



# Your Return To Work Strategy

A COVID-19  
Re-entry framework



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## TEAMS





# Presentation Housekeeping



WORKER'S COMP  
FOCUS



SAFETY / CAL-OSHA  
COMPLIANCE




FRAMEWORK FOR RISK  
MANAGEMENT



Q&A TO FOLLOW VIA  
EMAIL AFTER WEBINAR

# COVID-19: SUPPORTING OUR CUSTOMER'S NEEDS THROUGH THIS PANDEMIC JOURNEY





# COVID-19: Governor Newsom's Executive Order

Presented by:  
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“COVID-19 will be the largest  
event in insurance history”

*- Evan Greenberg  
CEO, Chubb Insurance*





# California Update

# California's 4 Stages of reopening

Stage 2:  
May 8, 2020

Stage 3:  
June 12, 2020

California Resilience Roadmap Stages

» **STAGE 1**  
**Safety and Preparedness**

- This is where we are now
- Continue to build out testing, contact tracing, PPE, and hospital surge capacity
- Making essential workforce environments as safe as possible

covid19.ca.gov

California Resilience Roadmap Stages

» **STAGE 2**  
**Lower Risk Workplaces**

- Gradually opening some lower risk workplaces with adaptations
  - Retail (e.g. curbside pickup)
  - Manufacturing
  - Offices (when telework is not possible)
  - More public spaces

covid19.ca.gov

California Resilience Roadmap Stages

» **STAGE 3**  
**Higher Risk Workplaces**

- Open higher risk environments with adaptations and limits on size of gatherings
  - Personal care (hair and nail salons, gyms)
  - Entertainment venues (movie theaters, sports without live audiences)
  - In-person religious services (churches, weddings)

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California Resilience Roadmap Stages

» **STAGE 4**  
**End of Stay-At-Home**

- Re-open highest risk environments and venues once therapeutics have been developed
  - Concerts
  - Convention centers
  - Live audience sports

covid19.ca.gov



## California Statistics

Total Population: 40,129,160

**37,211**

New Cases (Last 14 Days)

92.7 Per 100K

136,191 Total Cases

**892**

New Deaths (Last 14 Days)

2.2 Per 100K

4,776 Total Deaths

**803,904**

Tests Reported (Last 14 Days)


4.6% Test Positivity

1.4 Daily per 1,000 Residents

2,540,798 Total Tests Reported



As of June 11, 2020



# WCIRB Recommended Amendments



To permit during a statewide California COVID-19 stay-at-home order:

- (1) the division of an employee's payroll between **Classification 8810, Clerical Office Employees**,
- (2) payments made to an employee while the employee is performing no duties of any kind in service of the employer to **be excluded from payroll** when the payments are equal to or less than the employee's regular rate of pay.
- (3) COVID-19 claims will not impact the X-Mod

**PREMIUM = PAYROLL \* JOB CLASSIFICATION \* RATE \* X-MOD**

**KEEP ACCURATE  
PAYROLL LEDGERS**  
(OFFICE VS. HOME VS. NOT  
WORKING)



**KEEP A SEPARATE LOG  
OF ANY COVID-19  
CLAIMS SUBMITTED  
TO YOUR CARRIER**

# Work Comp Renewal Questions



If impacted by the current environment, what is Insured's business resiliency plan?



If Insured is considering impacts to the number in workforce, potentially through layoffs or furloughs, what steps is Insured taking during this transition?



Considering the current situation, are the payroll estimates provided still accurate?



What facility cleaning and employee protections, including Personal Protective Equipment is in place? If one or all of the facilities have been closed, what is the plan to re-open them (Include comments on cleanliness, electrical inspection and general re-start of idle equipment)?



# Return To Work Challenges



FEDERAL, STATE, AND  
LOCAL  
REQUIREMENTS VS.  
RECOMMENDATIONS



PROCEDURES  
CHANGE AS STATE  
AND NATION-WIDE  
DATA IS ANALYZED



EMPLOYEE  
DISCIPLINES HAVE  
BEEN FORGOTTEN



NEW EMPLOYEES  
UNFAMILIAR WITH  
YOUR PROCEDURES,  
WORKSITE, PROJECT



THERE IS NOT A  
ONE-SIZE-FITS-ALL  
RULE

# Psychological hurdles



Leaving the safety of  
home



Overcoming anxiousness  
and depression from SIP



Mental reconditioning of  
work disciplines



Retraining of the mind  
and body

Make information on your **Employee Assistance Program (EAP)** readily available.



# Re-opening Requirements



PERFORM A DETAILED  
RISK ASSESSMENT AND  
IMPLEMENT A SITE-  
SPECIFIC PROTECTION  
PLAN



TRAIN EMPLOYEES ON  
HOW TO LIMIT THE  
SPREAD OF COVID-19,  
INCLUDING HOW  
TO SCREEN THEMSELVES  
FOR SYMPTOMS AND  
STAY HOME IF THEY  
HAVE THEM



IMPLEMENT INDIVIDUAL  
CONTROL MEASURES  
AND SCREENINGS



IMPLEMENT  
DISINFECTING  
PROTOCOLS

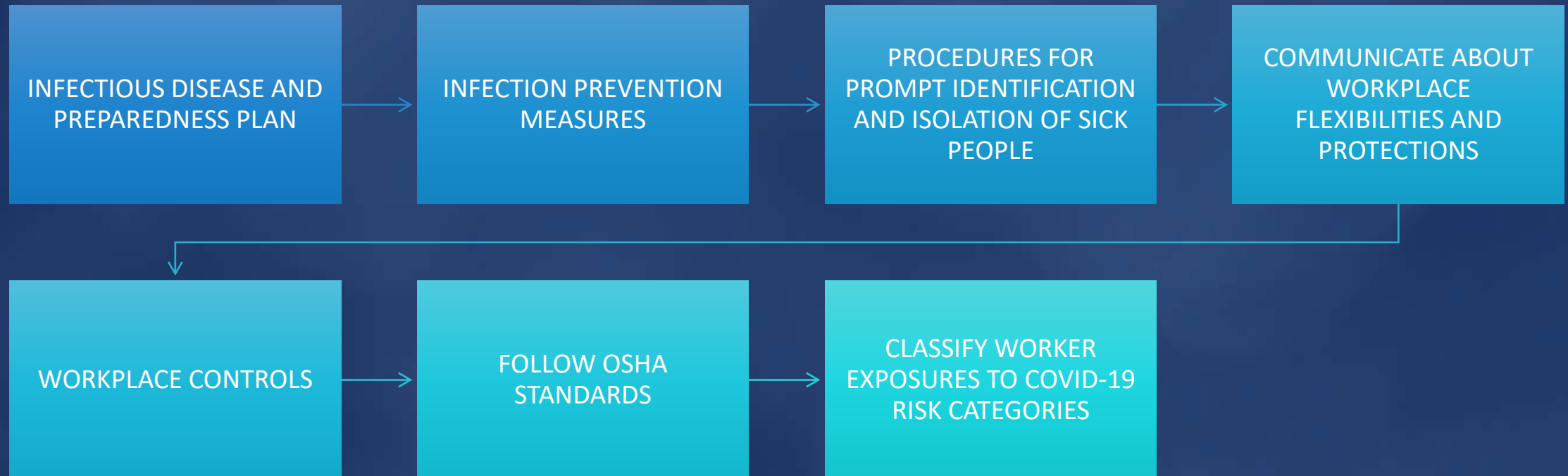


IMPLEMENT PHYSICAL  
DISTANCING GUIDANCE

<https://covid19.ca.gov/pdf/guidance-office-workspaces.pdf>

<https://www.gov.ca.gov/2020/05/07/governor-newsom-releases-updated-industry-guidance/>

