Planning for the next normal at work

Keeping your workforce safe and healthy
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**Did you know?**

Your employees consider you their most trusted source of information related to the coronavirus.

Employees believe their employers are a more credible source of information about COVID-19 than even the government, health organizations, or the media. *

Introduction and purpose

As COVID-19 restrictions continue to shift, 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 work in this ever-evolving “next normal” 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 update 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 with us 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
- Post this content on your intranet or resource center to encourage your employees to celebrate safely at home this holiday season.

Post these videos to your intranet or employee resource center to help drive healthy behaviors that support the well-being of your employees and communities:

- Together We Thrive (English)
- Together We Thrive (Spanish)
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 to access to the internet.
Understanding the 4 phases of a pandemic

History can give us a road map for what to expect over the course of the COVID-19 pandemic. While the severity and length of past outbreaks have varied based on a variety of factors, there are identifiable phases to each pandemic.

Pandemic behaviors follow 4 distinct, predictable stages.

1. **Crisis** — Varied government responses lead to mixed results, hoarding, and confusion

2. **Shutdowns** — Physical distancing, food shortages, overstretched health care systems, economic recession, and worsening health disparities

3. **New social norms** — Public health policies, such as wearing masks, are widely accepted; setbacks happen when physical distancing measures relax

4. **Regulatory and power shifts** — Push for better health care and coverage, return to "normal," rise of nationalism, focus on economic recovery

Framework overview

Dimensions of health to consider when restarting your workforce

COVID-19 continues to cause significant effects on physical, mental, and social health. We’ve developed this framework to help you address these challenges as you respond to changing health and regulatory conditions in order to sustain your business.

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.
During surges, telehealth visits offer high-quality care without the risk of contracting COVID-19

Kaiser Permanente members report that virtual care solves their issues the majority of the time.

Percent of issues solved by each telehealth service from Kaiser Permanente

- Video: 58%
- Email: 62%
- E-visit: 63%
- Phone: 65%
- Chat: 68%

Why it matters
Each in-person appointment your employees don’t need saves you an average of $137 in direct costs and 2 hours of work time.

Prioritizing COVID-19 in a new presidential administration

The new administration’s plan to beat COVID-19:*

• Ensure all Americans have access to regular, reliable, and free testing
• Fix personal protective equipment (PPE) problems for good
• Provide clear, consistent, evidence-based guidance for how communities should navigate the pandemic — and the resources for schools, small businesses, and families to make it through
• Plan for the effective, equitable distribution of treatments and vaccines — because development isn’t enough if they aren’t effectively distributed
• Protect older Americans and others at high risk
• Rebuild and expand defenses to predict, prevent, and mitigate pandemic threats
• Implement mask mandates nationwide by working with governors and mayors and by asking the American people to do what they do best: step up in a time of crisis

Additional considerations:

Bechara Choucair, MD, Kaiser Permanente’s former senior vice president and chief health officer, will serve in the new administration as White House COVID-19 vaccinations coordinator. Dr. Choucair will focus on coordinating the timely, safe, and equitable distribution of COVID-19 vaccinations for the U.S. population, in close partnership with relevant federal departments and agencies, as well as state and local authorities.

In Congress, further COVID-19 health response and economic stimulus legislation may be the subject of negotiation between Democratic and Republican leadership in the new Congress that began in January.


“Feelings of stress and anxiety, already heightened by the COVID-19 pandemic, economic uncertainty, and social unrest, may be compounded by the ongoing challenges to the election results. We must continue to treat each other with respect and focus on those things that bring us together, not divide us.

Kaiser Permanente remains committed to advocating for a U.S. health care system that is affordable and sustainable and that delivers equitable, high-quality care for all Americans, as well as continuing to partner with employers to keep their employees safe, healthy, and productive.”

—Greg A. Adams
Chairman and Chief Executive Officer
Kaiser Foundation Health Plan, Inc. and Hospitals
Chapter 1
Modify workplace safety plans for COVID-19

Depending on the level of COVID-19 spread in your community — and on state and local guidance — use these tips for prevention and to help ensure workforce safety.

Key takeaways:

• Tailor your safety plan to your workplace, including a hazard assessment
• Mitigate risks of transmission using:
  — Employee sanitation
  — Environmental sanitation
  — Containment strategies
• Monitor CDC and Occupational Safety and Health Administration (OSHA) guidance
• Communicate frequently and consistently

Data points

92% 80%

In an ongoing Mercer survey on COVID-19, the vast majority of 1,057 employers who responded said they’re taking actions to protect their workforce, including cleaning and disinfection of the workplace (92%), providing face masks (80%), administering temperature screening on-site (82%), and administering symptom questionnaires on-site (54%).

4.4 million

According to the CDC, flu vaccinations prevented about 4.4 million flu illnesses, 58,000 hospitalizations, and 3,500 deaths during the 2018–2019 flu season.

Assessing safety when working on-site

Consider the levels of employee health risk when planning how — and when — employees should be working on-site.

Risk level

- **Very High**
- **Medium High**
- **Medium**
- **Low (Caution)**

**Examples**

- **Health care workers** performing aerosol-generating procedures or handling specimens from potentially infectious patients
- **Workers in close contact with the public**, such as health care delivery, law enforcement, fire, and medical transport
- **Roles in contact with the public**, such as schools, retail, grocery, and manufacturing
- **Jobs that require minimal contact** with others, such as office work and remote work

**Strategies to limit COVID-19 transmission**

- Practice physical distancing
- Minimize shared objects
- Limit in-person gatherings
- Limit or cancel travel
- Promote and support sanitation/hygiene measures
- Align company policies to support mitigation
- Develop and communicate containment protocols
- Communicate frequently

Source: [OSHA](https://www.osha.gov).
Promote employee prevention and safety guidelines in the workplace

Follow federal and state guidelines for a safe workplace, which include, but aren't limited to, the following recommendations from the CDC pertaining to employee sanitation behaviors:

<table>
<thead>
<tr>
<th>Action</th>
<th>Description</th>
</tr>
</thead>
<tbody>
<tr>
<td>Institute universal masking.</td>
<td>Provide as much space between workstations as possible (at least 6 feet, about 2 arms lengths from person to person).*</td>
</tr>
<tr>
<td>Provide hand sanitizer containing at least 60% alcohol in multiple locations.</td>
<td>Prohibit large gatherings and limit other gatherings to 10 people or fewer.</td>
</tr>
<tr>
<td>Promote frequent hand-washing.</td>
<td>Identify and provide the type of personal protective equipment needed in your workplace.</td>
</tr>
<tr>
<td>Place boxes of tissues throughout the workplace.</td>
<td>Encourage employees to get their annual flu shot.</td>
</tr>
<tr>
<td>Ensure appropriate disposal of all waste, with clearly labeled receptacles readily available.</td>
<td><em>Studies have shown an <a href="https://www.kp.org/workforcehealth">increase in COVID-19 transmission</a> through air conditioning in crowded, poorly ventilated environments.</em></td>
</tr>
</tbody>
</table>
Fight the flu with the same preventive measures you’re using to combat COVID-19

During flu season, the following messages are critical to keep your employees safe:

• Wear a mask, correctly and consistently
• Maintain a safe distance of 6 feet or more from others
• Get your flu shot
• Wash your hands frequently
• Ensure proper ventilation

Flu and COVID-19 prevention resources:
• Kaiser Permanente flu prevention and COVID-19 (employer information)
• kp.org/flu (employee information)
• Kaiser Permanente COVID-19 workplace safety signs
• CDC flu prevention resources for the workplace

How to help prevent the flu and COVID-19

GOOD

BETTER

BEST
Mitigate your employees’ exposure in the workplace

Identify and disinfect high-touch areas frequently (before each use)

1. Refrigerator
2. Hand dryers and towel dispensers
3. Sinks
4. Soap pump
5. Cabinet handles
6. Microwave buttons
7. Shared utensils
8. Coffee pot
9. Coffee cup
10. Desk and table surfaces
11. Copiers and faxes
12. Computers
13. Phones
14. Door handles

6 ways to limit exposure in the workplace

• Clean and disinfect high-touch surfaces frequently
• Keep at least 6 feet between yourself and others, and between workstations
• Add visual cues to reinforce physical distancing
• Install physical barriers where distancing is difficult
• Ensure all trash cans have lids and are touch-free
• Supply extra face masks, tissues, and hand sanitizer in prominent places

Additional resources

• CDC
• WHO
Require protective face masks

**Wearing a mask** is a proven tactic to protect your employees from getting and spreading the coronavirus.*

There are many masks to choose from, but not all offer the same level of protection. The [CDC](https://www.cdc.gov) recommends using a mask that:

- Has 2 or more layers of washable, breathable fabric
- Completely covers your nose and mouth
- Fits snugly against the sides of your face without gaps

### Most-effective to least-effective face coverings

<table>
<thead>
<tr>
<th>Type of covering</th>
<th>N95 mask</th>
<th>Surgical mask</th>
<th>Hybrid mask</th>
<th>Two-layer cotton mask</th>
<th>Tea towel dishcloth mask</th>
<th>100% cotton t-shirt</th>
<th>Natural silk</th>
<th>Scarf or bandana</th>
<th>Mask with built-in valve or vent</th>
</tr>
</thead>
<tbody>
<tr>
<td><strong>Where it can be worn</strong></td>
<td>Health care settings</td>
<td>Health care, public, indoor, and crowded settings</td>
<td>Public, indoor, and crowded settings</td>
<td>Public, indoor, and crowded settings</td>
<td>Outdoor areas</td>
<td>Outdoor areas</td>
<td>Outdoor areas</td>
<td>As a last resort</td>
<td>Never (doesn't protect others)</td>
</tr>
</tbody>
</table>

Source: [Business Insider](https://www.businessinsider.com), September 6, 2020.

*Physical distancing (at least 6 feet apart) and frequent hand-washing are also recommended as effective preventive measures, according to the [CDC](https://www.cdc.gov).
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

*See the [CDC’s guidance](https://www.cdc.gov/coronavirus/2019-ncov/face-masks/using-face-masks-how-to.html) to learn more, including who should not wear a cloth face mask.

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**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.

Additional resource
[Watch this video](https://www.cdc.gov/coronavirus/2019-ncov/face-masks/using-face-masks-how-to.html) for more advice on how to properly wear a face mask.
Increase ventilation, air circulation, and worksite cleaning

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 and consider using disinfectants that meet a broad range of health and safety criteria.
Isolate exposure to the virus

Limit exposure\(^1\) to the virus by instituting daily health checks and 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.\(^2\)

- **Sick-day policies and procedures** — Ensure sick-day policies aren’t punitive and actively communicate expectations for employees to stay home at the first signs of sickness.

- **Isolation protocol** — Ensure you have a plan to identify and respond when someone is sick. 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.

