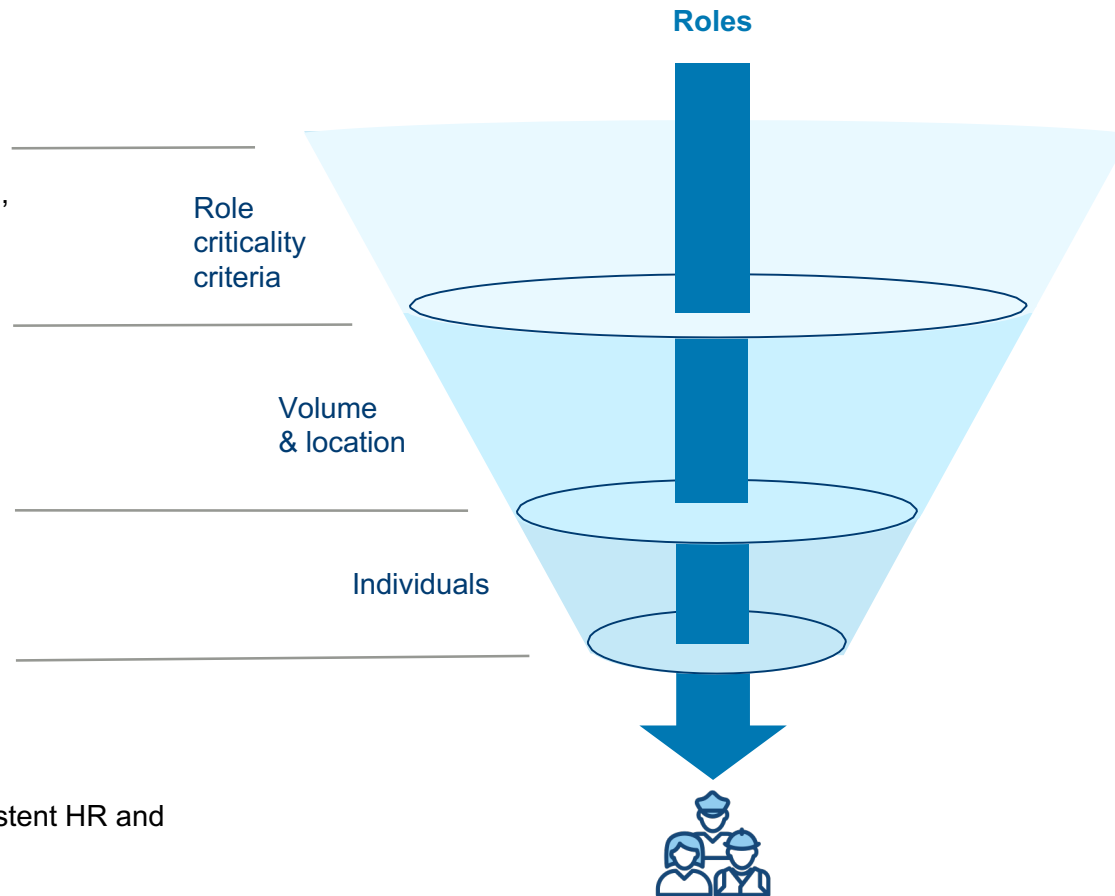
3. Roles selected to return to a location

Use a prepopulated employee roster

4. Individuals selected to return to a location

Notify individual workers before requiring them to return to a Kaiser Permanente location

*Individual requests for accommodation are handled on a consistent HR and legal framework (e.g., child care, elder care, high-risk, etc.).



Workplace safety checklist

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

- ☐ Add a section to your safety plan to include an infectious disease preparedness and response plan, including a hazard assessment.
- ☐ Identify areas where employees could be at higher risk of spreading infection, like elevators and break rooms, and limit the number of people allowed in the space at one time.
- ☐ Consider replacing communal items such as coffeepots and watercoolers with single-serve items.
- ☐ 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 between each person). Consider markings on the ground to show employees the distance needed between one another, and use physical barriers as appropriate.
- ☐ Train HR/safety officers on protocols for sickness identification and contact tracing in case someone is infected and you need to alert other employees to possible exposure.
- ☐ Prohibit large gatherings.
- ☐ Institute daily screenings.
- ☐ 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).
- ☐ 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. In a unionized workforce, align health and safety messages with your partner unions for best results.
- ☐ Refer to agencies and community organizations that offer emergency financial assistance.

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](#)
- [New England Journal of Medicine Risk Stratification Framework For Workers](#)
- [Know which mask to use for which task](#)
- [OSHA employer information for returning to the workplace](#)

Video information series:

- COVID-19 Kaiser Permanente Thrive YouTube Channel
 - [English](#), [Spanish](#), [Chinese](#)
- CDC videos
 - [CDC Guidance for Older Adults at Higher Risk](#)
 - [ASL COVID-19 CDC video Series](#)

Fact Sheets & Posters

- CDC
 - [CDC COVID-19 Fact Sheets \(multiple languages\)](#)
 - [Businesses and Workplaces \(multiple languages\)](#)
- OSHA
 - [Coronavirus Resources](#)
- Workplace signage: Customizable posters and flyers available through Kaiser Permanente
 - Ask your Kaiser Permanente representative for more information

Chapter 2

COVID-19 screening and returning to work safely

The unprecedented and evolving COVID-19 response requires vigilance in your screenings, leave policies, and return-to-work guidelines to ensure safety, trust, 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.
- When applicable, collaborate with your partner unions to maximize alignment.
- Plan and prepare managers to address changes in productivity.
- In a unionized workforce, engage with your unions to maximize alignment and collaboration.