# Fed-OSHA's 7 Point Re-opening Guidelines





# CDPH, Cal-OSHA Industry Guidance

Construction Requirements

Agriculture & Livestock

Auto Dealerships

Childcare

Communications Infrastructure

Delivery Services

Energy & Utilities

Food Packing & Processing

Hotels & Lodging

Life Sciences

Logistics & Warehousing

Manufacturing

Office & Workspaces

Places of Worship

Real Estate Transactions

Retail




Shopping Centers

Schools

Mining & Logging

Limited Services


Family Friendly Practices



## Cal/OSHA COVID-19 General Checklist for Office Workspaces


May 7, 2020

This checklist is intended to help employers implement their plan to prevent the spread of COVID-19 in the workplace and is supplemental to the [Guidance for Office Workspaces](#). This checklist is a summary and contains shorthand for some parts of the guidance; familiarize yourself with the guidance before using this checklist.




### Contents of Written Worksite Specific Plan

- ☐ The person(s) responsible for implementing the plan.
- ☐ A risk assessment and the measures that will be taken to prevent spread of the virus.
- ☐ Training and communication with employees and employee representatives on the plan.
- ☐ A process to check for compliance and to document and correct deficiencies.
- ☐ A process to investigate COVID-cases, alert the local health department, and identify and isolate close workplace contacts of infected employees until they are tested.



### Topics for Employee Training

- ☐ Information on [COVID-19](#), preventing spread, and who is especially vulnerable.
- ☐ Self-screening at home, including temperature and/or symptom checks using [CDC guidelines](#).
- ☐ The importance of not coming to work if employees have a frequent cough, fever, difficulty breathing, chills, muscle pain, headache, sore throat, recent loss of taste or smell, or if they or someone they live with have been diagnosed with COVID-19.
- ☐ When to seek medical attention.
- ☐ The importance of hand washing.
- ☐ The importance of physical distancing, both at work and off work time.



### Individual Control Measures & Screening

- ☐ Symptom screenings and/or temperature checks.

# OSHA has established a 7-point re-opening guideline including “Follow OSHA Standards”.

With OSHA’s increased inspection and enforcement activity due to COVID-19, now more than ever it is imperative employers enhance their overall safety program. Beyond COVID, are you prepared for an OSHA inspection?

ESM’s Compliance Library includes OSHA policies, procedures and actionable tools.

## Fall from a ladder results in 9 non-related Cal-OSHA Penalties.



CITATION	CAL-OSHA STANDARD	PENALTY
1	Injury & Illness Prevention Program.....	\$655
2	Code of Safe Practices.....	\$655
3	Heat Illness Prevention Plan Training.....	\$525
4	Heat Illness response procedures.....	\$655
5	Respiratory Protection Plan.....	\$655
6	Respiratory Protection Medical Evaluations.....	\$525
7	Respiratory Protection Fit Tests.....	\$525
8	Hazard Communication.....	\$655
9	Hazard Communication training.....	\$525
Total		\$5,325



# What you need to know...



There have been over **15,000+** employee complaints to OSHA related to employers lack of COVID-19 mitigation strategies.



OSHA is stepping up their inspection and enforcement procedures due to COVID-19



California and OSHA have specific COVID-19 re-entry requirements including “follow OSHA standards”. Are you in compliance?



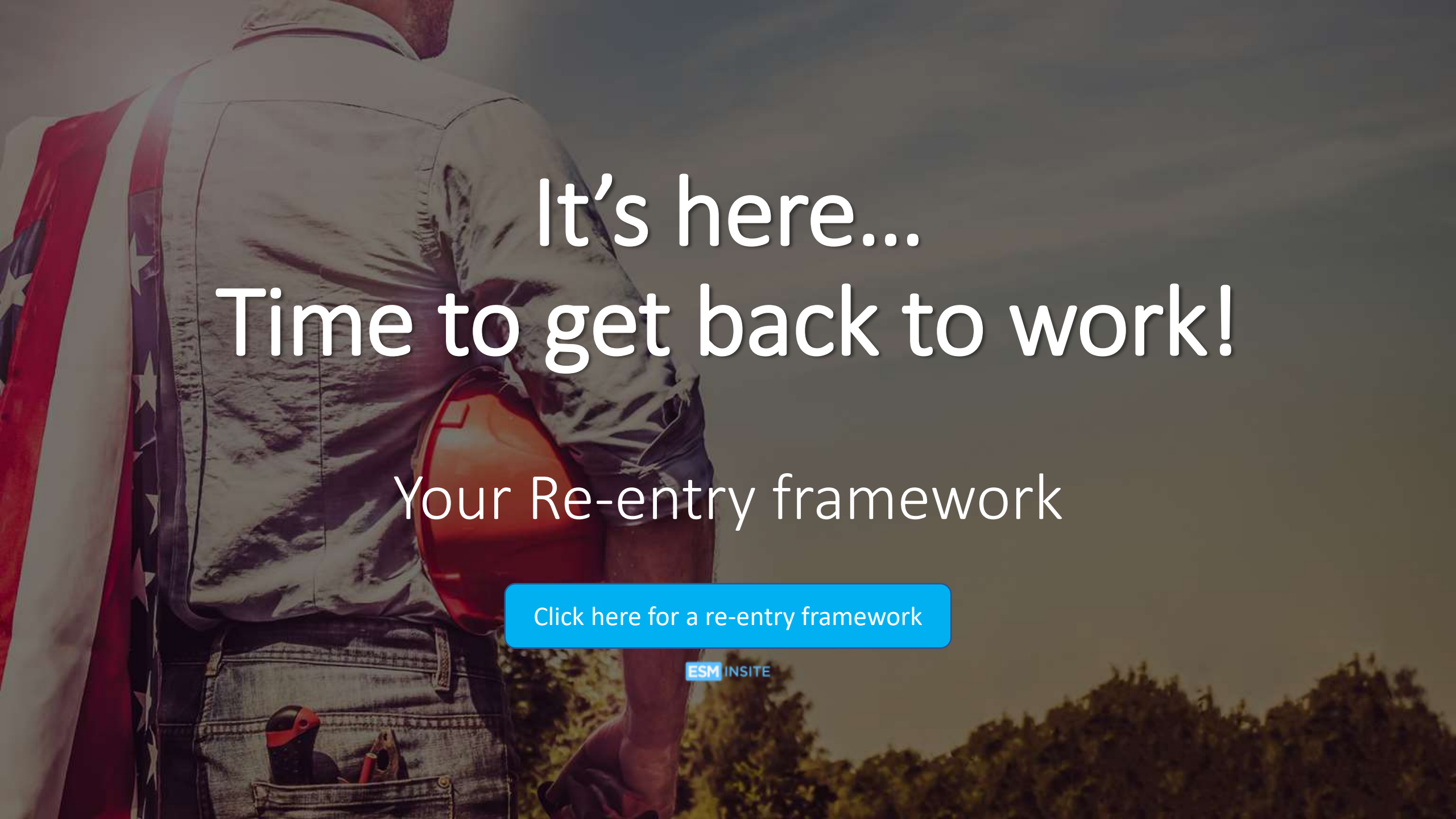
Insurance Carriers review OSHA Citations as part of the renewal process (public information).