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1. Definition of potential exposure 2. Information sharing must be compliant with the Americans with Disabilities Act (ADA).

kp.org/workforcehealth
Implement contact tracing in the workplace

Contact tracing is an effective, evidence-based public health tool that can help:

• Quickly identify people with an infection
• Track their previous contact with others
• Notify, monitor, and support those at risk as they quarantine, test, and recover

Employers have a responsibility to support public health efforts and follow reporting requirements

You should have a strong, up-to-date Injury and Illness Prevention Program* as part of your safety plan to support all recordable COVID-19 cases. Employers can:

• Report cases following OSHA’s injury and illness record-keeping process
• Instruct employees with an infectious disease to contact their health care provider
• Identify and train HR staff on contact tracing, time-off leaves, privacy regulations, and processes for working with local health departments

Example: Contact tracing in practice

When working with local health departments in California, your role in contact tracing may include providing:

• Employee rosters
• Work schedules and work locations of infected employees
• Other pertinent information that would assist the local health department in contact-tracing efforts*

*Follow your county and/or state guidelines; they define what constitutes an injury or illness, and provide employer instructions for contact tracing.

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Implement contact tracing in the workplace (continued)

What happens if we stop each case from infecting just one person?

Resources:
- Contact-tracing guidance by state — OSHA
- The role HR plays in contact tracing — SHRM
- Contact tracing for COVID-19 — CDC

Key:
- COVID-19 infection
- No infection
- Chain of transmission broken

Cases prevented
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:

• The importance of wearing a mask correctly
• The importance of getting a flu shot, especially during the COVID-19 pandemic
• Hand hygiene to stop the spread of COVID-19 and other illnesses
• 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](https://www.cdc.gov/travel/coronavirus.html) 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](https://www.cdc.gov/travel/coronavirus.html) for guidance by country, and be aware of travel advisories that may impact the trip.
Workplace health considerations: Remote working

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

Video: 6 quick tips for working from home

Flyer: COVID-19 work-from-home wellness for employees

Flyer: COVID-19 work-from-home wellness for managers

Brochure: The Essential Guide to Leading and Working, Remotely

Videos: Office ergonomics

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Case study: Strategies and resources to support Kaiser Permanente staff working remotely

Company information:

**Human resources goal:** Pivot to new strategies for supporting leaders and employees during the pandemic, with appropriate resources to continue working and supporting physical and mental health

**Employees:** 217,000  
**Locations:** Multiple  
**Job functions:** Diverse

Challenges faced by Kaiser Permanente:

- Shelter-in-place stay-at-home orders went into effect in March
- All nonessential and administrative staff began working from home immediately
- Administrative functions, such as IT, human resources, and sales and marketing, had to pivot to virtual delivery of services

Techniques leveraged to quickly pivot:

- Deployed online Kaiser Permanente COVID-19 experience survey to get feedback from employees
- Identified easy-to-use resources to quickly address high anxiety among employees and staff
- Expanded employee assistance programs to help ensure 24/7 availability for staff and organizational support
- Combined Kaiser Permanente national benefits with regional benefits to support our essential workforce:
  - Backup care benefit for child care and elder care
  - Parking/commuting assistance
  - Child care grants
  - Support setting up remote work
  - Financial and social needs

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Case study: Strategies and resources to support Kaiser Permanente staff working remotely (continued)

Strategies implemented to modify or improve business operations:

- Revised learning development offerings and secured a commitment from leadership to empower employees to participate
- Delivered real-time response to support virtual learning and engagement through a rapidly changing environment; response included social and microlearning opportunities
- Provided learning and development support to reposition our workforce based on analysis from our state’s predictive operational and organizational models

- Implemented remote worker website that includes training, resources, and collaboration tools
- Provided training for Microsoft Teams and Zoom to support individual employees and leaders
- Frequent and ongoing communications to workforce on COVID-19-related information, including promotion of self-care tools and mental health support
- Developed and deployed a COVID-19 symptom self-check and attestation training course for all essential employees working in medical facilities or offices

kp.org/workforcehealth
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

**Employees:** 217,000

**Locations:** Multiple

**Job functions:** Diverse

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## Phases

<table>
<thead>
<tr>
<th>Phase</th>
<th>Description</th>
<th>Focus areas:</th>
</tr>
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</table>
| 1     | Develop broad guidance as a larger framework for decision-making | - 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 | - 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 | - Setting expectations early and clearly  
- Increasing communication  
- Fostering shared leadership  
- Creating a virtual community  
- Celebrating successes |

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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/non-represented 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

kp.org/workforcehealth
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 should be handled in a consistent HR and legal framework (e.g., child care, elder care, high-risk, etc.).*
Case study: 23andMe’s strategy for a robust employee support system

Company information:

Employees: 553  Locations: Multiple  Job functions: Diverse

Strategy: Strengthen employee support system through a robust communications strategy, policy and best practice updates, and collaborative approach.

Leadership strategy:

- In advance of shelter in place, activated a crisis management team — comprised of leaders with direct workplace experience from all functional areas — to meet several times a week and on weekends (as needed to generate and confirm key decisions)
- Leveraged executive leadership and already established human resources team
- Reviewed updated information from the CDC and local health departments to inform strategy and policy
- Created avenues for collecting employee feedback that would also inform strategy and policy
- Evaluated current communication approach to employees
- Assigned responsibilities for executing a coordinated crisis response
- Determined how best to meet employees’ diverse needs

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Case study: 23andMe’s strategy for a robust employee support system (continued)

Robust communications strategy for employee (and family) well-being:

- **Established consistent messaging** from all levels, including senior leaders, managers, and directors
- **Embraced company core values** and held employees accountable for supporting each other, including:
  - Sending “we’re in this together” messages
  - Sharing challenges and triumphs
  - Volunteering to help a co-worker with tasks when they feel overwhelmed
- **Highlighted employee benefits** like employee assistance programs (EAP) and mental health services
- **Delivered a weekly pulse survey** to employees to gauge how they’re doing and gather work-from-home tips
- **Created work-from-home resources**, including relevant curriculum for:
  - Managing virtually and working from home effectively
- Unleashing potential and using a growth mindset
- Space for peer-to-peer learning and sharing
- **Sent weekly COVID-19 newsletters**, covering topics like:
  - Business impact
  - Mental health and wellness resources
  - Silver linings during shelter-in-place time
  - Healthy eating and activities like cooking and painting classes for employees and their families
  - **Leveraged existing Slack channel** to support parents with:
  - Messages about school reopening information
  - Child care and elder care options
  - Calendars for visibility on meeting availability

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Case study: 23andMe’s strategy for a robust employee support system *(continued)*

Policy revisions and new best practices:

- Enacted new time-off policies, including days off for mental health and early-out Fridays. Plus, as often as possible, meetings aren’t scheduled after 1 p.m.
- Renewed focus on diversity, equity, and inclusion.
- Designated Juneteenth as “A Day of Reflection.”
- Engaged employees in creating and informing diversity, equity, and inclusion (DEI) work.
- Created space for employees to share experiences related to DEI and social justice.
- Suspended sick-day tracking to better support employees who are ill or caring for a sick family member, and temporarily removed vacation-day limits.
- Demonstrated care for its community and customers:
  - Donated 300 masks to local department of public health
  - Donated gloves and masks to a children’s hospital
  - Launched COVID-19 research and study
  - Created COVID-19 info center for customers
Workplace safety checklist

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

- Provide masks. Require and enforce proper use.
- 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 hand-washing.
- 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.

[1.23](kp.org/workforcehealth)
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
- NIOSH Hierarchy of Controls
- Tips for communicating about masks
- Creating a coronavirus mask policy for work (template)

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 and posters
- CDC
  - CDC COVID-19 fact sheets (multiple languages)
  - Businesses and Workplaces (multiple languages)
- OSHA
  - Coronavirus resources
- Kaiser Permanente
  - Workplace signage and floor clings

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Chapter 2

COVID-19 screening, vaccinations, and maintaining a safe workplace

An unprecedented and evolving COVID-19 response requires vigilance in your screenings, leave policies, and workplace guidelines to ensure safety, trust, and business continuity.

Key takeaways:

• Important considerations for the COVID-19 vaccine deployment.
• Develop a return-to-work and screening policy during COVID-19.
• Evaluate leave-of-absence (LOA) policies with flexibility in mind; provide guidance to employees.
• Plan and prepare managers to address changes in productivity.
• In a unionized workforce, engage with your unions to maximize alignment and collaboration.

Data point

According to a report from the Business Group on Health, 71% of large employers are offering paid administrative/emergency leave to their employees during the pandemic.*

COVID-19 vaccines


Vaccines will be a vital tool to help control and eventually end this pandemic, which has caused so much pain and disruption. This next step will take time as vaccine doses are manufactured and distribution plans are refined. For Kaiser Permanente, equity is a key consideration in vaccine distribution.

Our aim is to get as many eligible people vaccinated as possible in each phase, with a focus on vaccinating those from communities that have been most severely affected by the coronavirus — including Black, Indigenous, and other people of color.
COVID-19 vaccine access and administration

Accessing the vaccine
The CDC oversees the allocation of COVID-19 vaccines in the United States and recommends who gets vaccinated first. There’s currently a limited supply of vaccines available, so some states have narrowed that prioritization even further until they have enough vaccine.¹ To learn more about the phases and who is prioritized, read the CDC’s recommendations.

Administering the vaccine
• Kaiser Permanente is an approved vaccine provider in every market where we operate.
• We administer the vaccine to both members and nonmembers prioritized by state health departments.
• The vaccine will be provided at no cost.
• Larger groups of people will become eligible to receive the vaccine as larger supplies become available.

3 phases of vaccine distribution

1. Doses will be available for critical-risk populations
2. The vaccine will be more widely available at doctor’s offices, pharmacies, clinics, and hospitals
3. Easy access — anyone who wants the vaccine can get it

¹ CDC Vaccine FAQs, accessed January 21, 2021.
Recommendations for building trust in the COVID-19 vaccine

Lead by example

- Show how leaders in the workplace are participating.
- Share pictures and positive stories from those who have already taken the vaccine and why they made this decision (focus on benefit to family and safety of older family members).

Encourage acceptance

- Use mentors and employee leaders to raise awareness.
- Develop caring and empathetic messaging campaigns that provide clear-and-simple information about how the vaccine works. Use a variety of communication tools (social media, employee newsletters, printed materials, etc.) to share your messages.
- Prepare to address anti-vaccination perspectives and provide a forum where it’s safe to talk about mistrust and fears to address myths that may be circulating in social media outlets.

Anticipate cultural and social considerations

Lead with empathy and remember that cultural experiences are diverse and unique.

- Make it possible for employees to easily access the vaccine by addressing time-off needs and transportation access.
- Provide a community forum to freely talk about concerns or mistrust of public health systems.
- Reference community leaders and medical personnel taking the vaccine to encourage trust. When possible, include family members to raise awareness and increase understanding.
- Provide bilingual information on the vaccine and access to the vaccine, if needed.
- Collaborate with public health officials, academics, and health care associations, in addition to community leaders.

Vaccine hesitancy existed before COVID-19

Adult vaccination rates were consistently low even before the coronavirus.