Data point



60%

According to the Mercer survey, 60% of employers have not updated their return-to-work policies for COVID-19.¹

1. Mercer pulse survey, April 2020.

Return-to-work strategies for people with COVID-19 exposure or symptoms



When individuals **with** symptoms can return to work

Symptom-based strategy

- >3 days from recovery
- >10 days from symptom onset

Test-based strategy¹

- No fever²
- Improvement of respiratory symptoms
- 2 negative tests \geq 24 hours apart³



When individuals **without** symptoms can return to work

Time-based strategy

For patients who tested positive without symptoms:

- >10 days since first positive test

Quarantine for exposure

For patients with known exposure to COVID-19 and no positive test or symptoms:

- >14 days since last exposure

1. A test-based strategy is contingent on the availability of ample testing supplies and laboratory capacity as well as convenient access to testing 2. Resolution of fever should occur without the use of fever-reducing medications 3. Negative results of an FDA Emergency Use Authorized COVID-19 molecular assay for detection of SARS-CoV-2 RNA from at least 2 consecutive respiratory specimens collected \geq 24 hours apart (total of 2 negative specimens).

Sources: CDC [Symptom-Based Strategy to Discontinue Isolation for Persons With COVID-19](#) (May 3, 2020), [Discontinuation of Isolation for Persons With COVID-19 Not in Healthcare Settings](#) (May 29, 2020), [Criteria for Return to Work for Healthcare Personnel With Suspected or Confirmed COVID-19](#) (May 2, 2020).

COVID-19 diagnostic testing priorities

To help with testing priorities and keep workplaces safe, establish or update leave management and return-to-work guidelines that include employee self-reporting of symptoms, appropriate testing, and medical documentation.

CDC priorities for COVID-19 testing¹

High priority

- Hospitalized patients with symptoms
- Health care facility workers, workers in congregate living settings (apartments, condominiums, student or faculty housing, transitional housing, prisons and shelters, domestic violence and abuse shelters, etc.), and first responders with symptoms²
- Long-term care facility or other congregate living setting residents with symptoms

Priority

- Persons with COVID-19 symptoms
- Persons without symptoms who are prioritized by health departments or clinicians, for any reason

Kaiser Permanente testing and care information

Testing criteria continue to expand as our capacity increases. Current information on testing and care can be found at kp.org.

- [The latest information on Kaiser Permanente COVID-19 care and testing](#)
- [COVID-19: How to get the care you need based on your symptoms](#)

1. CDC [Evaluating and Testing Persons for Coronavirus Disease 2019 \(COVID-19\)](#) (May 5, 2020). 2. 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), Activity Prescription form, or letter 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
Patient exposed to COVID-19 from workplace	Workers' compensation physician completes state-mandated physician's first report of injury. ²

“ 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.”

— CDC, May 3, 2020¹

1. [Interim guidance for businesses and employers to plan and respond to coronavirus disease 2019 \(COVID-19\)](#), accessed 05/28/2020. 2. All workers' compensation communications are issued by the treating provider as mandated by each state's laws. Letters are sent to the employer and employee.

Employee screening guidance

Key takeaways



Employers must screen everyone with the same role equally, and any mandatory medical test of employees should be job-related and consistent with business necessity.



Employers may take employees' temperatures at the worksite. At-home self-assessments may also be an option, and can save time and reduce unnecessary exposure in line at workplace entrance screenings.¹



Employers may require COVID-19 tests.



Employers may ask employees if they're experiencing COVID-19 symptoms.²



All information must be kept separate and secure.³

1. [Colorado employers with >50 employees should also do on-site temperature checks.](#)
2. Symptoms are being updated regularly: [CDC Symptoms of Coronavirus](#), CDC [Symptoms Flyers – Multiple Languages](#).
3. [Pandemic Preparedness in the Workplace and the Americans with Disabilities Act.](#)

Resource: [Guidance on Employee Screening](#) — Society for Human Resource Management

On-site temperature screening process and resources

When screening temperatures, stand ≥6 feet away from the employee, verbally confirm their temperature (<100.4°F) and that they're not experiencing symptoms, and visually inspect them for signs of illness (flushed cheeks or fatigue).¹

Additional considerations when taking temperatures at the worksite²

Topic	Considerations
Who can take temperatures	<ul style="list-style-type: none">• If you have an on-site nurse or EMT who can take temperatures, that's ideal.• A nonmedical professional can take temperatures as long as they have proper training, PPE, a no-touch thermometer, and an understanding of confidentiality considerations.
Safety, privacy, and employee relations	<ul style="list-style-type: none">• How will you select an employee to administer the infrared scan?• How will that employee be protected from the virus?• How will the privacy of employees subjected to the infrared scan be protected?• How will this action affect employee morale?
PPE	<ul style="list-style-type: none">• PPE may include a combination of gloves, masks, eyewear, and a gown.• Screening staff do not need to wear PPE if they can maintain a 6-foot distance.
Physical distancing	<ul style="list-style-type: none">• Ensure staff stays ≥6 feet apart while waiting to have their temperatures measured.
Privacy considerations	<ul style="list-style-type: none">• If possible, avoid employees lining up for temperature checks.• Check temperatures in private, and keep identity of employees with fevers confidential.• Ideally, temperature check should happen before employee enters facility.