Just paying OSHA penalties could be misconstrued as an admission of guilt and an applicant’s attorney can file a “Serious & Willful” on the Workers’ Comp claim.



Employers are required to have written OSHA policies and training to avoid costly citations and penalties.



# It's here... Time to get back to work!

Your Re-entry framework

[Click here for a re-entry framework](#)

ESM INSITE



# What you need to do...

1



**Business  
Re-Entry  
Checklist**

2



**Exposure  
Control Plan**

3



**Worksite  
Cleaning  
Protocols**

4



**Social  
Distancing  
Protocols**

5



**Worksite  
Controls**  
(Engineering,  
Administrative)

6



**Re-Opening  
Strategy**



# Exposure Control Plan Re-Entry Checklist

(COVID-19)

## STEP 1:

Complete your Business Re-Entry Checklist with your team

# Prepare for Re-entry

Operational Action Items	Examples
Establish a COVID-19 task force with defined roles and responsibilities for preparedness and response planning.	Name: Title: Safety Manager / COVID Coordinator Phone: Email:
Identify high risk individuals	People aged 65+. Chronic lung disease or asthma, serious heart conditions, severe obesity, pregnant, etc.
Move high-risk employees to areas with lower risk for COVID-19 exposures. Designate those areas for only high-risk employees	Cordon off areas for high risk individuals
Define PPE required by department and based on Very High to Low risk categories	Face coverings, gloves, goggles
Establish physical distancing protocols for employees and customers	Floor markings, physical barriers
Daily health assessment established (at home and at work)	Temperature screening, symptom monitoring
Identify frequency of air filter replacement	Quarterly to monthly
Identify frequency of sanitization efforts by department	Common areas sanitize 3X a day, establish sanitization stations

Policies & Procedures to Review	Developed
Employee's job description	<input type="checkbox"/>
Injury & Illness Prevention Program	<input type="checkbox"/>
Code of Safe Practices	<input type="checkbox"/>
Daily Health Assessment protocols	<input type="checkbox"/>
Social distancing protocols	<input type="checkbox"/>
General health and wellness training	<input type="checkbox"/>
Personal Protective Equipment requirements	<input type="checkbox"/>
Cleaning & Disinfection protocols	<input type="checkbox"/>
Department Job Safety Analysis or SOPs	<input type="checkbox"/>
Reconfiguration of worksite	<input type="checkbox"/>
General health and hygiene protocols	<input type="checkbox"/>

**COVID-19  
EXPOSURE CONTROL PLAN (ECP)**

**GENERAL INDUSTRY**  
SAMPLE PROGRAM



Prepared by ESM Solutions, Inc.  
This policy is a merely a guideline and does not guarantee compliance with all applicable Federal, State or Local OSHA standards. It is solely the responsibility of the Employer to make sure that their Risk Management and/or Safety Program is compliant with all applicable laws. © 2020, All Rights Reserved

# STEP 2:

- Develop / review your Exposure Control Plan, including:
  - Responsibilities at all levels
  - Worker exposure classification
  - Worksite procedures
  - Worksite controls
  - Transmission control procedures
  - Temperature screening
  - Visitors
  - Decontamination procedures
  - Health, housekeeping and hygiene procedures
  - Workplace controls
  - PPE
  - Training
  - Recordkeeping

[www.esminsite.com/s/ESM\\_COVID-19\\_Exposure-Control-Plan\\_General-Industry.docx](http://www.esminsite.com/s/ESM_COVID-19_Exposure-Control-Plan_General-Industry.docx)



# COVID-19 EXPOSURE CONTROL PLAN

## REQUIREMENTS AND BEST PRACTICES FOR MITIGATING THE VIRUS

For safety culture, understand the health and wellness of our team, risk can be self-reported. Working safely with a commitment to safety is key!

MAY 2020

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Communicable diseases, such as COVID-19, spread through respiratory droplets when infected or exposed through coughing, sneezing, etc. And other infectious diseases which are spread through body contact, contact with infected body fluids, or through other vectors and means.

The objective of this module is to outline the requirements and procedures to reduce the potential for exposure to COVID-19 by developing and implementing effective controls and procedures for employees.

It is the policy of COMPANY NAME to provide a safe, healthy and secure workplace for all employees by implementing an effective Exposure Control Plan (ECP). Our ECP applies to employees that work in environments where their job tasks have the potential for communicable diseases exposure.

### RESPONSIBILITIES

#### Key Roles:

- **Company:** Developing a system, which requires with COVID-19 and ECP procedures.
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#### Department Manager, Supervisor, & Unit:

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#### Medical Personnel:

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ESM INSITE ECP - Exposure Control Plan

# Exposure Control Module – Employee Training

## EXPOSURE CONTROL PLAN

### SANITATION PROCEDURES

COMPANY NAME will provide facilities and disinfectant supplies and equipment to ensure proper disinfection of all surfaces and equipment. These procedures are as follows:

- **Company:** Developing a system, which requires with COVID-19 and ECP procedures.
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### TEMPERATURE SCREENING AND TESTING

To protect the health of the workforce, COMPANY NAME will implement temperature screening and testing procedures. These procedures are as follows:

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### DAILY HOME HEALTH ASSESSMENT

PLEASE REVIEW THE FOLLOWING QUESTIONS DAILY.  
IF YES TO ANY PLEASE STAY HOME AND NOTIFY YOUR SUPERVISOR

Are you experiencing any of the following?



Have you been in close contact with anyone who has been diagnosed with COVID-19?

Yes ☐ No ☐

Have you been in close contact with someone who has been diagnosed with COVID-19?

