

A CLEAN RETURN TO WORK

This is NOT professional guidance or legal advice. Follow all CDC guidelines and regulatory requirements. Always Document, Implement, and Monitor.

SPEAKER BIOS

Rich Volin

- Owner, Volin Employment Law, PLLC
- Focus on employment and business law, contracts, dispute resolution, litigation, and arbitration/mediation
- Licensed in Virginia, Maryland, and DC



Phil Harper

- Owner-Operator, WellNest Professional Cleaning
- Accredited Infection Prevention Expert as certified by the Academy of Cleaning Excellence
- ISSA Certified Custodial Technician
- Former CPA and KPMG Alum



Assessing Priorities

Competing Priorities:

- Individual employee's rights (e.g. ADA)
- Other employees' safety (e.g. OSHA)
- Customer safety
- Business compliance and liability

Act reasonably and apply best practices to protect the health and safety of staff and customers

Guidance Sources

CDC

OSHA

EEOC

DOL - <https://openingworkplaces.ideascale.com/>

State and local governments

(Also, review Employment Practices Liability Insurance (EPLI) policy)

CDC Guidance

CDC Activities and Initiatives Supporting the COVID-19 Response and the President's Plan for Opening America Up Again (May 2020)

<https://www.cdc.gov/coronavirus/2019-ncov/downloads/php/CDC-Activities-Initiatives-for-COVID-19-Response.pdf>

Appendix F: Setting Specific Guidance

- Child Care Programs
- Schools and Day Camps
- Employers with Workers at High Risk (65 and older, long-term care facilities, underlying conditions)
- Restaurants and Bars
- Mass Transit Administrators

CDC Guidance

Workplace Decision Tool: <https://www.cdc.gov/coronavirus/2019-ncov/community/organizations/workplace-decision-tool.html>

Should you consider opening?

- Will reopening be consistent with applicable state and local orders?
- Are you ready to protect employees at higher risk for severe illness?

Are recommended health and safety actions in place?

- Hygiene, cleaning, disinfection, ventilation, social distancing, training, modified travel/telework, etc.

Is ongoing monitoring in place?

- Checking for signs/symptoms of employees daily upon arrival, as feasible
- Encourage anyone who is sick to [stay home](#) - plan for if an employee gets sick
- Regularly communicate and monitor developments with local authorities and employees
- Monitor employee absences and have flexible leave policies and practices
- Be ready to consult with the local health authorities if there are cases in the facility or an increase in cases in the local area

WORKPLACES DURING THE COVID-19 PANDEMIC



The purpose of this tool is to assist employers in making (re)opening decisions during the COVID-19 pandemic, especially to protect vulnerable workers. It is important to check with state and local health officials and other partners to determine the most appropriate actions while adjusting to meet the unique needs and circumstances of the local community.

Should you consider opening?

- ✓ Will reopening be consistent with applicable state and local orders?
- ✓ Are you ready to protect employees at **higher risk** for severe illness?

ANY
NO



ALL
YES

Are recommended health and safety actions in place?

- ✓ Promote **healthy hygiene practices** such as **hand washing** and **employees wearing a cloth face covering**, as feasible
- ✓ Intensify **cleaning, disinfection**, and ventilation
- ✓ Encourage **social distancing** and enhance spacing between employees, including through physical barriers, changing layout of workspaces, encouraging telework, closing or limiting access to communal spaces, staggering shifts and breaks, and limiting large events, when and where feasible
- ✓ Consider modifying travel and commuting practices. Promote telework for employees who do not live in the local area, if feasible.
- ✓ Train all employees on health and safety protocols

ANY
NO



ALL
YES

Is ongoing monitoring in place?

- ✓ Develop and implement procedures to check for **signs and symptoms** of employees daily upon arrival, as feasible
- ✓ Encourage anyone who is sick to **stay home**
- ✓ Plan for if an employee gets sick
- ✓ Regularly communicate and monitor developments with local authorities and employees
- ✓ Monitor employee absences and have flexible leave policies and practices
- ✓ Be ready to consult with the local health authorities if there are cases in the facility or an increase in cases in the local area

ANY
NO



ALL
YES

OPEN AND
MONITOR



EEOC Guidance

Main page: <https://www.eeoc.gov/coronavirus>

EEO laws: <https://www.eeoc.gov/wysk/what-you-should-know-about-covid-19-and-ada-rehabilitation-act-and-other-eeo-laws>

- EEO laws continue to apply “but they do not interfere with or prevent employers from following the guidelines and suggestions made by the CDC or state/local public health authorities about steps employers should take regarding COVID-19.”
- Generally, measuring an employee's body temperature is a medical exam, but due to COVID-19, “employers may measure employees' body temperature” and
- Employers “may take steps to determine if employees entering the workplace have COVID-19 because an individual with the virus will pose a direct threat to the health of others.”

OSHA Guidance

Main page: <https://www.osha.gov/SLTC/covid-19/controlprevention.html#interim>

Follow CDC guidelines, including sanitization, etc.