47% of U.S. adults got a flu shot during the 2018–2019 flu season (between July 2018 and May 2019).

COVID-19 vaccine information: Useful resources and tools

**Kaiser Permanente’s Better Way employer site:**
- Information about COVID-19 vaccines, including safety and effectiveness
- Kaiser Permanente’s role as a vaccine provider
- Vaccine availability and distribution — when it will be available to your employees
- Employer FAQ

**Kaiser Permanente’s member-facing site:**
- What your employees need to know about the COVID-19 vaccine
- Timely updates and instructions on how to make an appointment once employees are eligible

**CDC:**
- Information on vaccine types
- Benefits of getting the vaccine
- What to expect when getting the vaccine
- V-safe after-vaccination health checker (January 5, 2021)
- Health Equity Strategy

**Other resources:**
- Federal and Statewide Vaccination Plan (January 4, 2021)
- SHRM on When Employers Can Require COVID-19 Vaccinations
- Kaiser Family Foundation (prioritizing who will get the vaccine and when)
- Building Vaccine Confidence
- How Vaccines Work - Video
- What to Expect After Vaccine - Video

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**Did you know?**
60% of U.S. adults say they would get a COVID-19 vaccine if available today.¹

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

**Employees who have tested positive and experienced symptoms can return to work:**
- >1 day from recovery
- >10 days from symptom onset

**Employees who tested positive without symptoms can return to work:**
- >10 days since first positive test

**Employees who have been exposed to COVID-19, but haven’t tested positive or experienced symptoms, can return to work:**
- >14 days since last exposure, even after a negative test

1. A test-based strategy is no longer recommended to determine when to discontinue home isolation, except in certain circumstances.
2. Based on local recommendations, the CDC is also allowing some health departments to choose a 10-day quarantine time or a 7-day quarantine time with a negative test. Check with your local officials for the latest guidance.

Sources:
COVID-19 diagnostic testing priorities

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

The CDC regularly updates its “Guidance for Expanded Screening Testing to Reduce Silent Spread of SARS-CoV-2” (last updated December 3, 2020). Note the CDC doesn’t have regulatory authority over testing; it only publishes guidelines.

Testing Options

• **Kaiser Permanente testing:** Kaiser Permanente follows all federal, state, and county public health agency testing guidance and requirements. We also use clinician judgement, CDC guidance, and regional testing capacity to update regional policies regarding who gets tested at Kaiser Permanente facilities.

• **External testing:** In addition to testing available through Kaiser Permanente, members may choose to be tested at an independent, licensed facility. Kaiser Permanente will provide reimbursement for the cost of the test if it is FDA-approved and conducted by a licensed facility.

• **New tests:** As new COVID-19 testing options emerge, Kaiser Permanente’s infectious disease, clinical, and operations experts evaluate their effectiveness to determine if they’ll be offered.

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

kp.org/workforcehealth
The difference between isolation and quarantine

**Isolation** keeps someone who is infected with the virus away from others, even in their home.

Who needs to isolate?
People who have COVID-19

**Quarantine** keeps someone who might have been exposed to the virus away from others.

Who needs to quarantine?
Anyone who has been in close contact with someone who has tested positive for COVID-19 from 2 days before symptoms started until isolation has been completed.

What do I do during quarantine?
- Watch for symptoms until 14 days after exposure.
- If you have symptoms, immediately self-isolate and contact your local public health authority or healthcare provider.

What counts as close contact?
- You spent at least 15 minutes within 6 feet of someone who has COVID-19
- You provided care at home to someone who is sick with COVID-19
- You had direct physical contact with the person (hugged or kissed them)
- You shared eating or drinking utensils
- Someone with COVID-19 coughed, sneezed, or otherwise had direct respiratory contact with you

Click here for a simple video explaining the difference between isolation and quarantine. 
## Kaiser Permanente medical documentation for leave

<table>
<thead>
<tr>
<th>Situation</th>
<th>Documentation</th>
</tr>
</thead>
<tbody>
<tr>
<td>Patient is evaluated by a physician</td>
<td>Work Status Form (WSF), Activity Prescription Form, or letter with instructions for return to work as appropriate</td>
</tr>
<tr>
<td>Patient is high risk for COVID-19</td>
<td>COVID-19 High-Risk Patient Letter</td>
</tr>
<tr>
<td>Patient is asymptomatic and not evaluated by a physician</td>
<td>Attestation between employee and employer</td>
</tr>
<tr>
<td>Patient needs to care for a sick relative</td>
<td>Documentation will need to be issued by the provider treating the patient in question, similar to other Family and Medical Leave Act (FMLA) requests</td>
</tr>
<tr>
<td>Patient exposed to COVID-19 from workplace</td>
<td>Workers’ compensation physician completes state-mandated physician’s first report of injury.²</td>
</tr>
</tbody>
</table>

Employers should consider not requiring a healthcare provider’s note for employees who are sick to validate their illness, qualify for sick leave, or return to work.”

— CDC, July 3, 2020

1. CDC, SARS-CoV-2 Testing Strategy: Considerations for Non-Healthcare Workplaces, accessed Oct 21, 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.
Update sick-day policies and documentation requirements

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 Equal Employment Opportunity Commission (EEOC) laws.

**Documentation**

- You’re limited in what you can request from an employee who calls in sick.
- You’re 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’re 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 the 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.
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 can use a [COVID-19 employee self-certification form](#) for return to work.¹

- 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.²

- Employers may require COVID-19 tests for specific industries and in accordance with state guidelines.³

- Employers may ask employees if they’re experiencing COVID-19 symptoms.⁴

- All information must be kept separate and secure.⁵

¹ [Colorado employers with >50 employees should also do on-site temperature checks](#). ² Experts’ alternative recommendations to temperature checks alone, See note 1. ³ [Sedgwick, Coronavirus Statutory State Updates](#). ⁴ [CDC, Symptoms of Coronavirus](#); [CDC, Symptoms Flyers – Multiple Languages](#). Note that symptoms are being updated regularly.⁵ [U.S. EEOC, Pandemic Preparedness in the Workplace and the Americans with Disabilities Act](#).


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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

<table>
<thead>
<tr>
<th>Topic</th>
<th>Considerations</th>
</tr>
</thead>
</table>
| **Who can take temperatures**              | • 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** | • 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**                                    | • 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**                    | • Ensure staff stays ≥6 feet apart while waiting to have their temperatures measured. |
| **Privacy considerations**                 | • 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.
The science around antibody testing is evolving

The accuracy of currently available antibody tests continues to vary, as risks remain for both false positives and false negatives.

As of now, there’s still limited information that an antibody test can provide. An antibody test:

- Can’t confirm if you’re currently sick with COVID-19
- Can’t confirm if you’re incubating COVID-19 after exposure
- Can’t accurately confirm if you’ve ever had COVID-19
- Can’t predict whether you’re immune to COVID-19

For these reasons, Kaiser Permanente isn’t currently recommending antibody testing and antibody test results shouldn’t be interpreted as medical clearance for return to work.
Additional resources and information

- **ADA**: The Americans with Disabilities Act is a federal civil rights law protecting people with disabilities from discrimination.

- **Job Accommodation Network**: Leading source for workplace accommodations and disability employment issues.

- **CDC**: Centers for Disease Control and Prevention
  - COVID-19 Testing Overview

- **DOL**: Department of Labor
  - **FMLA**: Family and Medical Leave Act
  - **EEOC**: The Equal Employment Opportunity Commission is a federal agency that enforces the sections of the ADA that prohibit employment discrimination.

- **FFCRA**: The Families First Coronavirus Response Act
  (Update: FFCRA wasn’t extended beyond December 31, 2020. However, if covered employers voluntarily provide these leave benefits through March 31, 2021, they’re eligible to take the tax credit for the leave.*)

- **Consolidated Appropriations Act – Summary**

  - **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

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

<table>
<thead>
<tr>
<th>Situation</th>
<th>Documentation issued by Kaiser Permanente</th>
<th>How members obtain documentation</th>
</tr>
</thead>
</table>
| An employee is **asymptomatic but at risk due to a preexisting condition** | 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.  
A WSF/letter is not issued as the individual is not symptomatic (unless the individual has specific limitations, in which case a WSF/letter will be issued). | The letter will be issued if the medical condition is already documented or once the member is evaluated by the provider.  
Members can request documentation through an e-visit or secure messaging at [kp.org](http://kp.org).  
The original letter and current CDC guidelines should be used for return-to-work documentation. |
| Employee is **exempt from wearing a mask**                                | None                                                                                                      | Employers with questions or concerns should refer to public health department guidelines for their industry. |
| Employee is **asymptomatic but has had exposure and is required to self-isolate** | None                                                                                                      | Documentation involves employee attestation of exposure, which can be made directly to the employer.  
A return-to-work notice will not be issued. The original attestation and CDC guidelines should suffice. |
## COVID-19 workplace scenarios (continued)

<table>
<thead>
<tr>
<th>Situation</th>
<th>Documentation issued by Kaiser Permanente</th>
<th>How members obtain documentation</th>
</tr>
</thead>
<tbody>
<tr>
<td>Employee is asymptomatic but needs leave to care for a sick relative or has a family member who is high risk</td>
<td>None</td>
<td>Documentation needs to be issued by provider treating the patient in question, similar to other FMLA requests. A return-to-work notice will not be issued. The original employee documentation and CDC guidelines should suffice.</td>
</tr>
<tr>
<td>An employee has been out for confirmed COVID-19</td>
<td>A WSF, ARx Form, or letter is issued</td>
<td>The WSF/letter provides return-to-work guidance. You and your employees should follow CDC guidance and physician instructions for safe return to work.</td>
</tr>
<tr>
<td>Patient exposed to COVID-19 from workplace</td>
<td>State-mandated physician’s first report of injury</td>
<td>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 other forms (if any) mandated by the state’s workers’ compensation laws that must come from the treating physician.*</td>
</tr>
</tbody>
</table>

*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:

90% of employers report the COVID-19 crisis is affecting the behavioral health and productivity of their workforce.¹

Employees who are able to consistently practice physical distancing at work have a significantly lower risk of anxiety or depression.²

² Occupational and Environmental Medicine, October 30, 2020.
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

Essential workers, first responders, and health care workers have high levels of stress and may experience burnout, stress, and even post-traumatic stress.

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.

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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.

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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.