Yes ☐ No ☐

Have you been in close contact with anyone who has been diagnosed with COVID-19?

Yes ☐ No ☐

Have you been in close contact with anyone who has been diagnosed with COVID-19?

Yes ☐ No ☐

Have you been in close contact with anyone who has been diagnosed with COVID-19?

Yes ☐ No ☐

Have you been in close contact with anyone who has been diagnosed with COVID-19?

Yes ☐ No ☐

ESM INSITE ECP - Exposure Control Plan

## Feeling Sick?

Stay home when you are sick!

If you feel unwell or have the following symptoms please leave the building and contact your health care provider. Then follow-up with your supervisor.

DO NOT ENTER if you have:

FEVER

COUGH

SHORTNESS OF BREATH

## EXPOSURE CONTROL PLAN

### HEALTH AND MYCING PROCEDURES

COMPANY NAME will provide facilities and disinfectant supplies and equipment to ensure proper disinfection of all surfaces and equipment. These procedures are as follows:

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### VISIONS

To protect the health of the workforce, COMPANY NAME will implement vision screening and testing procedures. These procedures are as follows:

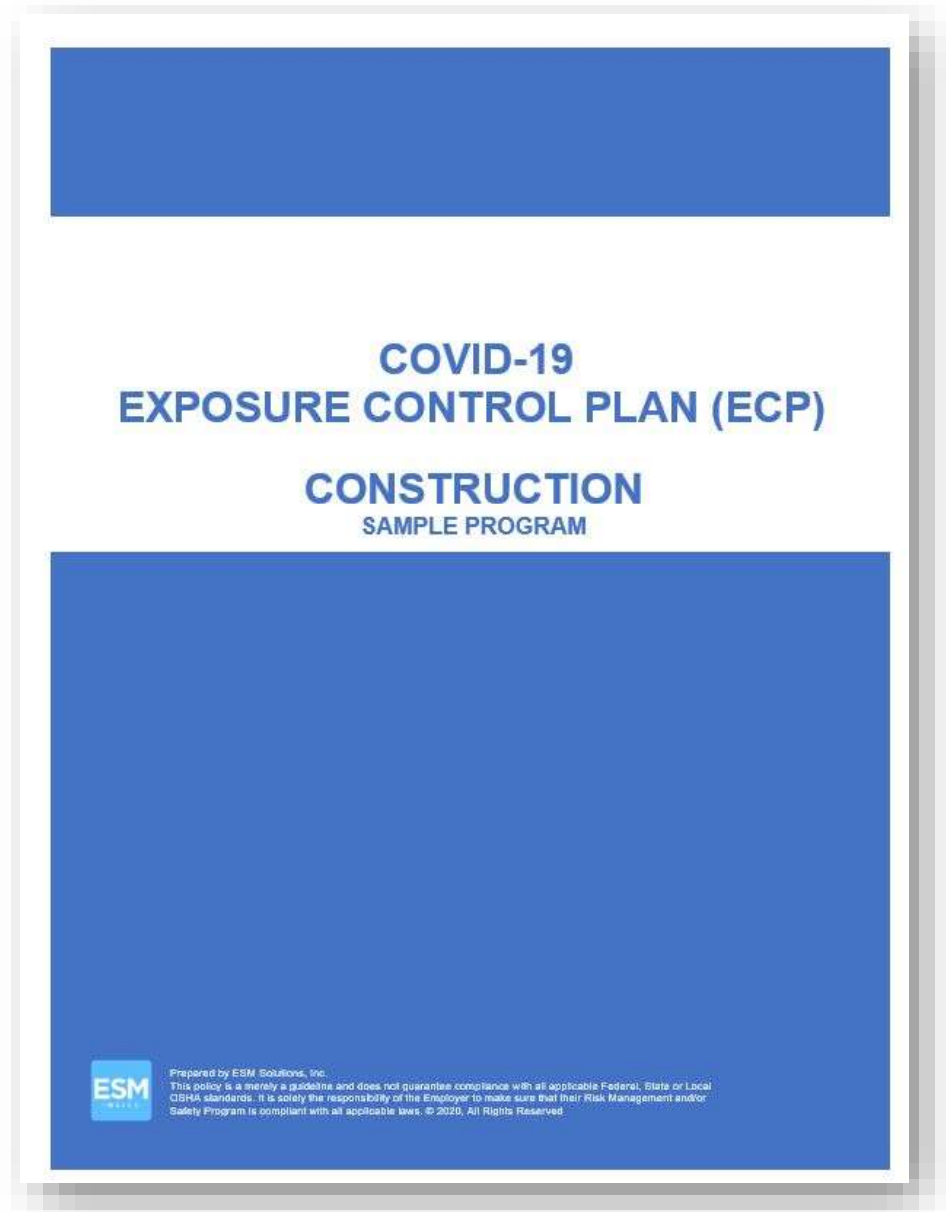
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ESM INSITE ECP - Exposure Control Plan

# COVID-19 Exposure Control Plan for Construction

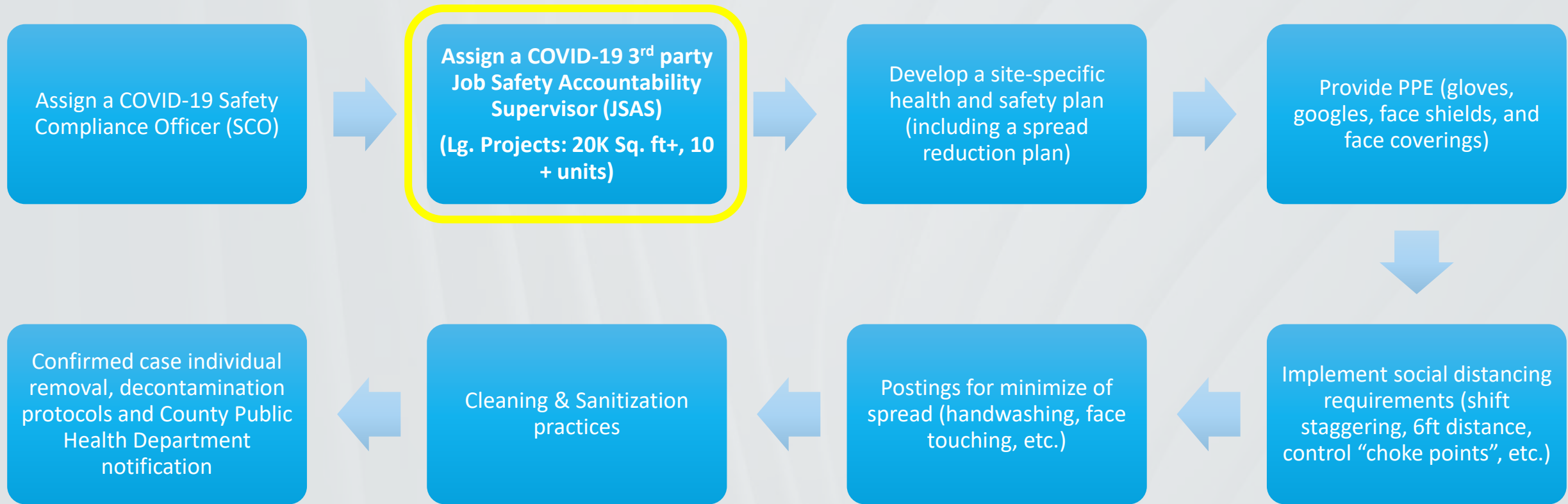
Sample jobsite and main office  
exposure control policy

