

**Return to Work Safety Practices to Consider**

Social distancing

* Continue 6 feet rule
* One way traffic in halls, entrances, exits
* Remove bottle necks ie coffee machines, lockers, breakrooms, timeclocks
* Arrange seating for staff and visitors to sit next to not across from each others
* Require vs recommend employees, vendors, volunteers, clients to wear masks, gloves, gowns?
	+ If required to wear, OHS should pay for and supply (CDC says cloth PPE not very effective for wearer protection so not required to pay for it)
	+ Education on proper use of PPE

Schedules

* Phase in return of workforce onsite (20%, 30%, 50%, 75%? ) with 2 weeks between phases to work out the kinks and ensure to resurgence of exposures occur
	+ Who returns first… critical positions, by seniority, those volunteering to return, some combination?
* Allow at risk employees or those with children to work remotely longer? (legally can require return but use compassion)
* Stagger shifts, arrivals, breaks to allow social distancing
* Flexible hours, days worked, shorter/longer shifts (ie 4x10)
* Rotating presence in the shelter if in shared offices
* Work from home permanently or part time for positions where appropriate
* How to communicate return practices with staff, volunteers, guests, vendors? Create a video or powerpoint, 1:1 meeting with staff if schedule changes, use website to communicate with guests etc

Facilities and other issues

* Limit visitors or deliveries to one location
* One way halls, entrances and exits
* Virtual meetings still encouraged even among onsite staff
* Plexi dividers/barriers
* No hand shakes, hugs
* Hand wash station outside?
* Propping doors to minimize touches, motion sensor lighting, automatic door opening, voice activated elevator buttons

Medical screenings

* Prior to work daily – self temp checks (by employee or employer) 100.4+ = fever or employer check temps at the door
	+ Employer provided thermometers?
	+ Medical info kept confidential!
	+ Who takes temps, how?
* Medical Questionnaire – any symptoms, exposures or temp = no building entry
* Require medical releases (impractical)
	+ CDC = symptom free 72 hours w/o Tylenol
* Antibody testing clinic onsite

**ER can require and employee to come back on site but should take medical conditions into consideration, WFH can be an ADA accommodation. Consider emotional toll of COVID, star performance history, working well from home, caring for children etc. Try to use compassion and flexibility to retain great workers even though the law allows us to require their return. Refusal to return would be a resignation (if documented offer).**