How to handle post-election stress in the workplace:
The 2020 election has increased the potential for controversial conversations and greater tension at work. For guidance on how to handle workplace interactions and emotions, see SHRM and Harvard Business Review articles.
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:

- Those wearing or not wearing protective equipment (masks, gloves, etc.)
- 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
- People who return to work when they have or are recovering from COVID-19

Stigmatized groups may be subjected to:

- Abuse regarding their choice to wear or not wear masks
- 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

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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 (see additional resources at the end of this chapter)
- Thank first responders, essential workers, and health care 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

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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:

<table>
<thead>
<tr>
<th>Say</th>
<th>Don’t say</th>
</tr>
</thead>
<tbody>
<tr>
<td>Novel coronavirus (COVID-19)</td>
<td>Chinese, Wuhan, Asian Flu or Virus</td>
</tr>
<tr>
<td>People who have or are recovering from COVID-19</td>
<td>COVID-19 cases or victims</td>
</tr>
<tr>
<td>People who have or are being evaluated for COVID-19</td>
<td>COVID-19 suspects or suspected cases</td>
</tr>
<tr>
<td>People acquiring or contracting COVID-19</td>
<td>People infecting, transmitting, or spreading COVID-19</td>
</tr>
</tbody>
</table>
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

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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 and resources around building a psychologically healthy workforce: Scoresheet to take action
- Support to increase mental health awareness and reduce stigma through in-person and virtual mental health trainings
- 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

kp.org/workforcehealth
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.).

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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

<table>
<thead>
<tr>
<th>Well</th>
<th>Mild</th>
<th>Moderate</th>
<th>Severe</th>
</tr>
</thead>
</table>
| • Effective communication  
• Socially, spiritually active  
• Calm and confident  
• Strong and cohesive families  
• Emotionally and physically healthy | • Changes from normal behaviors  
• Poor focus, loss of interest  
• Irritable and pessimistic  
• Temporary and mild distress | • Unresolved loss, trauma, wear and tear, inner conflict  
• Social isolation  
• Sleeplessness and self-medicating  
• More severe and lasting effects | • 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.

kp.org/workforcehealth
Kaiser Permanente mental health and addiction medicine care phone numbers

<table>
<thead>
<tr>
<th>Regions</th>
<th>Mental health and addiction medicine</th>
</tr>
</thead>
<tbody>
<tr>
<td>California – Northern</td>
<td>1-800-464-4000</td>
</tr>
<tr>
<td>California – Southern</td>
<td>1-800-900-3277</td>
</tr>
<tr>
<td>Colorado</td>
<td>1-303-471-7700</td>
</tr>
<tr>
<td>Colorado – Southern</td>
<td>1-866-702-9026</td>
</tr>
<tr>
<td>Georgia</td>
<td>1-404-365-0966</td>
</tr>
<tr>
<td></td>
<td>1-800-611-1811</td>
</tr>
<tr>
<td>Hawaii – Oahu</td>
<td>1-808-432-7600</td>
</tr>
<tr>
<td>Hawaii – Neighbor Islands</td>
<td>1-888-945-7600</td>
</tr>
<tr>
<td>Mid-Atlantic States</td>
<td>1-866-530-8778</td>
</tr>
<tr>
<td>Northwest</td>
<td>1-855-632-8280</td>
</tr>
<tr>
<td>Washington</td>
<td>1-888-287-2680</td>
</tr>
</tbody>
</table>

Kaiser Permanente National EAP Provider Helpline: 1-888-677-9993
**Additional resources for employers**

**Workforce mental health resources:**

- Mental Health First Aid
- Working Well toolkit – Leading a Mentally Healthy Business
- Coronavirus/COVID-19: Mental Health & Wellness webinar series
- Kaiser Permanente Mental Health and Wellness Insights articles
- [business.kp.org/coronavirus](http://business.kp.org/coronavirus)

**General mental health resources:**

- CDC: [Stress and coping with COVID-19, Reducing Stigma](https://www.cdc.gov/stress/coping.html)
- NAMI: [Resource and information guide on mental health related to COVID-19](https://nami.org/COVID-19)
- APA: [Resources for supporting mental health](https://www.apa.org/helpcenter/maintaining-happiness)
- Mental Health America
- American Foundation for Suicide Prevention

- [FindYourWords](https://www.findyourwords.org): Stigma reduction
- [kp.org/mentalhealth](https://kp.org/mentalhealth): Mental health support
- [kp.org/selfcare](https://kp.org/selfcare) or [kp.org/selfcareapps](https://kp.org/selfcareapps): Self-care and resilience tools
- Kaiser Permanente [Managing Stress and Anxiety](https://kp.org/workforcehealth) resource
Additional resources to share with your employees

- **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**: Support for people in crisis. Text "NAMI" to 741741 to chat with a trained crisis counselor, 24 hours a day, 7 days a week. English only.
- **GriefShare**: Find 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**: Offers multilingual support for emotional distress due to the pandemic. Call 1-800-985-5990, 24 hours a day, 7 days a week, or 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**
Additional resources to share with your employees (continued)

• The National Sexual Assault Telephone Hotline: Call 1-800-656-HOPE (1-800-656-4673) to connect with a trained staff member in your area.

• The Partnership for Drug-Free Kids Helpline: Call 1-855-378-4373 if you’re having difficulty accessing support for your family or a loved one struggling with addiction during COVID-19.

• The Steve Fund: Young people of color can text “STEVE” to 741741 to connect with a trained crisis counselor, 24 hours a day, 7 days a week.

• The Trevor Project Resources: Call 1-866-488-7386, instant-message a counselor on their website, or text “START” to 678678, 24 hours a day, 7 days a week, if you’re a young person in crisis, feeling suicidal, or in need of a safe and judgment-free place to talk.

• 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, 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:

- Nationwide, 12% of households sometimes or often don’t have enough food to eat (as of July 21, 2020).¹
- Nearly half of those with social needs reported a negative mental health impact from COVID-19.²

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 80%.
2. Also known as basic human needs.
Social and economic factors can impact employees in many ways

COVID-19 has affected your employees in ways beyond physical health. They may be struggling with one or more of the following:

<table>
<thead>
<tr>
<th>Transportation</th>
<th>Housing</th>
<th>Food</th>
<th>Finances</th>
<th>Discrimination</th>
</tr>
</thead>
<tbody>
<tr>
<td>Physical safety</td>
<td>Social connections</td>
<td>Technology access</td>
<td>Child care and elder care</td>
<td>Job security</td>
</tr>
</tbody>
</table>

kp.org/workforcehealth
Gather insights into your employee population

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
- Trends in requests for time off, vacation days, or flexible work schedules
- Trends in the use of child care and elder care benefits
- Types of unmet social needs your employees share with wellness champions, their unions, employee resource groups, and other groups in the workforce
- 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: Low-wage thresholds may vary by region.

kp.org/workforcehealth
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, etc.).

- **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 or findhelp.org. Leverage Kaiser Permanente’s Thrive Local Connections call center (see additional details later in this chapter).

* Consider extra assistance for vulnerable employee groups:

As you assess your workforce, try to anticipate the needs of vulnerable populations, workers returning to work after furlough, and those earning lower wages. Already vulnerable populations are more likely to experience the health and economic impacts of COVID-19 (Source: Kaiser Family Foundation).
Help working parents with school-age children

Working parents with school-age children are juggling a lot. Below are some ways you can support them:

- **Enact core hours** and/or no-meeting days
- **Consider paid family care** days
- **Offer discounted rates** from company-approved tutoring companies
- **Encourage managers** to keep open communication, be empathetic, and check in frequently with staff (especially around priorities, deadlines, and performance expectations)
- **Ensure the same or similar child care** assistance options are available to both your remote and in-person workforces
- **Implement or expand backup care** benefits
- **Offer grants** to help employees pay for child care services
- **Offer virtual internships** for high school and college students
- **Help employees navigate** community resources, including what your EAP offers (such as child care referrals)
- **Offer on-site or near-site child care** services in line with federal and local guidelines
- **Establish a virtual** working parents’ support group
- **Offer virtual before-school or after-school activities** (such as kid-oriented webinars or daily challenges such as scavenger hunts or art activities)
- **Offer flexible/modified** work schedules
- **Help employees navigate leave-of-absence policies** and adjust them as necessary to meet their needs

**Note:** Before you enact any of the recommendations above, solicit feedback and ideas from parents and employee resource groups to avoid spending time and resources on the wrong approach. Partner with different stakeholders in your organization to figure out what you can offer and quickly operationalize. For more information, review Business Group on Health’s “Employer Role in Supporting Working Parents During COVID-19 Pandemic” and Harvard Business Review’s “What Working Parents Need from their Managers” articles.
Case study: Kaiser Permanente’s child care assistance

Company information:
Goal: Help working parents with school-age children find high-quality, affordable child care and manage their stress
Employees: 217,000  Locations: Multiple  Job functions: Diverse

COVID-19 child care grant
• Temporary $200–$300/week grant to help pay for child care costs
• Employees are responsible for finding their own child care provider
• Eligibility requirements: Must have a child under age 14, be required to physically report to work for health care or administrative jobs, and sign an attestation regarding their eligibility for the grant

Child care referrals
• Offer personalized child care referrals (including child care programs fully or partially subsidized by Kaiser Permanente)
• Negotiated discounted rates for employees with several organizations, such as KinderCare Learning Centers, that operate day care centers

Town halls
• Kaiser Permanente’s EAP held a recorded town hall on how parents can cope with working remotely while helping their children adjust to remote learning
• Provided an opportunity for parents to connect, feel validated in their shared experiences, and learn from one another

Other
• Offer free and confidential one-on-one counseling sessions with EAP providers
• HR department offers guidance on how to submit changes to dependent care flexible spending accounts

kp.org/workforcehealth
Normalize conversations about need and assistance

Like with mental health, there’s 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” and “Many people are struggling.”

Consider offering additional assistance like:

- **Leveraging EAPs, wellness champions, unions, or employee resource groups** 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

kp.org/workforcehealth
Reduce stigma through words

Person-first language helps avoid generalizations, assumptions, and stereotypes by defining someone by their abilities and experiences instead of their condition or disability. Keep the following in mind when talking to, and about, your employees:

<table>
<thead>
<tr>
<th>Say</th>
<th>Don’t say</th>
</tr>
</thead>
<tbody>
<tr>
<td>Workers experiencing homelessness, workers struggling with housing</td>
<td>Homeless workers</td>
</tr>
<tr>
<td>issues, workers without stable housing</td>
<td></td>
</tr>
<tr>
<td>Workers in need of assistance</td>
<td>High-needs workers</td>
</tr>
<tr>
<td>People whose incomes are below the federal poverty threshold,</td>
<td>Poor people, low-wage workers</td>
</tr>
<tr>
<td>workers earning lower wages</td>
<td></td>
</tr>
<tr>
<td>Workers experiencing food insecurity, workers struggling with</td>
<td>Food-insecure workers, workers without</td>
</tr>
<tr>
<td>hunger issues</td>
<td>food, hungry workers</td>
</tr>
<tr>
<td>Communities with scarce or limited resources, underserved</td>
<td>Inner city, poor communities</td>
</tr>
<tr>
<td>communities</td>
<td></td>
</tr>
<tr>
<td>People with less than a high school education</td>
<td>High school dropouts</td>
</tr>
</tbody>
</table>
Understand the disproportionate impact of COVID-19 on communities of color

Although COVID-19 has affected all communities and industries, it has a greater impact on communities of color. This exacerbates preexisting health, racial, and economic inequities.