What Kaiser Permanente is doing

We're requiring temperature screenings at Kaiser Permanente medical facility entry points for all physicians, employees, members, and visitors.

1. [CDC: Communities, Schools, Workplaces, and Events](#). 2. [SHRM: A Guide to Employee Temperature Checks](#).

The science around antibody testing is evolving

- There continues to be variability in the accuracy of the currently available antibody tests (the risk of false positives and false negatives).
- There is limited information an antibody test can provide at the present time.
- It is not known whether or not a positive antibody test represents immunity to COVID-19.
- Antibody test results should not be interpreted as medical clearance for return to work.
- For these reasons, Kaiser Permanente is not currently recommending antibody testing outside of research studies at this time.



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.*

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
 - [A guide for interpreting test results and determining what actions to take from the CDC](#)
- [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

Situation	Documentation issued by Kaiser Permanente	How members obtain documentation
An employee has been out for suspected COVID-19 but did not receive a test confirming presence of the disease	None	<p>No medical documentation will be issued.</p> <p>Employees will need to attest to their illness and compliance with CDC and physician guidance for returning to work.</p>
An employee is symptomatic and cannot work due to suspected or confirmed COVID-19	A Work Status Form (WSF), Activity Prescription Form (ARx) or letter is issued	<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 symptomatic patients will be issued the appropriate off-work WSF/letter.*</p> <p>However, they will not issue a separate return-to-work clearance unless the patient was tested and the results were negative.</p>

COVID-19 workplace scenarios *(continued)*

Situation	Documentation issued by Kaiser Permanente	How members obtain documentation
An employee is asymptomatic but at risk due to a pre-existing condition	<p>A standard COVID-19 High Risk Patient Letter will be sent to the member to share with their employer, and it should initiate the interactive process.</p> <p>A WSR/letter is not issued as the individual is not symptomatic (unless the individual has specific limitations, in which case a WSR/letter* 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 kp.org.</p> <p>The original letter and current CDC guidelines should be used for return-to-work documentation.</p>
Employee is asymptomatic but has had exposure and is required to self-isolate	None	<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 asymptomatic but needs leave to care for a sick relative or has a family member who is high risk	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 confirmed COVID-19	A WSF, ARx Form, or letter is issued	<p>The WSF/letter provides return-to-work guidance.</p> <p>You and your employees should follow CDC guidance and physician instructions for safe return to work.</p>
Patient exposed to COVID-19 from workplace	State-mandated physician's first report of injury	<p>Employees receive documentation from their physician about returning to work. Employers also receive documentation from their employees' compensation insurance carrier or administrator, as well as any other forms (if any) mandated by the state's workers' compensation laws that must come from the treating physician.*</p>

*The responsible workers' compensation insurance company or administrator will determine if the employee is eligible for workers' compensation benefits.

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:

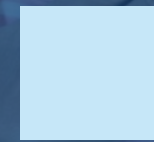
- Anticipate a surge in mental health symptoms that may coincide with the timing of returning to work.
- Reinforce a psychologically healthy workforce where employees feel safe, respected, and empowered.
- Offer self-care tools, employee assistance programs (EAP), and clinical resources for the unique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

Data points:

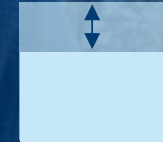
93%

of employees believe that companies that survive COVID-19 will be those who support their employees' mental health¹

2020



2018



83%

69%

As of June 2020, more than 8 in 10 Americans say the future of our nation is a significant source of stress. The previous high was less than 7 in 10, in 2018.²

1. "New Data From Ginger Shows Nearly 70 Percent of Workers Feel More Stressed During COVID-19 Than at Any Other Point in Their Entire Professional Career," Bloomberg, April 9, 2020.

2. Stress in America 2020, American Psychological Association.

Mental health and wellness during a time of crisis

COVID-19 has had a sudden and dramatic impact on our collective mental health. The pandemic has contributed to:

- **Social isolation**
- **Health-related anxieties**
- **Fear of uncertainty**
- **Change in routines**
- **Financial stress**
- **Loss**
- **Grief**
- **Trauma**
- **Increased substance use**

In addition, some communities are experiencing the dual effects of racial injustice and health impacts.



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 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. Consider adding EAP services or alternatives if your organization does not currently have them.



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, racial discrimination, 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 to address workplace mental health and well-being.

Understanding stigma in the workplace

Social stigma occurs when people associate risk with a specific group, place, or thing, with no evidence that they pose a greater risk than the general population. Stigmatization is especially common during outbreaks of disease, like COVID-19. Fear and anxiety drive stigma and can compromise safety, health, and interpersonal relationships at work.