\*For large Bay Area projects  
JSAS may be required



[www.esminsite.com/s/ESM\\_COVID-19\\_Exposure-Control-Plan\\_Construction.docx](http://www.esminsite.com/s/ESM_COVID-19_Exposure-Control-Plan_Construction.docx)

# Construction – Large Project



# Construction Resource: On-Site Health & Safety

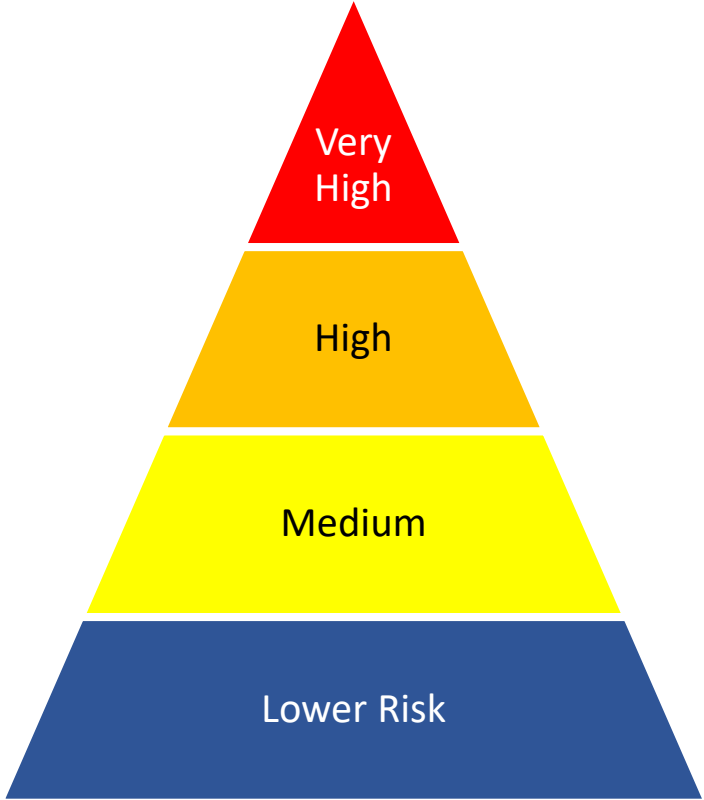


1. Review site specific written plans
2. Temperature Screening (4 hour min)
3. COVID-19 Testing
  - Blood testing for antibodies
  - Swab for COVID (5 mins)
4. Job Safety & Accountability Supervisor (JSAS)
  - Flat rate (1.5 hours per site)
  - Frequency?
5. Website: <https://onsitehealthandsafety.com/>
6. Dispatch phone: 866-998-2750

# OSHA's Risk Pyramid

How are your employees categorized?

Risk Category	Job/Department	Associated Risks	PPE required
<b>Very High</b> (jobs with high potential to exposure to known exposure sources during medical processes)			
<b>High</b> (jobs with high potential to exposure to known exposure sources)			
<b>Medium</b> (jobs that require close contact to general public and potentially infected people)			
<b>Low</b> (jobs that have minimal occupational contact with the public and coworkers)			





# STEP 3:

## Worksite Cleaning Procedures

### Action

Establish a frequency of cleaning

Identify what EPA approved chemicals you will use

Identify a team responsible for cleaning  
(by department/worksite)

Develop an inspection form for validation

Identify disposal of sanitation material

Identify a 3<sup>rd</sup> party vendor for decontamination

Maintain records per your IIPP

#### Daily Safety & Health Cleaning Inspection

Company Name:	Inspected By:
Address:	Inspection Date:
Site Address (if diff):	Inspection Time In:
Supervisor:	Inspection Time Out:

1. Has the following entry area equipment been cleansed and are the appropriate disinfectants available?		
<input type="checkbox"/> Phones	<input type="checkbox"/> Sign in pens and visitor logs	<input type="checkbox"/> Other: _____
<input type="checkbox"/> Door handles and knobs	<input type="checkbox"/> Floors mopped daily	<input type="checkbox"/> Other: _____
<input type="checkbox"/> Front desk counter	<input type="checkbox"/> Hand sanitizer available	<input type="checkbox"/> Other: _____
<input type="checkbox"/> Couches / waiting chairs	<input type="checkbox"/> Social distancing signs posted	<input type="checkbox"/> Other: _____
<input type="checkbox"/> Coffee table(s)	<input type="checkbox"/> Masks and gloves available	
2. Have the following restroom equipment been cleansed and appropriate disinfectants available?		
<input type="checkbox"/> Door handles and knobs	<input type="checkbox"/> Soap dispensers full	<input type="checkbox"/> Handwashing signs posted
<input type="checkbox"/> Restroom stalls & dispensers	<input type="checkbox"/> Sanitizer available (if applicable)	<input type="checkbox"/> Other: _____
<input type="checkbox"/> Restroom faucets	<input type="checkbox"/> Touchless trash bins working	<input type="checkbox"/> Other: _____
<input type="checkbox"/> Restroom toilets & flush handles	<input type="checkbox"/> Light switches	<input type="checkbox"/> Other: _____
3. Have the following administrative and common areas been cleansed and appropriate disinfectants available?		
<input type="checkbox"/> Handrails	<input type="checkbox"/> Printers and other equipment	<input type="checkbox"/> Social distancing signs posted
<input type="checkbox"/> Door handles and knobs	<input type="checkbox"/> Kitchen counter tops & tables	<input type="checkbox"/> Social distancing being practiced
<input type="checkbox"/> Conference room tables	<input type="checkbox"/> Kitchen sinks and faucets	<input type="checkbox"/> Other: _____
<input type="checkbox"/> Conference room chairs (armrests)	<input type="checkbox"/> Microwaves & refrigerators	<input type="checkbox"/> Other: _____
<input type="checkbox"/> Floors mopped daily (if applicable)	<input type="checkbox"/> Other kitchen appliances	<input type="checkbox"/> Other: _____
<input type="checkbox"/> Workstations	<input type="checkbox"/> Light switches	<input type="checkbox"/> Other: _____
	<input type="checkbox"/> Handwashing signs posted	
4. Have the following production areas been cleansed and appropriate disinfectants available?		
<input type="checkbox"/> Door handles and knobs	<input type="checkbox"/> Handwashing signs posted	<input type="checkbox"/> Air filters changed monthly
<input type="checkbox"/> Production equipment	<input type="checkbox"/> PPE available and worn	<input type="checkbox"/> Social distancing being practiced
<input type="checkbox"/> Hand tools	<input type="checkbox"/> Employees trained on PPE	<input type="checkbox"/> Vehicle/fleet disinfection complete (if applicable)
<input type="checkbox"/> Supply rooms	<input type="checkbox"/> Social distancing signs posted	<input type="checkbox"/> Other: _____
<input type="checkbox"/> Sanitizer available	<input type="checkbox"/> Fans disinfected	
5. What corrective actions need to be taken? (Check all that apply)		
<input type="checkbox"/> Social distancing training	<input type="checkbox"/> Provide more handwashing signage	<input type="checkbox"/> Other: _____
<input type="checkbox"/> Social distancing engineering controls	<input type="checkbox"/> Require pre-job safety meeting	<input type="checkbox"/> Other: _____
<input type="checkbox"/> Provide more social distancing signage	<input type="checkbox"/> Use safer materials / Supplies	<input type="checkbox"/> Other: _____
<input type="checkbox"/> PPE training	<input type="checkbox"/> Modify shift changes	<input type="checkbox"/> Other: _____
<input type="checkbox"/> PPE enforcement	<input type="checkbox"/> Install / modify safety guards/ devices	<input type="checkbox"/> Other: _____
<input type="checkbox"/> Provide better personal protection	<input type="checkbox"/> Improve atmosphere	<input type="checkbox"/> Other: _____
<input type="checkbox"/> Reprimand / Warning of employees	<input type="checkbox"/> Update disinfection protocols	<input type="checkbox"/> Other: _____
<input type="checkbox"/> Penalty discipline of employees	<input type="checkbox"/> Increase disinfection frequency	
<input type="checkbox"/> Hold employees more accountable	<input type="checkbox"/> Develop better procedures	
	<input type="checkbox"/> Develop better training	