Systemic inequalities influence a person’s overall health.¹ They can include:

<table>
<thead>
<tr>
<th>Living conditions</th>
<th>Social and economic factors</th>
<th>Health and access issues</th>
</tr>
</thead>
<tbody>
<tr>
<td>• Living in densely populated areas</td>
<td>• Facing stigma and systemic racism</td>
<td>• Delaying care due to cost, inability to take time off, distrust of the health care system, etc.</td>
</tr>
<tr>
<td>• Residing farther from grocery stores and medical facilities</td>
<td>• Worrying about paying monthly bills</td>
<td>• Having underlying medical conditions (asthma, diabetes, etc.)</td>
</tr>
<tr>
<td>• Living in multigenerational homes</td>
<td>• Working in industries that are more vulnerable to job loss during COVID-19 (leisure, hospitality, retail, etc.)</td>
<td>• Having fair or poor health</td>
</tr>
<tr>
<td>• Experiencing racial residential segregation</td>
<td>• Having little or no paid sick leave</td>
<td>• Being uninsured</td>
</tr>
<tr>
<td>• Living within areas that have greater exposure to air pollution and other environmental toxins (see this infographic for more context)</td>
<td>• Working in high-contact, lower-paying positions (nursing assistants, cooks, etc.)</td>
<td></td>
</tr>
</tbody>
</table>

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.
Ensure equitable care and leverage 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 excellence
- 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

Black Americans are:

<table>
<thead>
<tr>
<th>% of U.S. population</th>
<th>% of COVID-19–related deaths</th>
</tr>
</thead>
<tbody>
<tr>
<td>13%</td>
<td>23%</td>
</tr>
</tbody>
</table>

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. \(^3\)

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1. This serves as one case study. Other communities, including Latino and Native American populations, 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.

kp.org/workforcehealth
Provide access to convenient telehealth options

Despite the strict safety measures most medical facilities have in place, employees may worry about going into a facility. Additionally, access to transportation can be a barrier to getting care. For your employees who are Kaiser Permanente members, remind them of the many ways they can seek care without an in-person visit:

- Clinical advice
- Video visit
- Mobile app and kp.org
- E-visit
- Online chat
- Phone appointment

- Email
- Online self-care
- Online physical therapy
- Remote patient monitoring
- Prescriptions by mail

Telehealth helps your employees stay on top of their health care needs. Especially right now, it’s vital that your team members don’t delay needed care; managing chronic conditions and preventive care is more important than ever.

1. Our 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. The chat feature isn’t available in all regions; bilingual materials and interpreter services are available. 4. Some households may not have reliable enough internet where they live for video visits, or they may feel more comfortable using the phone option.
Highlight telehealth as an approach to reduce disparity

Telehealth eases the burden for people in underserved neighborhoods to access care. During the pandemic, members from underserved neighborhoods adopted telehealth at a higher rate than members in less-deprived areas. Now, both use telehealth at about the same rate.¹

In some places, least-deprived members had significantly higher telehealth use than members from more deprived areas. During COVID-19, that margin shrank.²

Telehealth breaks socioeconomic and equity barriers by:
- Lowering care costs and increasing engagement
- Offering more timely care to people who have higher risk of poor health outcomes
- Helping members avoid expensive, unnecessary emergency room and urgent care visits
- Ensuring continuity of care without the need for in-person appointments
- Helping to address preexisting medical conditions in the most vulnerable populations
- Providing affordable care options to patients of color, who are less likely to have access to health care, and less likely to seek needed care


 kp.org/workforcehealth
Support 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.

kp.org/workforcehealth
Engage your community

Get involved in community projects where your employees live and where your business is physically located.

- **Refocus your community giving strategy** — Think about how to leverage your charitable giving and philanthropy to address COVID-19. Identify the top counties or ZIP codes where your employees live. Target your efforts to supporting resources in those communities.

- **Provide in-kind contributions** — Consider donating your services to support local businesses, including child care centers, to help them sustain their operations during the pandemic. Also consider giving grants through a corporate giving program or foundation.

- **Organize COVID-19-related volunteer activities** — Corporate volunteerism increases employee satisfaction and provides a personal sense of fulfillment. There are many volunteer organizations (American Red Cross, local food banks, etc.) and state-run websites that provide information on how you can safely help your community during this difficult time.
Consider how to minimize your environmental impact

As you have capacity, commit to sustainable practices:

• **Reassess your climate change strategy** — Communities close to high-traffic roadways and industrial sources of pollution have higher rates of respiratory disease, making them more susceptible to the impacts of COVID-19. Adapt climate plans to optimize air pollutant reduction.
  
  – Reduce the use of fossil fuels in your operations and supply chain to decrease greenhouse gases while improving local air quality.
  
  – Acknowledge reductions in greenhouse gas emissions you may have already made through travel restrictions, remote work policies, etc.

• **Review your use of plastics** — The pandemic has resulted in increased use of disposable plastics. To avoid long-term health impacts from plastic pollution, create a plan to purchase reusables and nonplastic materials. See the [World Economic Forum](https://www.weforum.org/) for more resources.

While the COVID-19 crisis has reduced emissions, it won’t slow climate change if emission reductions are only temporary. Long-term commitments to improving the health of the environment are needed. [Watch this video](https://www.kp.org/) to learn how Kaiser Permanente achieved carbon neutrality in 2020.

[kp.org/workforcehealth](https://www.kp.org/workforcehealth)
Kaiser Permanente addresses social health at the individual level

It starts on an individual level, connecting people directly to services and nonprofits to make sure they have things like basic nutrition and a safe, stable place to live. As part of our strategy to respond to the pandemic in an equitable manner, Kaiser Permanente launched the following new resources:

<table>
<thead>
<tr>
<th>Social Health Playbook</th>
<th>Thrive Local Connections</th>
</tr>
</thead>
<tbody>
<tr>
<td>Guidelines to help care teams screen COVID-19 patients for social risks, connect them to resources, and coordinate care.</td>
<td>A national call center to help Kaiser Permanente members address social factors affecting their health.</td>
</tr>
<tr>
<td>Access the <a href="https://kp.org/workforcehealth">Kaiser Permanente Social Health Playbook</a> for more detail.</td>
<td></td>
</tr>
</tbody>
</table>

Watch this [video](https://kp.org/workforcehealth) on how Kaiser Permanente is making sure our members know their social health is just as important as their physical health.

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Kaiser Permanente social needs survey results:

- **3 in 5** members have had at least 1 social factor (food, isolation, job loss) they needed help with.
- **42%** of members struggle to buy food and pay bills.
- **35%** of members experience social isolation.

1. Preliminary data as of July 2020 with a sample size of 8,801

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kp.org/workforcehealth
Kaiser Permanente addresses social health at the local, community level

Addressing social health on a community level means working on local factors to make communities healthier places to live, work, learn, and play. A few of these initiatives include:

**Thrive Local**
Bridging the gap between health care and social service providers to connect people to local resources and create healthier communities

**Housing For Health**
Investing to create more affordable housing, reduce the displacement of lower- and-middle-income households, and end homelessness through access to long-term, supportive housing

**Food For Life**
Addressing the economic, social, and policy factors affecting access to food so people across the nation can both get – and afford – healthy food

**Economic Opportunity**
Supporting workforce development programs and investing in diverse suppliers and local businesses to create more equitable communities

kp.org/workforcehealth
Curated resources and information

**Employer resources to support community and workforce health**
- Healthy Workplaces, Healthy Communities
- Kaiser Permanente Community Health Needs Assessment
- Business for Social Responsibility
- Business Group on Health
- Thrive Local Connections overview flyer

**General resources for employees**
- Social health assistance: findhelp.org, helpwhenyouneedit.org, 211.org (by phone: 211)
- Financial resources: Consumer Financial Protection Bureau, SaverLife, MyMoney.gov
- Child care: Child Care Aware of America
- Transportation: CDC guidance on how to Protect Yourself When Using Transportation

**Kaiser Permanente resources for employees**
- 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: 1-800-443-6328 (TTY 711), Monday through Friday, 8 a.m. to 5 p.m.
- Kaiser Permanente social health page on kp.org
- Thrive Local Connections member postcards (in English and Spanish)
Resource for Kaiser Permanente members

Thrive Local Connections

If someone needs access to resources, Kaiser Permanente can help. Thrive Local Connections connects individuals to support in their community confidentially and at no cost.

Live agents to assist with the following services:

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

National call center for Kaiser Permanente members

1-800-443-6328 (TTY 711)
Monday through Friday, 8 a.m. to 5 p.m. local time*

*Hours may vary. Thrive Local Connections hours in the Northwest area are Monday through Friday, 8 a.m. to 4:30 p.m.
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

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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

5.3 kp.org/workforcehealth
Communicate safety measures clearly and frequently

Clear and consistent communication can help mitigate employees’ future concerns. You may need to create new communication channels, align communications with your union partners to ensure consistent messaging, and repeat messages several times. People are distracted with lots of demands right now. Be patient with employees and look for easy ways to help them find information that’s relevant and timely.

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

**Recommendations:**

- Share with employees what measures you’re taking to protect them
- Remind employees of the symptoms of COVID-19 and urge them to seek medical attention if they experience symptoms
- Err on the side of transparency by informing employees of confirmed COVID-19 cases in the workplace while maintaining employees’ privacy
- [Steps to take after an employee’s COVID-19 diagnosis](https://www.shrm.org) (SHRM)
- [Mitigation strategies for employers](https://www.law.com) (law.com)
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

kp.org/workforcehealth
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.
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

**Fidelity**
- 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”

kp.org/workforcehealth
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.
• 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

Department of Labor (family and medical leave, wage and hour)
- Coronavirus resources regarding workplace safety, wages, hours, and leave

EEOC (disability accommodation, privacy)
- What you should know about the ADA, the Rehabilitation Act and the coronavirus
- 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

Centers for Medicare & Medicaid Services (CMS)
- TriAgency Guidance (June 23, 2020)
Federal, state, and local guidance and considerations

- Review your state Department of Public Health and governor’s websites for the latest regulations and recommendations for business operations and for 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.
- Stay informed on the latest CDC guidance for workplaces and businesses.
## Regional information, resources, and guidance