Groups who may be experiencing stigma because of COVID-19:

- People who are Black, Asian, Hispanic, American Indian, and Alaska Native
- People who have recently traveled
- First/emergency responders, health care professionals, and other essential workers
- Individuals released from COVID-19 quarantine
- Those exhibiting flu-like symptoms

Stigmatized groups may be subjected to:

- Those wearing or not wearing protective gear (masks/gloves)
- Social avoidance or rejection
- Denial of health care, education, housing, or employment
- Physical violence
- Emotional or mental health distress
- Delaying care or hiding symptoms to avoid discrimination



Managing stigma in the workplace

Create a workplace environment in which COVID-19 and its impact can be discussed and mitigated honestly, accurately, and empathetically. Practice the following:

- ☐ Maintain privacy and confidentiality of those seeking health care and those who may be part of any contact investigation
- ☐ Share accurate information about how the virus spreads, using the [“Know the Facts”](#) poster from the CDC
- ☐ Speak out against negative rumors and discriminatory behaviors as they occur in verbal and written communications
- ☐ Share information through texting, YouTube, and mailers to address digital disparities in your workforce
- ☐ Reaffirm policies against workplace violence and bullying
- ☐ Provide resources to help employees [cope with stress](#) during the pandemic
- ☐ Thank health care workers, first responders, and other essential workers publicly
- ☐ Emphasize the importance of social support, especially for people worried about friends and relatives
- ☐ Encourage employees not to delay care if they feel unwell and not to hide symptoms

Using the appropriate language

Part of managing stigma is communicating thoughtfully and accurately. Below are a few examples of suggested language to use when you're talking to your employees:



Suggested	Not suggested
Novel coronavirus (COVID-19)	Chinese, Wuhan, Asian Flu or Virus
People who have or are recovering from COVID-19	COVID-19 cases or victims
People who have or are being evaluated for COVID-19	COVID-19 suspects or suspected cases
People acquiring or contracting COVID-19	People infecting, transmitting, or spreading COVID-19

Kaiser Permanente resources for 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](#) and [Calm](#)
- ❑ Individual therapy, group therapy, psychiatric care, support groups, intensive outpatient, inpatient, addiction care, and more



Kaiser Permanente resources for your workforce *(continued)*

Workforce mental health

- ❑ EAP collaboration and consultation to ensure coordination of care
- ❑ Mental health stigma reduction public health campaign: [FindYourWords](#)
- ❑ Consultation around building a psychologically healthy workforce
- ❑ Support to increase mental health awareness, including in-person Mental Health First Aid training
- ❑ Workforce-specific offerings (e.g., first responders, schools)
- ❑ Employer-focused data and reporting to provide insights around areas of opportunity and risk
- ❑ [Coronavirus/COVID-19: Mental Health & Wellness Webinar Series](#)



The framework for a psychologically healthy workforce



Know the impact



Break the silence



**Ensure robust
care options**



**Build a culture of
well-being**

Adapted from the [Working Well](#) toolkit by the Northeast Business Group on Health



EAP alternatives

If your organization doesn't offer an EAP, consider taking the following steps:

- ❑ In the event of a crisis, contact your mental health carrier to inquire about one-on-one mental health services.
- ❑ Offer the list of community resources to employees (referenced in this guide including national mental health crisis numbers such as suicide prevention, national crisis mental health support, etc.).
- ❑ Have employees leverage medical benefits for mental health care and resources.
- ❑ Work with local faith organizations and other community resources in their area to support employees.
- ❑ Leverage available mental health employer webinars (e.g., Business Groups on Health, Gallup, Kaiser Permanente or other health plans, wellness vendors, etc.).



Steering employees to the right care



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 identify behaviors and the solutions to help you direct your employees to the right care at the right time.

Employee characteristics

Well	Mild	Moderate	Severe
<ul style="list-style-type: none">• Effective communication• Socially, spiritually active• Calm and confident• Strong and cohesive families• Emotionally and physically healthy	<ul style="list-style-type: none">• Changes from normal behaviors• Poor focus, loss of interest• Irritable and pessimistic• Temporary and mild distress	<ul style="list-style-type: none">• Unresolved loss, trauma, wear and tear, inner conflict• Social isolation• Sleeplessness and self-medicating• More severe and lasting effects	<ul style="list-style-type: none">• Constant and disabling distress• Depression, severe anxiety• Symptoms get worse or get better then worse again• Relationships and work suffer

Employer response

To continue healthy choices

Keep fit, eat right, and relax

To recover and build resilience

Get adequate sleep and talk to someone you trust

To begin healing

Talk to a medical provider, counselor, faith advisor, or EAP specialist

To get help

Seek medical treatment

Source: Naval Reserve Officers Training Corps.

Mental health and addiction care numbers

Regions	Mental Health	Addiction Medicine
California – Northern California – Southern	1-800-464-4000 1-800-900-3277	1-800-464-4000 1-800-900-3277
Colorado – Denver/Boulder Colorado – Northern Colorado – Mountain & Southern Colorado	1-303-471-7700 1-866-359-8299 1-866-702-9026	1-303-471-7700 1-866-359-8299 1-866-702-9026
Georgia	1-404-365-0966 1-800-611-1811	1-404-365-0966 1-800-611-1811
Hawaii – Oahu Hawaii – Neighbor Islands	1-808-432-7600 1-888-945-7600	1-808-432-7600 1-888-945-7600
Mid-Atlantic States	1-866-530-8778	1-866-530-8778
Northwest	1-855-632-8280	1-855-632-8280
Washington	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](#)
- [Coronavirus/COVID-19: Mental Health & Wellness Webinar Series](#)

General mental health resources:

- CDC: [Stress and coping with COVID-19](#), [Reducing Stigma](#)
- 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 and 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.
- [NAMI National HelpLine Warmline Directory](#)
- [National Disaster Mental Health Distress Helpline](#): This is for emotional distress due to the pandemic and is toll-free, multilingual, crisis support 24/7 via telephone (1-800-985-5990) and SMS (text “TalkWithUs” to 66746).
- **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, sign in to 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 and 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.
- Kaiser Permanente's telehealth and culturally responsive care benefits everyone, especially vulnerable workers.