Additional Comments:

# STEP 4:

## Social Distancing Protocols

Complete the social distancing form  
(fillable PDF)

Review with team

Post across your facility

### Social Distancing Protocols

Business name:

Facility Address:

Approximate gross square footage of space open to the public:

**Businesses must implement all applicable measures listed below, and be prepared to explain why any measure that is not implemented is inapplicable to the business.**

#### Signage:

☐ Signage at each public entrance of the facility to inform all employees and customers that they should: avoid entering the facility if they have a cough or fever; maintain a minimum six-foot distance from one another; sneeze and cough into a cloth or tissue or, if not available, into one's elbow; and not shake hands or engage in any unnecessary physical contact.

☐ Signage posting a copy of the Social Distancing Protocol at each public entrance to the facility.

#### Measures To Protect Employee Health (check all that apply to the facility):

☐ Everyone who can carry out their work duties from home has been directed to do so.

☐ All employees have been told not to come to work if sick.

☐ Symptom checks are being conducted before employees may enter the work space.

☐ All desks or individual work stations are separated by at least six feet.

☐ Break rooms, bathrooms, and other common areas are being disinfected frequently, on the following schedule:

- ☐ Break rooms:
- ☐ Bathrooms:
- ☐ Other:

☐ Disinfectant and related supplies are available to all employees at the following location(s):

☐ Hand sanitizer effective against COVID-19 is available to all employees at the following location(s):

☐ Soap and water are available to all employees at the following location(s):

☐ Copies of this Protocol have been distributed to all employees.

☐ Optional—Describe other measures:

#### Measures To Prevent Crowds From Gathering (check all that apply to the facility):

☐ Limit the number of customers in the store at any one time to  (or other enter ) , which allows for customers and employees to easily maintain at least six-foot distance from one another at all practicable times.

☐ Post an employee at the door to ensure that the maximum number of customers in the facility set forth above is not exceeded.

☐ Placing per-person limits on goods that are selling out quickly to reduce crowds and lines.

Explain:

☐ Optional—Describe other measures:

# STEP 5: Worksite Controls



## Engineering controls :

- Physical barriers to minimize potential spread
- Tape/paint marks to identify safe distancing space
- Separating desks
- High efficiency air filters
- Close off lunchrooms/breakrooms
- Establish outside lunch areas when possible
- Establish one-way hallways when possible
- Reconfiguring worksite for social distancing



## Administrative controls:

- Employees to self assess daily
- Require sick workers to stay at home
- Touchless temperature taking at front desk
- Replace all in-person meetings with virtual meetings
- Alternate workdays/shifts to reduce the number of employees in the facility
- Increased sanitation frequency in common areas (break rooms, bathrooms, conference rooms, etc.)



## Other safe work practices

- Increased health and hygiene frequency requirements (handwashing, workstation and equipment sanitizing, PPE/uniform washing)
- Frequent training for donning / doffing PPE

# CDC Posters & Trainings

[www.cdc.gov/hai/pdfs/ppe/ppe-sequence.pdf](http://www.cdc.gov/hai/pdfs/ppe/ppe-sequence.pdf)



[www.cdc.gov/niosh/docs/2010-133/pdfs/2010-133.pdf?id=10.26616/NIOSH-PUB2010133](http://www.cdc.gov/niosh/docs/2010-133/pdfs/2010-133.pdf?id=10.26616/NIOSH-PUB2010133)

[www.cdc.gov/coronavirus/2019-ncov/downloads/StayHomeFromWork.pdf](http://www.cdc.gov/coronavirus/2019-ncov/downloads/StayHomeFromWork.pdf)

[www.cdc.gov/coronavirus/2019-ncov/downloads/stop-the-spread-of-germs-11x17-en.pdf](http://www.cdc.gov/coronavirus/2019-ncov/downloads/stop-the-spread-of-germs-11x17-en.pdf)



# STEP 6:

## Reopening – A Safety Reboot

1. Safety Re-orientation (existing employees and new hires)
2. Daily home health assessment
3. Daily site cleaning inspection
4. Personal protective equipment requirement and training (don/doff)
5. Physical reconditioning & Site Re-orientation
6. Safety Re-boot training

# 1. Re-Hire Safety Orientation





# Re-Hire Onboarding Checklist

*Fit for duty?*

## Re-Hire Safety Onboarding Checklist

Management shall ensure that employees, including:

- a. Temporary employees and
- b. Employees reassigned from other locations are instructed in the hazards of their job, the safety policy, their rights and responsibilities, reporting unsafe conditions and the safety procedures protecting them.
- c. Newly hired employees shall be instructed as follows:

THIS SAFETY TRAINING MUST BE ACCOMPLISHED BEFORE EMPLOYEE ALLOWED TO WORK UNESCORTED IN OR OFF THE FACILITY.