<table>
<thead>
<tr>
<th>Region</th>
<th>Main COVID-19 websites for resources &amp; info</th>
<th>Specific regulatory guidance</th>
<th>Legislative changes</th>
</tr>
</thead>
<tbody>
<tr>
<td>California</td>
<td>CA COVID-19 Response Portal</td>
<td>Cal/OSHA Guidance on Requirements to Protect Workers From Coronavirus</td>
<td>SB 1159 legislative information</td>
</tr>
<tr>
<td></td>
<td>CA COVID-19 Response Toolkit</td>
<td>Cal/OSHA COVID-19 Emergency Temporary Standards-What Employer Need to Know</td>
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<td>Department of Fair Employment and Housing — Resources and Guidance</td>
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<td></td>
<td>• DFEH Employment Information on COVID-19 (disability accommodation, privacy)</td>
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<td>Labor Commissioner COVID-19 Information</td>
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<td>• FAQs on Laws Enforced by the California Labor Commissioner’s Office (paid sick leave, school closure leave, wages, and hours)</td>
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<td>Employment Development Department (state disability, unemployment)</td>
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<td>California Executive Order on Workers’ Compensation Coverage</td>
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<tr>
<td>Colorado</td>
<td><a href="https://www.colorado.gov/pacific/covid-19">Colorado COVID-19 Response Portal</a></td>
<td>Current list of public health and executive orders</td>
<td>Proposition EE</td>
</tr>
<tr>
<td></td>
<td><a href="https://www.colorado.gov/pacific/covid-19">Colorado COVID-19 Response Toolkit</a></td>
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<tr>
<td>Georgia</td>
<td><a href="https://www.georgia.gov/coronavirus">Georgia COVID-19 Response Portal</a></td>
<td>Georgia Department of Labor</td>
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<td></td>
<td><a href="https://www.georgia.gov/coronavirus">Georgia COVID-19 Response Toolkit</a></td>
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<tr>
<td>Hawaii</td>
<td><a href="https://www.hawaii.gov/covid-19">Hawaii COVID-19 Response Portal</a></td>
<td>State Department of Labor</td>
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</tr>
<tr>
<td></td>
<td><a href="https://www.hawaii.gov/covid-19">Hawaii COVID-19 Response Toolkit</a></td>
<td>State Department of Human Services</td>
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<td>State Department of Transportation: Airports</td>
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<td>Economic and Community Navigator website</td>
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<td>FEMA Public Assistance Program via HI-EMA website</td>
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<td>Maryland</td>
<td><a href="#">Maryland COVID-19 Response Portal</a></td>
<td><a href="#">Maryland Coronavirus (COVID-19) Information for Business portal</a></td>
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<td></td>
<td><a href="#">Maryland COVID-19 Response Toolkit</a></td>
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<tr>
<td>Oregon</td>
<td><a href="#">Oregon COVID-19 Response Portal</a></td>
<td><a href="#">Oregon Bureau of Labor &amp; Industries guidance on COVID-19</a> (as it relates to the state’s predictive scheduling law)</td>
<td>Proposition 108</td>
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<td></td>
<td></td>
<td><a href="#">Updated general guidance for employers regarding COVID-19</a> and added sector-specific guidance for retail stores, child care operations, transit agencies, and school-age summertime day camps.</td>
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[6.6 kp.org/workforcehealth](#)
## Regional information, resources, and guidance

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<tr>
<td>Virginia</td>
<td><a href="#">Virginia COVID-19 Response Portal</a></td>
<td>Department of Labor and Industry VOSH Hazard Alert for employers (<a href="#">providing information and guidance on COVID-19 in the workplace</a>)</td>
<td><a href="#">Department of Labor and Industry COVID-19 portal</a></td>
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<tr>
<td></td>
<td><a href="#">Virginia COVID-19 Response Toolkit</a></td>
<td><a href="#">Department of Labor and Industry COVID-19 portal</a></td>
<td><a href="#">Department of Professional and Occupational Regulation COVID-19 portal</a></td>
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<tr>
<td></td>
<td><a href="#">Washington COVID-19 Response Toolkit</a></td>
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<td></td>
<td><a href="#">Washington D.C. COVID-19 Response Toolkit</a></td>
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*Please note: The websites and resources mentioned are subject to change. For the most up-to-date information, please visit the respective websites.*
Chapter 7

Business spotlights

Your workforce has unique needs and safety concerns. Help ensure the health of your employees, and your business, as you continue to modify and manage your workplace operations.

Key takeaways:

Review business-specific health and safety guidance for the following work environments:

- Administrative and office work
- Small business
- Industries
  - Construction
  - Grocery and essential retail
  - Health care
  - Hospitality
  - K-12 education
  - Manufacturing
  - Public safety and first responders
  - Public services
  - Transportation

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Introduction and purpose

As COVID-19 restrictions change, you’re managing evolving health concerns and regulations to sustain and regain productivity. Every industry faces diverse challenges, varying from constrained workspaces to working with vulnerable populations or large groups of people. Some businesses are making small daily adjustments while others have significantly altered operations.

This section will help identify unique challenges and recommendations for each of the industries profiled.

The industry section of the playbook is meant to be used in conjunction with the main sections of the playbook. It 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.
Administrative and office work overview

The administrative and office work sector spans multiple industries and job functions including clerical work, technology development, call centers, executives, and assistants.

Unique COVID-19 challenges and opportunities for administrative and office work:

- Many office workplaces can be crowded
- Offices often require elevator or stair access that can get crowded
- Large open-plan workplaces with many people in one large room
- Meeting rooms and break rooms that don't allow for physical distancing
- Sharing of equipment, such as printers and copy machines
- In a unionized workforce, aligning communications, policies, and resources is essential for greater support and greater impact
Administrative and office work guidance and considerations

General administrative and office work considerations that can help reduce risk of exposure to the coronavirus:

- Arrange chairs in communal seating areas by turning, draping (covering chairs with tape or fabric so seats can’t be used), spacing, or removing chairs to maintain physical distancing.
- Use methods to physically separate employees in all work areas and other parts of the facility, such as meeting rooms, break rooms, parking lots, entrance and exit areas, and locker rooms.
- Consider using portable high-efficiency particulate air (HEPA) fan/filtration systems to help enhance air cleaning and circulation.
- Set an example at all levels of management by practicing proper mask wearing, hand-washing, and physical distancing.
- Stagger shifts, start times, and break times as feasible to reduce the density of employees in common areas, such as break rooms, elevators, and staircases.
- Provide employees with disposable wipes and other cleaning materials so they can properly wipe down frequently touched surfaces before each use.
- Limit use and occupancy of elevators to maintain physical distancing of at least 6 feet.
- Encourage the use of outdoor seating areas and physical distancing for any small group activities, such as lunches, breaks, and meetings.
- Try to set up a safety council for your worksite that includes representatives from different job functions.
- Reinforce communication and support employees who raise concerns when safety guidelines aren’t being followed, such as physical distancing, cleaning and disinfecting, wearing a face covering, or other local guidelines.
- Confer with your partner unions to help ensure your health and safety messages align to avoid mistrust or confusion.
- Note that in represented workplaces, these changes may be subject to bargaining.
Administrative and office work resources

- CDC interim guidance for businesses and employers responding to the coronavirus (January 2021)
- OSHA guidance for preparing workplaces for COVID-19
- Office and Professional Employees International Union
Small business overview

As of 2019, there were **31.7 million** small businesses in the United States, making up **99.9%** of all businesses nationwide and employing nearly half of all U.S. employees.*

**Unique COVID-19 challenges and opportunities for small businesses:**

- Limited staff to process and implement new policies and procedures related to COVID-19 regulations
- Increased workloads due to potentially infected workers needing recovery time or time to care for family
- May need to quickly adjust daily operations to sustain business viability
- Limited cash flow
- Strong community with other small businesses

*"2020 Small Business Profile," U.S. Small Business Administration.**
Small business guidance and considerations

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

- Identify and provide leadership support for a workplace coordinator who will be responsible for COVID-19 issues and their impact at the workplace.

- Establish an emergency communications plan. Identify key contacts, backup contacts, chain of communications, and processes for tracking and communicating business and employee status.

- Research and apply for all possible funding and financial relief options available to you and your business. Consider additional CARES Act resources, such as:
  - Emergency relief measures
  - New funding options

- Evaluate the Family and Medical Leave Act (FMLA) and the new Consolidated Appropriations Act, 2021. Employers are eligible to take advantage of tax credits for paid leaves to employees for a certain period of time.

- Use these unprecedented times as a new opportunity to innovate with your business. Look into new markets and services, consider your virtual options, monitor your online security processes, and network with other business owners.
Small business resources

- U.S. Chamber of Commerce Small Business Council
- U.S. Small Business Administration
- CDC: COVID-19 resources for small business
- CDC: COVID-19 toolkit for worker safety and support
- Paychex: Return-to-work resources by state
- Littler: Return-to-work protocols by state
- ADP: COVID-19 Small Business Resource Center
- Thomson Reuters: Small Business COVID-19 Resource Center
- Workest: Return-to-work and DIY resources
- CA.gov: Industry guidance to reduce risk, including guidance by California counties
- BizBuySell: Learning Center resources for small business owners
- Travelers: Preparing your small business to reopen
- U.S. Securities and Exchange Commission: COVID-19 resources for small businesses
- U.S. Department of Labor: Occupational Safety and Health Administration FAQs for small business employers
- Aunt Bertha: Social care network for free or reduced-cost services

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Construction overview

The construction industry includes carpenters, ironworkers, electrical workers, pipefitters, laborers, and more.

Unique COVID-19 challenges and opportunities in construction:

- Consistently changing worksite environments
- Multiple teams coordinating in changing conditions
- An established culture of safety meetings and safety monitors
- A highly unionized workforce, with communications, policies, and resources that need to be aligned for greater impact and support
Construction company guidance and considerations

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

- Add tips, reminders, and new COVID-19 safety information to daily safety and toolbox meetings.
- Assign a COVID-19 safety officer/monitor/ambassador to implement safety plans and identify and solve for new challenges.
- Confer with your partner unions to ensure your health and safety messages align to avoid mistrust or confusion.
- 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. All employees should maintain physical distancing while inside trailers.
- Identify distancing choke points and encourage alternatives — for example, using the stairs to limit the number of people in a hoist or elevator.
- 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.

- Allow employees to wear masks over their nose and mouth to prevent spreading the virus.
- Use EPA-approved cleaning chemicals from List N or that have label claims against the coronavirus.
- Provide materials and instruct employees to use recommended methods to clean all tools, and especially shared tools, before and after use.
- 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 job site toilets regularly. Hand sanitizer dispensers should be filled regularly. Frequently touched items (e.g., door pulls and toilet seats) should be disinfected.
- Consider implementing staggered work and lunch schedules.
- Encourage workers to report any safety and health concerns.
- Promote personal hygiene. If workers do not have immediate access to soap and water for hand-washing, provide alcohol-based hand rubs containing at least 60% alcohol.
Construction company resources

- [OSHA Guidance and Checklist](kp.org/workforcehealth)
- [Staggered Work Schedules](kp.org/workforcehealth) — OSHA and EEOC Guidance
- [Recommended COVID-19 Response Plan for Construction Employers](kp.org/workforcehealth)
- [CDC Construction guidelines](kp.org/workforcehealth)
- [North America’s Building Trades Union tip sheet for worksite COVID-19 safety](kp.org/workforcehealth)
- [United Brotherhood of Carpenters and Joiners of America recommendations](kp.org/workforcehealth)
Grocery and essential retail overview

Grocery and retail workers include cashiers, shelf and display stockers, pharmacists, cleaners, and floor security.