Stats:



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



Nearly half of those with social needs reported a negative mental health impact from COVID-19 ²

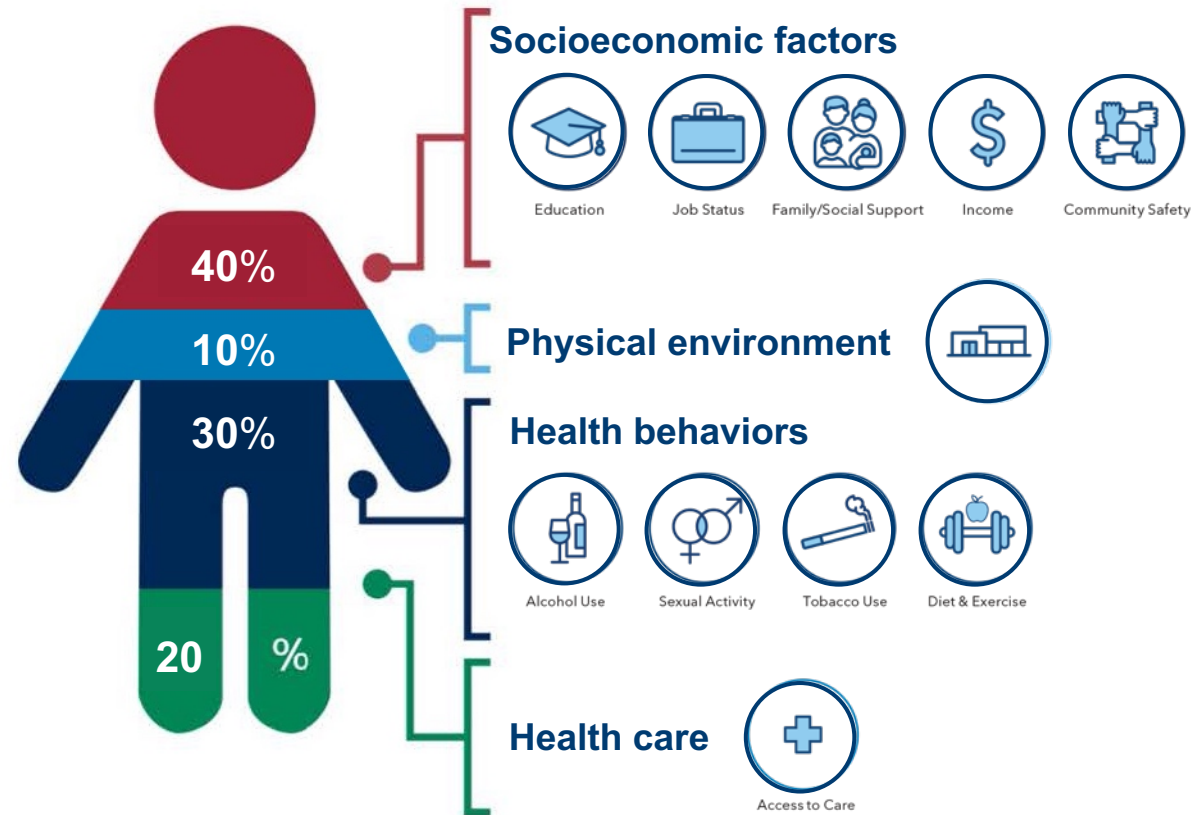
1. Harris Poll, Wave 7, online, nationally representative sample, April 11-13, 2020, n=2,013.

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.¹

Social and economic factors play a significant role in how people meet the everyday demands of life. A person's access to basic nutrition, a place to live, and economic opportunities all play a role in health.²



Source: University of Wisconsin, County Health Ranking Model, 2018.

1. Peer-reviewed social driver models vary, but most list the impact of socioeconomic factors on health outcomes between 20% and 60%.

2. Also known as basic human needs.

Social and economic factors impact employees in various ways

- Paying bills or taking public transportation to work may impact focus at work and overall business productivity.
- Affordable and safe child care 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. Fear of job loss also creates stress.
- 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”

Anticipate and identify 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
- 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

Assume that some of your workforce will struggle to meet their social needs and not know how to ask for help. Make it easy for them by being proactive and providing 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 (debt management, budgeting, etc.) that may be available through local banks or your financial vendors. Consider hosting webinars.



Promote community resources — Share self-serve platforms like **211**, **findhelp.org**, and **Kaiser Permanente's Resources in Times of Need** (located under [Support in your community](#)) to help employees to help employees with their social needs. Consider exploring partnerships with health plans, vendors, and community-based organizations to track additional local resources and address the specific needs of your workforce. For more information, see the resource guide/tools slide in this section.

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 are more likely to experience the health and economic impacts of COVID-19 (Kaiser Family Foundation).

Resource for Kaiser Permanente members

Thrive Local Connections

Live agents to assist with the following services:

- Housing and shelter
- Childcare
- Financial assistance
- Employment
- Food assistance
- Transportation
- Utility assistance
- Other critical services

National call center for Kaiser Permanente members

800-443-6328

Call center
Monday through Friday,
8 a.m. to 5 p.m. local time

Resources for non-Kaiser Permanente members:

- findhelp.org
- 211.org (by phone: 211)
- helpwhenyouneedit.org



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:



Leveraging EAPs, Wellness Champions, or Employee Resource Groups (ERGs) to provide your workforce with community resources that meet their needs.