EMPLOYEES NAME: \_\_\_\_\_ DATE: \_\_\_\_\_

EMPLOYEES SIGNATURE: \_\_\_\_\_

ADMINISTRATIVE SAFETY TRAINING COURSES	TRAINING METHOD	COMPLETED
Review Job Description and physical demands	Job Description review	<input type="checkbox"/>
Safety & Health Policy	Employee Safety Handbook	<input type="checkbox"/>
Injury & Illness Prevention Program	Employee Safety Handbook	<input type="checkbox"/>
Code of Safe Practices and Injuries	Employee Safety Handbook	<input type="checkbox"/>
Exposure Control Plan	Policy Review	<input type="checkbox"/>
Daily Health Assessment Check	Form Review	<input type="checkbox"/>
General Social Distancing Protocols	Form Review	<input type="checkbox"/>
Health & Wellness Training	Safety Tip Review	<input type="checkbox"/>

DEPARTMENT SAFETY TRAINING COURSES	TRAINING METHOD	COMPLETED
Personal Protective Equipment Requirements	PPE Form Review	<input type="checkbox"/>
Daily Cleaning and Disinfection Protocols	Form Review	<input type="checkbox"/>
Department JSAs, SOPs, best practices	Policy Review	<input type="checkbox"/>
Department Social Distancing Protocols	Form Review	<input type="checkbox"/>
General Hygiene Protocols	Safety Training Review	<input type="checkbox"/>

MANAGER'S NAME: \_\_\_\_\_

MANAGER'S SIGNATURE: \_\_\_\_\_ Date

**\*\*Maintain a copy of this completed checklist in the Employee's file!**


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## 2. Daily Home Health Check


### COVID-19 DAILY HOME HEALTH CHECK

PLEASE REVIEW THE FOLLOWING QUESTIONS DAILY.  
IF **YES**, TO ANY PLEASE STAY HOME AND NOTIFY YOUR SUPERVISOR


Are you experiencing any of the following?




FEVER (100.4+)




COUGH



SHORTNESS OF BREATH



SORE THROAT



HEADACHE

Have you been in close contact with anyone who has been diagnosed with COVID-19?

Yes ☐ No ☐

Having direct contact with infectious secretions of a COVID-19 case (e.g. being coughed on)

Yes ☐ No ☐

Have you been in close contact\* with anyone who may have COVID-19 but is yet to be confirmed?

Yes ☐ No ☐

Are you currently in close contact with anyone, such as a family member, who is experiencing symptoms or has been confirmed as positive for COVID-19?

Yes ☐ No ☐

If **YES** to any of the above questions, please stay at home and notify:

Supervisor  
Phone:  
Email:

Human Resources Supervisor  
Phone:  
Email: |

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# 3. Daily Cleaning Inspection Form

## Daily Safety & Health Cleaning Inspection

Company Name:		Inspected By:	
Address:		Inspection Date:	
Site Address (if diff):		Inspection Time In:	
Supervisor:		Inspection Time Out:	

1. Has the following entry area equipment been cleansed and are the appropriate disinfectants available?		
<input type="checkbox"/> Phones	<input type="checkbox"/> Sign in pens and visitor logs	<input type="checkbox"/> Other: _____
<input type="checkbox"/> Door handles and knobs	<input type="checkbox"/> Floors mopped daily	<input type="checkbox"/> Other: _____
<input type="checkbox"/> Front desk counter	<input type="checkbox"/> Hand sanitizer available	<input type="checkbox"/> Other: _____
<input type="checkbox"/> Couches / waiting chairs	<input type="checkbox"/> Social distancing signs posted	<input type="checkbox"/> Other: _____
<input type="checkbox"/> Coffee table(s)	<input type="checkbox"/> Masks and gloves available	
2. Have the following restroom equipment been cleansed and appropriate disinfectants available?		
<input type="checkbox"/> Door handles and knobs	<input type="checkbox"/> Soap dispensers full	<input type="checkbox"/> Handwashing signs posted
<input type="checkbox"/> Restroom stalls & dispensers	<input type="checkbox"/> Sanitizer available (if applicable)	<input type="checkbox"/> Other: _____
<input type="checkbox"/> Restroom faucets	<input type="checkbox"/> Touchless trash bins working	<input type="checkbox"/> Other: _____
<input type="checkbox"/> Restroom toilets & flush handles	<input type="checkbox"/> Light switches	<input type="checkbox"/> Other: _____
3. Have the following administrative and common areas been cleansed and appropriate disinfectants available?		
<input type="checkbox"/> Handrails	<input type="checkbox"/> Printers and other equipment	<input type="checkbox"/> Social distancing signs posted
<input type="checkbox"/> Door handles and knobs	<input type="checkbox"/> Kitchen counter tops & tables	<input type="checkbox"/> Social distancing being practiced
<input type="checkbox"/> Conference room tables	<input type="checkbox"/> Kitchen sinks and faucets	<input type="checkbox"/> Other: _____
<input type="checkbox"/> Conference room chairs (armrests)	<input type="checkbox"/> Microwaves & refrigerators	<input type="checkbox"/> Other: _____
<input type="checkbox"/> Floors mopped daily (if applicable)	<input type="checkbox"/> Other kitchen appliances	<input type="checkbox"/> Other: _____
<input type="checkbox"/> Workstations	<input type="checkbox"/> Light switches	<input type="checkbox"/> Other: _____
	<input type="checkbox"/> Handwashing signs posted	
4. Have the following production areas been cleansed and appropriate disinfectants available?		
<input type="checkbox"/> Door handles and knobs	<input type="checkbox"/> Handwashing signs posted	<input type="checkbox"/> Air filters changed monthly
<input type="checkbox"/> Production equipment	<input type="checkbox"/> PPE available and worn	<input type="checkbox"/> Social distancing being practiced
<input type="checkbox"/> Hand tools	<input type="checkbox"/> Employees trained on PPE	<input type="checkbox"/> Vehicle/fleet disinfection complete (if applicable)
<input type="checkbox"/> Supply rooms	<input type="checkbox"/> Social distancing signs posted	<input type="checkbox"/> Other: _____
<input type="checkbox"/> Sanitizer available	<input type="checkbox"/> Fans disinfected	
5. What corrective actions need to be taken? (Check all that apply)		
<input type="checkbox"/> Social distancing training	<input type="checkbox"/> Provide more handwashing signage	<input type="checkbox"/> Other: _____
<input type="checkbox"/> Social distancing engineering controls	<input type="checkbox"/> Require pre-job safety meeting	<input type="checkbox"/> Other: _____
<input type="checkbox"/> Provide more social distancing signage	<input type="checkbox"/> Use safer materials / Supplies	<input type="checkbox"/> Other: _____
<input type="checkbox"/> PPE training	<input type="checkbox"/> Modify shift changes	<input type="checkbox"/> Other: _____
<input type="checkbox"/> PPE enforcement	<input type="checkbox"/> Install / modify safety guards/ devices	<input type="checkbox"/> Other: _____
<input type="checkbox"/> Provide better personal protection	<input type="checkbox"/> Improve atmosphere	<input type="checkbox"/> Other: _____
<input type="checkbox"/> Reprimand Warning of employees	<input type="checkbox"/> Update disinfection protocols	<input type="checkbox"/> Other: _____
<input type="checkbox"/> Penalty discipline of employees	<input type="checkbox"/> Increase disinfection frequency	
<input type="checkbox"/> Hold employees more accountable	<input type="checkbox"/> Develop better procedures	
	<input type="checkbox"/> Develop better training	