Unique COVID-19 challenges and opportunities for grocery and retail:

- Ongoing indoor interaction with the public
- Narrow aisles
- Frequent need to restock and straighten shelves and display areas
- Money/payment exchange
- A highly unionized workforce, with communications, policies, and resources that need to be aligned for greater impact and support
Grocery and essential retail worker guidance and considerations

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

- Post signage with healthy habits to be seen by both the employees and customers (e.g., bathrooms, entrance, time clock).
- Close self-serving food bars and bulk-bin options.
- Close fitting rooms.
- Provide a place to wash hands and/or alcohol-based hand rubs containing at least 60% alcohol.
- Maintain regular housekeeping practices, including routine cleaning and disinfecting of surfaces.
- Enforce physical distance between co-workers and customers and mask-wearing for the safety of the workers who are exposed in closed spaces over long periods of time.
- Configure partitions with a pass-through opening at the bottom of the barrier in checkout lanes, using customer service desks as a barrier shield, if possible.
- Limit checkout to every other lane to help with physical distancing.
- Encourage customers to use touchless payment options and move the electronic payment terminal farther away from the cashier.

- Use verbal announcements on the loudspeaker and place signage throughout the establishment to remind employees and customers to maintain distance and wear masks.
- Place visual cues, such as floor decals, colored tape, or signs, to indicate to customers where to stand during checkout.
- Shift primary stocking activities to off-peak hours or after-hours to reduce contact with customers.
- Confer with your partner unions to ensure your health and safety messages align to avoid mistrust or confusion.

- Share safe customer shopping tips with shoppers:
  - Make fewer trips to the store by balancing fresh produce and other perishable items with other shopping items. Bring a list.
  - Try to coordinate shopping needs with friends/neighbors and take turns making trips. Be sure to physically distance when exchanging groceries.
  - Wash your hands before leaving home to cut down on spreading germs.
  - If possible, have one person in the household go shopping while others stay at home.
  - Always wear a mask while in the store to protect yourself and others.
  - Bring your own hand sanitizer and wipes, if you can.
  - Try not to touch your face while shopping, and wash your hands or use hand sanitizer after you’re done.
  - Stay 6 feet away from other customers and workers.
  - Avoid cash transactions, if possible.
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
- Shop Smart Guidelines
Health care overview

Health care professionals include clinic, hospital, nursing, and long-term care employees, patients, residents, and families, including medical professionals (doctors, nurses, medical assistants, etc.), clerical staff, housekeeping and cleaning crews, food services, facility services, and more.

**Unique COVID-19 challenges and opportunities for health care:**

- A mixture of COVID-19 patients and other patients
- Patients who are especially vulnerable to COVID-19
- A large and essential workforce
- Family and friends who want to visit patients
- Multiple 24-hour shifts for hospital employees
- A highly unionized workforce, with communications, policies, and resources that need to be aligned for greater impact and support
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-19 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 to continue wearing PPE.
- Place signage throughout the facility to remind employees and patients to physically distance, wear masks, and follow protocols.
- 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, patients, and visitors for COVID-19 symptoms to rapidly identify for possible COVID-19 per CDC guidelines.
- Develop protocols for staff, patients, and visitors entering with COVID-19 symptoms or a temperature.
- Develop enhanced cleaning procedures for high-touch areas and inspect with ATP protocols when needed.
- Regularly disinfect all facilities and equipment following CDC guidelines.
- Continue to increase testing capabilities at health care facilities to ensure the incoming patients and staff are COVID-19 symptom–free before attending medical procedures.
- Confer with your partner unions to ensure your health and safety messages align to avoid mistrust or confusion.

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 personnel with confirmed or suspected COVID-19

Below are some 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 always wear a face mask for source control while in a health care facility — until all symptoms are completely resolved or 10 days after illness onset, whichever is longer. They should use a face mask instead of a cloth face covering for source control during this time period while in the facility. After this time period, they should revert to their facility policy regarding universal source control during the pandemic. Of note:
  - A face mask for source control does not replace the need to wear an N95 or higher-level respirator (or other recommended PPE) when indicated, including when caring for patients with suspected or confirmed COVID-19.
  - N95 or other respirators with an exhaust valve might not provide source control.

- Restrict HCP contact with severely immunocompromised patients (e.g., transplant, hematology-oncology) until 10 days after illness onset.

- Make HCP self-monitor for symptoms and seek reevaluation from occupational health if respiratory symptoms recur or worsen.

- Clearly identify medical equipment and PPE as single use, reusable washable, and extended use, and train for a disinfection, decontamination, and documentation system.

- Continue to carefully separate waste as required by regulatory agencies (biohazardous, sharps, confidential, etc.).

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Health care worker resources

CDC:
- [COVID-19 information for health care professionals](kp.org/workforcehealth)

United Steelworkers:
- [COVID-19 guide for health care professionals not in direct contact with patients](kp.org/workforcehealth)
Hospitality overview

Hospitality workers include staff in hotels, gaming halls and casinos, restaurants, and vendors at sporting arenas.

Unique COVID-19 challenges and opportunities for hospitality:

- Housing first responders, health care workers, people without housing, and other at-risk guests
- Providing and serving food indoors and outdoors to the public
- Cleaning rooms during and after long-term visits by high-risk guests
- Kitchens with small or crowded work areas
- Exchanging payment and tips
- A somewhat unionized workforce, with communications, policies, and resources that need to be aligned for greater impact and support
Hospitality industry guidance and considerations

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

- If 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.
- Facilities should appoint a COVID-19 Response Facilitator responsible for all compliance on each shift.
- Display appropriate signage prominently, outlining proper mask usage and current physical distancing practices in use throughout the facility. Provide masks for guests and employees.
- Arrange break areas, employee dining rooms, training areas and locker rooms so that all workers can maintain a 6-foot separation. Where this isn’t possible, stagger break times as much as practicable.
- Use touch-free time clocks.
- Use delivery, a drive-through window, or curbside pickup when possible, for restaurants and hotels with restaurants.
- Don’t use valet services. Employees shouldn’t open customers’ vehicle doors.
- Inspect all plumbing and HVAC systems to ensure their healthy operation.
- Confer with your partner unions to ensure your health and safety messages align to avoid mistrust or confusion.
Restaurant worker guidance and considerations

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

- Reconfigure kitchens wherever practical to create six feet of spacing between stations. Where six feet of spacing between stations is not possible, consider staggered shifts.
- Replace extremely high-touch items (menus, salt/pepper shakers, etc.) with disposable items.
- Suspend buffets and other self-service options (water, soda, coffee dispensers, etc.) except where meals are made available in sealed containers.
- Set up designated pickup areas inside or outside food establishment.
- Offer curbside pickup or to place orders in vehicle trunks.
- Implement contactless tipping systems.
- Provide safe delivery:
  - 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 risk of exposure to the coronavirus:

- Utilize touchless check-in and check-out procedures.
- Recommend that trained personnel should perform non-intrusive thermal screening on guests and employees upon entry into the facility.
- Remove unnecessary items from guest rooms and consider alternatives to high-touch items, such as television remote controls.
- Organize lobbies to promote six-foot separation of guests, including floor markers. Consider plexiglass sneeze guards at front desk counters.
- Wash all 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.
- Fitness centers, spas, pools, and other recreational rooms should remain closed until public health authorities provide direction that they may be operated safely. Upon opening, these operations should be thoroughly cleaned and sanitized multiple times per day.

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Hospitality resources

- Reopening Checklist for Corporate Executives: Hospitality
- Critical COVID-19 Guidance Standards for Hospitality Reopening (Florida)
- California Hotel & Lodging Association:
  - After the COVID-19 Pandemic: Planning Now for the Return to Occupancy
- Hotel Recovery Checklist — Petra Risk Solutions
- Reopening Guidance for Restaurants
- COVID-19 Resource: Global Hotel Cleaning Standards Being Introduced

- Clean and Safe Certification: The Future for Hotels After COVID-19
- Hotel Employees & Restaurant Employees Union (HERE):
  - Guidelines for Hotel, Gaming, and Food Service Facilities During the COVID-19 Pandemic
K-12 education overview

K-12 education professionals include district and school administrators, such as superintendents, principals, and leadership teams.

**Unique COVID-19 challenges and opportunities for K-12 education:**

- Potential funding cuts as states grapple with the economic impacts of COVID-19
- Potential school staff and teacher shortages due to safety concerns
- Limited space and resources in classrooms to provide appropriate physical distancing for teachers and students

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K-12 education overview (continued)

- Significant nationwide variations in state and local agency recommendations for COVID-19 prevention and safety
- Mental trauma in school communities due to converging issues like sudden, unexpected transitions to virtual learning, COVID-19 health impacts on families, and a turbulent social/racial climate related to police brutality
- Intensified food insecurity due to increased economic need and lack of sufficient transportation for many families to get students to school to receive meals
- Significant challenges among families as students continue learning virtually and families try to support students’ schoolwork while working from home or holding an essential job function that requires leaving their household

- A highly unionized workforce, with communications, policies, and resources that need to be aligned for greater impact and support
K-12 education 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 hand-washing resources that include health promotion materials, information on proper hand-washing technique, and tips for families to help children develop good hand-washing 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 COVID-19 and steps being taken by school facilities to prevent the spread of the virus among their students and staff.
- Create and test communication plans for use with the school community.
- For best outcomes, confer and collaborate with all school district partner unions, including those representing educators and classified employees, to develop joint policies, practices, and communications.

To learn more about how to keep school communities mentally and physically safe throughout the pandemic, see the Planning for the Next Normal at School playbook.
K-12 education resources

CDC
• Interim Guidance for Administrators of US K-12 Schools and Child Care Programs
• COVID-19 FAQs for Administrators, Teachers, and Parents
• Implementation of Mitigation Strategies for Communities With Local COVID-19 Transmission

NEA
• Initial Guidance Regarding Reopening School Buildings

AFT
• Safely Reopening America’s Schools and Communities

Planning for the Next Normal at School: Keeping students, staff, and families safe and healthy
In partnership with over 30 school health organizations, Kaiser Permanente 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.
Manufacturing overview

Manufacturing includes line workers, cleaners, assemblers and fabricators, food processing, machinists, tool and die, painting and coating workers, power plant operators, printing, sewers and tailors, slaughterers and meatpackers, welders, cutters, solderers, and more.

Unique COVID-19 challenges and opportunities for manufacturing:

- Workstations that are difficult to reconfigure for physical distancing
- Speed controls that can impact physical distancing
- Heavy machinery that is difficult to move and clean
- A highly unionized workforce, with communications, policies, and resources that need to be aligned for greater impact and support
Manufacturing guidance and considerations

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

- Reconfigure workstations to comply with WHO and CDC guidelines and adjust line speeds, if necessary.
- Discourage employees from using co-workers’ tools and equipment.
- 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.
- Confer with your partner unions to ensure your health and safety messages align to avoid mistrust or confusion.
- 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.
- 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 hand-washing, 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.
- 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.
Manufacturing resources

OSHA:
• COVID-19 overview
• COVID-19 guidance and checklist

National Association of Manufacturers

United Automobile, Aerospace and Agricultural Implement Workers of America resources
Public safety and first responders overview

Public safety and first responders include, but aren’t limited to: law enforcement; fire services; emergency medical services; correctional officers, correctional teachers, and correctional medical staff; dispatch/911 call center staff; and emergency management officials.