Training for managers to help them address concerns 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).



Kaiser Permanente telehealth resources

Providing access to convenient telehealth options

As health care facilities start to reopen, remember that access to transportation, in particular, can be a barrier to care. Employees may also be worried about going into a facility. Remind your employees about the many ways they can access care outside of Kaiser Permanente facilities.

- **clinical advice¹**
- **video visit**
- **mobile app and kp.org²**
- **e-visit**
- **online chat³**
- **phone appointment**
- **email**
- **online self-care**
- **online physical therapy**
- **remote patient monitoring**
- **mail-order prescriptions**

1. 24/7 advice line is the best tool for those unable to register for kp.org.
2. Find information on how to register for kp.org [here](#).
3. Chatting feature is not available in all regions; bilingual collateral and interpreter services available.



17%
of Americans

couldn't go to the doctor or pick up medication because they lacked transportation

— 2019 Kaiser Permanente Social Needs Survey



70%
of appointments




are now done via telehealth
(June 8, 2020)

Understanding the impact of COVID-19 on communities of color

Although COVID-19 has affected many communities and industries, the pandemic has disproportionately impacted communities of color, further exacerbating pre-existing health, racial, and economic inequities.

Systemic inequalities influence a number of factors that can impact a person’s overall health, including:

- Stigma and systemic inequalities may:**
- [undermine prevention efforts](#)
 - [increase levels of chronic and toxic stress](#)
 - [cause health and health care disparities to continue²](#)

 Living conditions	 Social and economic factors	 Health and access issues
<ul style="list-style-type: none">• Living in densely populated areas• Residing farther from grocery stores and medical facilities• Living in multigenerational homes• Experiencing racial residential segregation	<ul style="list-style-type: none">• Facing stigma and systemic racism• Worrying about paying monthly bills• Working in industries that are more vulnerable to job loss during COVID-19 (leisure, hospitality, retail, etc.)• Having little or no paid sick leave• Working in high-contact, lower-paying positions (nursing assistants, cooks, etc.)	<ul style="list-style-type: none">• Delaying care due to cost, inability to take time off, distrust of the health care system, etc.• Having underlying medical conditions (asthma, diabetes, etc.)• Having fair or poor health• Being uninsured

1. [KFF, Communities of Color at Higher Risk for Health and Economic Challenges Due to COVID-19](#). 2. [CDC, COVID-19 in Racial and Ethnic Minority Groups](#).

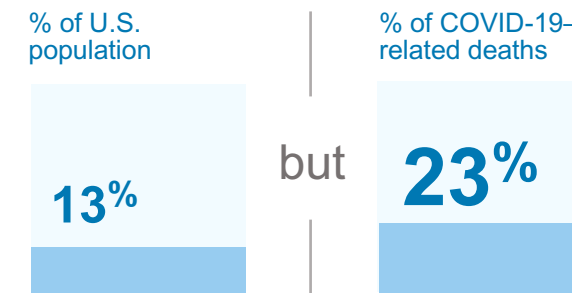
Providing equitable care and demographic insights

As you encourage your employees to seek care, know that our **culturally responsive care addresses health disparities and improves health outcomes**. Our services and staff resources that promote quality care for all include:

- ❑ **Language and interpreter services**
- ❑ **Member advisory and safety councils** allowing members of diverse backgrounds to give improvement feedback to care teams
- ❑ **Culturally responsive care training** for health care delivery staff and centers of expertise
- ❑ **Kaiser Permanente Bernard J. Tyson School of Medicine** to train students to provide clinical care and address social drivers of health and health disparities
- ❑ **Health disparities research** and forums to identify and create strategies to close health gaps
- ❑ **Employer-focused reporting** with demographic data to help address cultural and language barriers and develop a tailored strategy
- ❑ **Multidisciplinary disease and case management** service

1. This serves as one case study. Other communities, including the Latino and Native American population, are also experiencing [higher infection and mortality rates](#) compared with white Americans.
2. [CDC](#), Weekly Updates by Select Demographic and Geographic Characteristics.
3. [McKinsey & Company](#), COVID-19: Investing in Black Lives and Livelihoods, April 2020.

Black Americans¹ are:



COVID-19–related death rates for Black Americans are even higher in certain cities and states.²

30% more likely to have health conditions (asthma, diabetes, hypertension, etc.) that exacerbate the effects of COVID-19.³

Support terminated or laid-off workers

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



Help navigate health coverage options — Consider subsidizing COBRA benefits or hosting meetings that will provide information/community resources to help workers enroll in Medicaid or another form of coverage on state-based health benefit exchanges.

- Kaiser Permanente will allow members to continue coverage even if they are laid off, but the employer must continue to pay the monthly membership charge and include them on their enrollment.
- For information on how employees can continue coverage with Kaiser Permanente, visit kp.org/continue.



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



Help 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.