Additional Comments:



PPE REQUIREMENTS



CDC RESPIRATOR TRAINING



CDC PPE SEQUENCE TRAINING

## 4. Personal Protective Equipment (PPE)

- Identify PPE requirements and training:
  - Storage and availability of appropriate PPE in areas identified to have potential for occupational exposure
  - Proper use of PPE, including:
    - Face covering (respirator: dust mask or cartridge)
    - Gloves
    - Safety Glasses or Goggles
    - Rubber Boots
    - Apron
  - Proper handling and disposing of contaminated PPE



# 5. Physical Reconditioning & Site Re-orientation



Employees have degenerated during the SIP



Retraining of the body for physical exertion



Loss of kinesthetic sense



Employee turnover and shift in employment needs



New employees unfamiliar with physical job requirements



Loss of facility or site awareness



# SAFETY

## TIP OF THE MONTH

### SAFETY REBOOT – BACK TO WORK

We are all anxiously awaiting to get back to a normal routine. But many of us have lost sight of the pre-crisis rituals and normal business disciplines.

When you think about returning to work, or about working in general, you may find yourself worrying about how you are going to re-engage in a NEW normal.

You may be worried about how you are going to be able keep up with your job demands, whether you are going to make mistakes and the possible exposure to an infectious disease.

These anxieties are normal and our organization is here to support you in this transition back to work. We have prepared an extensive exposure mitigation plan as well as have developed a few safety tips to help successfully ease our team back into their job.

Your safety and well-being are our priority and we will continue to make every effort to keep your staff and community safe.

#### FOUR TIPS TO RETURN TO WORK

1. Re-engage your sleeping pattern
2. Re-engage a healthy diet
3. Stretch throughout the day to increase bloodflow and stamina
4. Ask for help. We are here to support you.



#### PHYSICAL PREPARATION

- Establish pre-crisis sleeping patterns
- Re-engage a healthy diet (vegetables, water, proteins)
- Start increasing daily activities – keep an active schedule
- Increase exercises and stretching routines
- Consider Yoga in the morning and evening at home
- Take walks to keep circulation and stamina levels up
- Warm up prior to work
- When at work stretch during breaks
- Take micro-breaks throughout the day to avoid over-exertion
- Break up larger tasks into manageable action items if overwhelmed
- Continue with frequent hand washing
- Maintain social distances per company requirements
- Stay hydrated throughout the day
- Limit screen time

#### EMOTIONAL & MENTAL PREPARATION

- Talk with your family about returning to work and lean on their support (options for support include family, friends, pets & professional)
- Meditation can help calm the mind and provide balance
- Break up larger tasks into manageable action items if overwhelmed
- Discuss concerns/ideas openly with employer, you are not alone
- Plan for and visualize solutions to concerns
- Prepare yourself for possible changes in processes and procedures
- Talk to your family about returning to work
- Talk to your co-workers/friends about returning to work

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# SAFETY

## TIP OF THE MONTH

### BACK TO WORK BACK TO SAFETY

Distraction, falling out of routine, reporting for work exhausted, forgetting about common hazards, not being aware of workplace changes, frustration, poor job planning and organization, depression and mood swings are all common contributors to workplace incidents after employees spend time away from work.

Safety is a routine, a routine that can be easily broken by time away from work and reestablishing a good safety routine starts at home. A good safety routine starts with getting the proper amount of sleep prior to going to work.

This can be especially hard after periods of sheltering in place, social isolation and other pandemic anxieties. It helps to have a definite plan so activities and crisis distractions can come to an end in time to restore normal order to your home and work environment.

Returning to a normal home routine is one key to returning to a normal work routine.

The hazards of our job remain, regardless of our mood or emotional state. Maintaining a good safety attitude and level emotional state is a habit that may need to be relearned after time away.



#### REESTABLISH A GOOD SAFETY ROUTINE

- Envision putting on your seatbelt, the route you will drive to work, even the parking space in which you normally park.
- Recall workplace hazards that all workers must watch out for and be aware of as they travel about the facility.
- Scan your path of travel for hazards, the objects and obstacles you were used to may have been moved, new items may be stored in areas you are not expecting and walkways and safe travel areas you have been used to may have been rerouted.
- Reestablish good safety habits before starting to work.
- Review the critical steps of your job and the specific things you must do to stay safe.
- Remind yourself of any protective equipment required to do the job.
- Consider a slower pace until your skills become fine-tuned again.
- Recognize if you are getting behind in your work, frustrated or just feeling fragmented, don't work faster. Take a break and realign yourself.
- Envision how you have successfully performed actions you normally take.

#### REESTABLISH A GOOD ATTITUDE

- Maintaining a good safety attitude and level emotional state is also a habit that may need to be realigned after time away from work.
- Reestablishing situational awareness may be easier for some of us.
- When we return to work, no matter the reason we are away and no matter what state of mind, we must guard against being distracted when it comes to safety.
- The hazards of our job remain, regardless of our mood or emotional state
- After being away from work, be aware that your safety skills, work habits and even your attitude may need to be realigned pre-vacation.

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## 6. Safety Reboot training

# Why...



Compliance with  
Fed, State, Local  
requirements  
(OSHA, CDC,  
County Health  
Departments  
and Employees)



#flattenthecurve  
We are not out  
of this yet



Keep your  
employees,  
clients and  
communities  
you serve safe



Satisfy  
insurance  
renewals



It's the right  
thing

# Next steps...



ORGANIZE YOUR  
RE-ENTRY TOOLS



REVIEW WITH EACH  
NEW HIRE



MANAGE, VERIFY &  
MAINTAIN RECORDS



RETURN TO WORK!







# COVID Resources

- Exposure Control Plan
  - Policies
  - Training
  - Forms
- Remote Work Program
  - Ergonomic policy
  - Remote Work Program
  - Forms
  - Training
- Return To Work program
  - Policies
  - Training
  - forms



[www.esminsite.com/covid-compliance-center](http://www.esminsite.com/covid-compliance-center)



<https://covid19.bbinsurance.com/>



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