Unique COVID-19 challenges and opportunities for public safety and first responders:

• Regular exposure in the course of their jobs and an increased risk of close contact with people with confirmed or possible COVID-19
• High levels of workplace stress and anxiety, making mental health support and resources particularly important (see Chapter 3)
• Increased workloads during a severe pandemic and diminished staff sizes as employees and their families become ill or are quarantined
• A highly unionized workforce, with communications, policies, and resources that need to be aligned for greater impact and support
• For correctional staff, an overcrowded environment without enough opportunities for ventilation
Public safety and first responders guidance and considerations

General public safety and first responders 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 different risk levels.
- Deliver up-to-date safety messaging on the current status of resources and protocols.
- Select, implement, and ensure workers use controls to prevent exposure.
- Ensure only trained personnel wearing appropriate PPE come into contact with individuals who have or may have COVID-19.
- Communicate regularly and often with employees to educate, empower, and reduce the spread of the virus.
- Confer with your partner unions to ensure your health and safety messages align to avoid mistrust or confusion.
Correctional industry guidance and considerations

The correctional industry spans local municipalities (local sheriff and police) to state and federal levels, and it includes a variety of occupations. The industry employs correctional officers, teachers, psychologists, and medical staff, as well as administrative support personnel.

- Modify staff assignments to minimize movement across housing units and other areas of the facility.
- Implement lawful alternatives to in-person court appearances where permissible.
- Limit the number of operational entrances and exits to the facility.
- Consider establishing an on-site laundry option for staff so that they can wear street clothes and shoes home.
- Implement intensified cleaning and disinfecting procedures regardless of COVID-19 presence.
- Increase the number of people responsible for cleaning common areas to help ensure continual cleaning.
- Encourage all staff and incarcerated/detained persons to wear a cloth face covering.
- Reinforce healthy hygiene practices; provide and continually restock hygiene supplies throughout the facility.
- Perform verbal screenings and temperature checks for all staff upon entry each day.
- If staff develop a fever or other symptoms of COVID-19 while at work, they should immediately put on a cloth face covering, inform their supervisor, leave the facility, and follow CDC-recommended steps for persons who have COVID-19 symptoms.

Note: Consult the CDC for up-to-date guidance.
Correctional industry resources

• **CDC interim guidance on management of COVID-19 in correctional and detention facilities**

• **National Commission on Correctional Health Care guidance for COVID-19**
Firefighter and emergency medical service guidance and considerations

Emergency Medical Service (EMS) care and transports present unique challenges because of the uncontrolled environment, 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.

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.
- Prepare contingency plans that can help fire and EMS departments reduce the worst impacts if staff size diminishes due to employee illness or quarantine.

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Firefighter and emergency medical service guidance and considerations  (continued)

- Consult with state and local jurisdictions regarding access to PPE stockpiles if 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 prehospital 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.
Firefighter and emergency medical service 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
- U.S. Fire Administration Information for First Responders on Maintaining Operational Capabilities During a Pandemic

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
- NIOSH Interim Training for Emergency Responders: Reducing Risks Associated With Long Work Hours

International Association of Fire Fighters
- COVID-19 Tracking and Resources
Law enforcement guidance and considerations

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

- 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 interact 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.
- Have a trained EMS/emergency medical technician (EMT) assess and transport anyone who may have COVID-19 to a health care facility.
Law enforcement resources

United Coalition of Public Safety
• COVID-19 Best Practices

CDC
• COVID-19 overview for law enforcement
• Leadership and law enforcement personnel performing routine daily activities should follow the Interim Guidance for Businesses and Employers

International Association of Chiefs of Police
• Law Enforcement Information on COVID-19
Public services overview

Public services include public sector agencies as well as private nonprofits that interact with the public — such as social service organizations, employment services, departments of motor vehicles and transportation, permit departments, housing services, foster care support services, and many more.

Unique COVID-19 challenges and opportunities for the public services workplace:

- Consistent indoor interactions with the public
- Ongoing interaction with some of the most vulnerable and hardest-hit members of our communities affected by COVID-19 and its socioeconomic impacts
- Workplace often includes crowded waiting areas
- Built-in workstations that are set close together
- Sometimes includes a payment/paperwork exchange
- In a unionized workforce, aligning communications, policies, and resources is essential for greater support and greater impact
Public services guidance and considerations

Public services considerations that can help reduce risk of exposure to the coronavirus:

- Use verbal announcements on the loudspeaker and place signage throughout the establishment (for example, near bathrooms, entrances, and time clocks) to remind both employees and clients to maintain distance and wear masks.

- Consider installing transparent shields or other physical barriers where possible to separate employees and visitors, particularly where physical distancing is not an option.

- Arrange reception or other communal seating area chairs by turning, draping (covering chairs with tape or fabric so seats can’t be used), spacing, or removing chairs to maintain physical distancing.

- Enforce physical distance between co-workers and clients, and mandate mask-wearing for the safety of the workers who are exposed in closed spaces over long periods.

- Provide employees with disposable wipes and other cleaning materials so they can properly wipe frequently touched surfaces before each use.

- Consider using portable high-efficiency particulate air (HEPA) fan/filtration systems to help enhance air cleaning and circulation.

- Set an example at all levels of management by practicing proper mask-wearing, hand-washing, and physical distancing.

- Stagger shifts, start times, and break times as feasible to reduce the density of employees in common areas.

- Place visual cues, such as floor decals, colored tape, or signs, to indicate to clients where to stand or sit while waiting for services.

- Try to set up a safety council for your worksite that includes representatives from different job functions.

- Communicate regularly and often with employees to educate, empower, and reduce the spread of the virus.

- Confer with your partner unions to ensure your health and safety messages align to avoid mistrust or confusion.

- Reinforce communication and support employees who raise concerns when safety guidelines aren’t being followed, such as physical distancing, cleaning and disinfecting, wearing a face covering, or other local guidelines.

- Share safety tips with the visiting public:
  - Wash your hands before leaving home to cut down on spreading germs.
  - Wear a mask at all times while in the agency to protect others.
  - Bring your own hand sanitizer and wipes, if you can.
  - Try not to touch your face while in public, and wash your hands or use hand sanitizer after you’re done.
  - Stay 6 feet away from other clients and employees.

Note: Consult the CDC for up-to-date guidance.
Public services resources

- CDC Guidance for Businesses & Employees
- Office and Professional Employees International Union
- American Federation of State, County, and Municipal Employees guidance on workplace preparedness and COVID-19
- OSHA Guidance on Preparing Workplaces for COVID-19
Transportation overview

Transportation includes train and bus vehicle operators, paratransit operators, airline crews, maintenance crews, customer service, gate and security agents, and cleaning crews.

**Unique COVID-19 challenges and opportunities for transportation:**

- Working inside small, enclosed spaces with the general public
- Vulnerability to a changing group of the general public
- Predesigned vehicle configurations
- General employee safety (a longtime concern for vehicle operators) and the difficulty of enforcing public behavior
- A highly unionized workforce, with communications, policies, and resources that need to be aligned for greater impact and support
Transportation industry guidance and considerations

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

- Provide safe distancing protocols for collecting tickets, boarding passes, and fees from passengers.
- Post and announce public safety protocols for employees and passengers.
- Provide protocols for assisting passengers with wheelchairs, vision impairment, or intellectual disabilities, as well as adequate gloves, wipes, and hand sanitizer to safely assist with wheelchairs and other equipment.
- Conduct frequent cleaning of vehicles, employee break rooms, rest areas, and other common areas.
- Provide employees with appropriate PPE for themselves and visibly sick passengers, taking into account potential PPE shortages, and providing training on using the PPE.

- Provide tissues and no-touch disposal receptacles for employee use.
- Encourage employees to limit or minimize close contact with others by maintaining a distance of at least 6 feet from each other, when possible.
- Provide training on proper hand-washing 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.
- Confer with your partner unions to ensure your health and safety messages align to avoid mistrust or confusion.
Bus and rail operator guidance and considerations

General **bus operator considerations** and **rail operator considerations** to help reduce the risk of exposure to the coronavirus:

- Ask passengers to enter and exit the bus or train through rear entry doors.
- 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).
- **Follow protocols to increase airflows away from the driver and passengers**
- Provide protocols for assisting passengers with physical, visual, and intellectual disabilities, and adequate gloves, wipes and hand sanitizer to assist safely with wheelchair securement etc.
- Instruct employees to avoid touching surfaces often touched by transit 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.
- Confer with your partner unions to ensure your health and safety messages align to avoid mistrust or confusion.

[kp.org/workforcehealth]
Flight crew guidelines and considerations

General flight crew considerations to help reduce the risk of exposure to the coronavirus:

- Allow flight crew to wear non-latex, powder-free gloves at any time.
- Ensure all aircraft meet the federal requirements for access to soap and running water.
- Add quick temperature gauges to aircraft equipment and stock sanitizing wipes for cleaning surfaces.
- Make surgical masks available to passengers and crew.
- Confer with your partner unions to ensure your health and safety messages align to avoid mistrust or confusion.
- Ensure each flight has one universal precaution kit for every flight attendant on duty plus 2 additional kits for intervening health care personnel, including N95 masks.
- Provide a leak-resistant airsick bag that is immediately available for each passenger.
- Waive ticketing change fees for passengers who are symptomatic.

- Change service to provide only individual water bottles or disposable cups including business/first class.
- Discontinue hot towels in first/business class and replace with sanitation wipes.
- Follow CDC-recommended guidelines for cleaning aircraft and any contaminated areas after a flight with a sick traveler who may have a communicable disease.
- Follow guidelines to protect and train the aircraft cleaning crews.
- Develop realistic procedures and/or engineering controls for isolating symptomatic passengers.
- Require pre-flight briefings to communicate the use of universal precaution procedures and equipment.
Customer service, gate agent, and security guidance and considerations

**General** [airport passenger assistance, customer service representative, and baggage and cargo worker considerations to help reduce 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 employees with face masks to offer to visibly sick people.
- 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, other mobile devices, workstations, keyboards, touchscreens, printers, and computers.
- Allow passengers to hold their own documents and scan their own boarding pass or mobile device.
- Require TSA and screening contractors to ensure that airport screening areas and equipment are appropriately sanitized at all times.
- Follow normal guidance for handling service/support animals.
- Confer with your partner unions to ensure your health and safety messages align to avoid mistrust or confusion.
Transportation resources

Land travel:
- CDC: Rail transit operator considerations
- CDC: Bus transit operator considerations
- Amalgamated Transit Union (ATU): COVID-19 resources
- ATU: Work safety considerations

Air travel:
- CDC: Airport passenger assistance worker considerations
- Association of Flight Attendants-CWA: COVID-19 resources
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 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.

2 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