Supporting social drivers of health through our initiatives



Thrive Local

- Connecting communities to services to meet social needs
- Expanding resources to help meet people's pressing food, housing, and other critical social needs



Food for Life

- Increasing access to healthy, affordable food
- Kicking off a medically tailored meals pilot study and increasing outreach to help enroll newly eligible members in CalFresh



Housing for Health

- Advancing affordable, healthy housing with impact investments
- Adopting systemwide protocols to identify, predict, and address the unique health needs of at-risk patients and members

Curated tools and information for your workforce health

Resource guides for employees to address social needs (food, housing, utility assistance, etc.):

Where to find general resources:

- findhelp.org
- 211.org (by phone: 211)
- helpwhenyouneedit.org

Where to find Kaiser Permanente resources:

- [State Social Health 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.)
- Thrive Local Connections: **800-443-6328**, Monday through Friday, 8 a.m. to 5 p.m.

Employer resources to support community and workforce health:

- [Healthy Workplaces, Healthy Communities](#)
- [Kaiser Permanente Community Health Needs Assessment \(CHNA\)](#)
- [Business for Social Responsibility \(BSR\)](#)
- [HERO Health](#)

Chapter 5

Review and update HR policies to reflect the next normal

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

Key takeaways:

- **HR** has a unique role in supporting the greatest assets of an organization — 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.
- **In a unionized workforce**, discuss HR policy changes with your partner unions, and identify policies subject to bargaining.

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 and bargaining structures, 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**



A BETTER WAY TO TAKE CARE OF BUSINESS

Share updates with employees regularly and often

You may need to create new communication channels, align communications with your union partners to ensure consistent messaging, and repeat messages many times. People are distracted with the many demands on them at this time. Be patient with 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 ensure 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.
- In a unionized workforce, discuss policy changes with your partner unions, and identify policies subject to bargaining.

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 employees?
- How do you determine who gets which work shifts?
- What policies and practices need to be created, maintained, or updated to create a safe and healthy workplace?

Resource

- [Coronavirus \(COVID-19\): Benefits Checklist](#) — Business Group on Health



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 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 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 guidance from federal agencies, including the White House Coronavirus Task Force.
- 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](#)
- [FAQs: Employee Retention Credit under the CARES Act](#)

OSHA (workplace safety)

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

Department of Treasury

- [Overview of assistance the CARES Act provides for American workers, families, and small businesses](#)

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](#).
- Review new CDC guidance in [CDC Activities and Initiatives Supporting the COVID-19 Response and the President’s Plan for Opening America Up Again](#).



California regional guidance

Regulatory guidance

[Cal/OSHA Guidance on Requirements to Protect Workers From Coronavirus](#)

[Department of Fair Employment and Housing — Resources and Guidance](#)

- [DFEH Employment Information on COVID-19 \(disability accommodation, privacy\)](#)

[Labor Commissioner COVID-19 Information](#)

- [FAQs on Laws Enforced by the California Labor Commissioner's Office \(paid sick leave, school closure leave, wages and hours\)](#)

[Employment Development Department \(state disability, unemployment\)](#)

[California Coronavirus \(COVID-19\) Response Portal \(includes links to emotional health resources, child care resources\)](#)

- [Resilience Roadmap](#)

[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. The California Department of Public Health issued guidance on resuming deferred health care services, available [here](#).
- California's Department of Public Health and Division of Occupational Safety and Health published guidance for [limited services](#) and [office workspaces](#).
- 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 guidance regarding emergency rules](#) temporarily requires employers in certain industries to provide employees with up to 80 hours of paid sick leave.
- [Amended Public Health Order 20-28](#) provides that employers must take certain workplace measures to minimize disease transmission. Employers must also provide work accommodations such as flexible or remote scheduling for vulnerable individuals and employees with caretaker responsibilities.

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 also 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 who have reduced work or no work for a short period due to COVID-19. The rules also provide that employers shouldn't be charged for unemployment benefits related to the virus.

Shelter-in-place and reopening guidance

- On April 23, 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.



Hawaii regional guidance

Shelter-in-place and reopening guidance

- Governor David Ige announced plans to extend Hawaii's safer-at-home order through June 30. See [Alan Oshima's Economic and Community Pathway to Recovery Plan](#) for more information.
- On May 13, Mayor Kirk Caldwell signed [Executive Order 2020-11, "Ho'oulu i Honolulu 2.0" or "Restore Honolulu 2.0"](#) — it extends the city and county of Honolulu's stay-at-home/work-from-home order through June 30 and permits additional activities to resume.
- [Beyond Recovery: Reopening Hawai'i: A Strategy to Reopen and Reshape Hawaii's Economy](#)

Additional resources

- [State Department of Health COVID-19 Website](#)
- [State Department of Labor COVID-19 Website](#)
- [State Department of Human Services COVID-19 Website](#)
- [State Department of Transportation: Airports COVID-19 Website](#)
- [Economic and Community Navigator Website](#)
- [FEMA Public Assistance Program via HI-EMA Website](#)

Maryland regional guidance

Regulatory guidance

- [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.
- On June 5, [Maryland entered Phase 2 of reopening](#), which allows individual jurisdictions to make decisions regarding the timing of their reopenings.
- The Maryland Department of Health issued guidelines to allow for nonurgent health services at the discretion of local hospitals and health care providers.

Oregon regional guidance

Regulatory guidance

- [Executive Order 20-25](#) (with no stated termination date) requires employers to provide telework to the maximum extent possible, and prohibits employers from requiring work to be performed in offices whenever remote options are available.
- [The Oregon Bureau of Labor and Industries Temporary Administrative Order](#) (effective through September 13, 2020) permits 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.
- [Oregon Bureau of Labor and Industries guidance on COVID-19](#) (as it relates to the state's predictive scheduling law)
- [Oregon OSHA COVID-19 portal](#) (including COVID-19-specific Q&A)
- [Updated general guidance for employers regarding COVID-19](#) and added sector-specific guidance for retail stores, child-care operations, transit agencies, and school-age summertime day camps.

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.
- Oregon's governor released an [executive order](#) that permits retail stores to reopen May 15. It also announced a process for counties to reopen if they meet Phase 1 criteria.

Virginia regional guidance

Regulatory guidance

- [Department of Labor and Industry VOSH Hazard Alert for employers](#) (providing information and guidance on COVID-19 in the workplace)
- [Department of Professional and Occupational Regulation COVID-19 portal](#)
- [Executive Order 62](#) (effective through May 28, 2020, unless extended) permits certain businesses to reopen with restrictions, and encourages remote work for professional businesses as much as possible.

Shelter-in-place and reopening guidance

- Virginia issued the “[Forward Virginia](#)” blueprint, which describes a phased approach to reopening the economy, grounded in the federal CDC guidelines.
- Virginia is permitting nonurgent health care services to resume starting May 1.
- Virginia entered “[Forward Virginia](#)” [Phase 3](#), which continues to require face coverings in indoor public spaces, on July 1.

Washington regional guidance

Regulatory guidance

- [Governor's Proclamation 20-46](#) (effective through June 12, 2020) 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](#)," that focuses on building the public health infrastructure to safely remove the stay-at-home orders that are in place.
- Washington's governor issued an [executive order](#) announcing a [4-phase reopening plan](#). The state issued industry-specific guidance for professional services, restaurants and taverns, personal services, and retail.
- Washington is permitting nonurgent health care services to resume starting May 18.

☆ Washington, D.C., regional guidance

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.
- The ReOpen DC Advisory Group published [recommendations for the mayor](#) and recommended a 4-stage approach to reopening.

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:

- ☐ Monitor public health communications about COVID-19 recommendations for the workplace and ensure that employees can access and understand that information. Monitor health and safety communications from NIOSH, OSHA, and state agencies.
- ☐ 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.
- ☐ Confer with your partner unions to ensure your health and safety messages align and avoid mistrust or confusion
- ☐ 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.

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 communication strategies for sharing information about the disease and steps being taken by the school facility to prevent the spread of COVID-19 among students and staff.
- ❑ Create and test communications plans for use with the school community.
- ❑ For best outcomes, collaborate with all School District partner unions, including those representing educators and classified employees, to develop joint policies, practices, and communications.

District and school administrator resources

CDC

- [COVID-19 Considerations for Schools](#)
- [COVID-19 FAQs for Administrators, Teachers, and Parents](#)
- [Implementation of Mitigation Strategies for Communities With Local COVID-19 Transmission](#)

Planning for the Next Normal at School: Keeping Students, Staff, Teachers, and Families Safe and Healthy

In partnership with over 30 school health organizations, Kaiser Permanente has published a playbook that provides additional practical guidance for school and district administrators and their partner unions to address the specific mental and physical health considerations of school communities as they relate to COVID-19. To view or download a copy of the playbook, please [visit the Thriving Schools website](#).



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:

- ☐ Allow employees to wear masks over their nose and mouth to prevent spreading the virus.
- ☐ 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 6 feet between co-workers and customers, where possible.
- ☐ Post signage with healthy habits to be seen by both employees and customers (e.g., bathrooms, entrances, time clocks).
- ☐ Close self-serving food bars and bulk-bin options.
- ☐ Close fitting rooms.
- ☐ Encourage customers to use touchless payment options.
- ☐ Enforce customer physical distance and mask-wearing for the safety of the workers who are exposed in closed spaces over long periods of time.

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 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.
- ❑ 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

U.S. Fire Administration/FEMA

- [COVID-19 Resources for Fire and EMS](#)
- [COVID-19: Considerations, Strategies, and Resources for Emergency Medical Services Crisis Standards of Care](#)

CDC

- [What Firefighters and EMS Providers Need to Know About COVID-19](#)
- [Interim Guidance for Emergency Medical Services \(EMS\) Systems and 911 Public Safety Answering Points \(PSAPs\) for COVID-19 in the United States](#)



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.

Per [CDC interim guidance](#), return-to-work criteria for health care personnel with suspected or confirmed COVID-19 is the same for persons in non–health care settings.

Guidance for health care professionals with confirmed or suspected COVID-19

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

- ❑ Require health care professionals 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 while in the facility. After this time, they should revert to their facility policy regarding [universal source control](#) duuuring the pandemic, like:
 - 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-2external 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:

- ☐ Ask bus passengers to enter and exit the bus through rear entry doors.
- ☐ Instruct passengers to 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, for restaurants and hotels with restaurants.
- ☐ 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 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 the 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.
- ❑ Ensure that housekeeping staff does not clean a guest room while the guest is present. Communicate the policy clearly to all hotel guests.



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.



Survey

We plan to periodically update this playbook, and your feedback is important. Please take this anonymous survey to let us know what you found valuable and what you would like to see included in the future.

Two easy options:

- Open your internet browser and type in <https://tinyurl.com/KPPlaybook1>
- Open your smartphone camera, focus it on the QR code, and then click on the notification that pops up