Preparing Workplaces for COVID-19: <https://www.osha.gov/Publications/OSHA3990.pdf>

Reporting Requirements: <https://www.osha.gov/memos/2020-05-19/revised-enforcement-guidance-recording-cases-coronavirus-disease-2019-covid-19>

COVID-19 is a recordable/reportable illness if confirmed case, work-related, and involves death, days away from work, restricted work or transfer, medical treatment beyond first aid, loss of consciousness, significant diagnosed injury or illness.

“Because of the difficulty with determining work-relatedness, OSHA is exercising enforcement discretion to assess employers' efforts in making work-related determinations.”

OSHA Guidance

General Duty Clause requires each employer to furnish a place of employment that is “free from recognized hazards that are causing or are likely to cause death or serious physical harm to his employees.” (*See also* VA Code § 40.1-51.1 and MD Code § 5-104)

29 CFR 1910.1200 – Hazard communication - requires employers to provide information to employees about the hazardous chemicals to which they are exposed, by means of a hazard communication program, labels and other forms of warning, safety data sheets, and information and training

OSHA: “Workers who conduct cleaning tasks must be protected from exposure to hazardous chemicals used in these tasks. In these cases, the PPE (29 CFR 1910 Subpart I) and Hazard Communication (29 CFR 1910.1200) standards may apply, and workers may need appropriate PPE to prevent exposure to the chemicals.”

State and Local Guidance

Executive Orders

- DC - <https://coronavirus.dc.gov/> and <https://coronavirus.dc.gov/recovery-business>
- Maryland Road to Recovery - <https://governor.maryland.gov/recovery/>
- Virginia – (Phase 2) <https://www.governor.virginia.gov/media/governorviriniagov/governor-of-virginia/pdf/Virginia-Forward-Phase-Two-Guidelines.pdf>

(Look for enhanced cleaning, sanitization, disinfecting, etc.)

County Level - (<https://www.montgomerycountymd.gov/HHS/RightNav/reopening/index.html>)

OSHA State Plans - <https://www.osha.gov/stateplans/>

- Maryland Occupational Safety and Health (MOSH)
- Virginia Occupational Safety and Health (VOSH) Program

State Departments of Labor

Other Steps to Consider

Covid19 Coordinator

- Single source allows consistency and avoids mis/noncommunication
- Easier to track messaging (and liability)
- Builds employee confidence

Anonymous Complaint System

Review or Add New Policies:

- Leave (e.g. to care for sick family member or for school closings)
- Telework
- Non-discriminatory application

Cleaning and Disinfecting 101

Please Always Remember...

Cleaning only removes soil and some germs.

Disinfecting kills remaining germs.

Surface must be CLEANED prior to disinfection procedures. Always clean first, disinfect second.

READ AND FOLLOW THE LABEL!!!



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Enhanced Cleaning and Disinfecting

How frequent do you need to clean and disinfect?

- No “one size fits all” approach
- What are “Touch-Points”?
- Clients should perform risk assessment based on your specific workforce
- Incorporate Brand Strategy and impact on workforce anxiety

Understand Primary Risks – Access

Outside risks can start a chain of infection that will move through an office. Cleaning and disinfecting breaks chains of infection.

- How are entrants commuting to the space? (Metro, Bus, Personal vehicle?)
 - Commuting via public transportation = Higher Risk
 - Commuting via personal vehicle = Lower Risk
- What touchless technologies exist, e.g. touchless entry, touchless within restrooms, etc.?
 - Limited touchless technologies = Higher Risk
 - Touchless technologies throughout = Lower Risk

Understand Primary Risks – Density & Interactions

COVID-19 and other Infections are known to spread via person-to-person contact. Close interactions will produce Infection Risk and drive anxiety.

- Who will be in the office and when?
 - High Density = Higher Risk
 - Low Density = Lower Risk
- How will the space be used?
 - Many meetings and interactions = Higher Risk
 - Quiet, limited interactions = Lower Risk
- What gathering spaces are used (kitchens, sitting areas, waiting rooms, conference rooms)?
 - Active kitchen or gathering space = Higher Risk
 - Quiet, limited gatherings = Lower Risk

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Client's Plan – In-housing Cleaning Staff

Direct Hire, Office Manager, Safety Manager

- Policies, training, OSHA risk (don / doff PPE, hazards of cleaning chemicals) for in-house cleaning personnel
- Leverage trainings and certifications from credible sources
 - [CDC videos](#)
 - [Global Biorisk Advisory Council \(GBAC\) “Microbial Warrior” workshop](#)
- Building Certifications
 - [GBAC Star Facility Accreditation](#)
 - [WELL Health-Safety Rating for Facility Operations and Management](#)
- Advice – Hand Sanitizer, Supplies, PPE, Laundry
- **READ AND FOLLOW THE LABEL!!!!**



Client's Plan – Outsourcing

Outsourcing Options

- Corporate Infection Prevention Programs
 - Nightly Janitorial
 - Day Porter Services
 - Deep Cleanings (with electrostatic spraying)
 - Combination of the above
- What to look for with a janitorial provider
 - License and Insurance
 - Security
 - Workforce Training
 - Certifications (ISSA, GBAC) and Expertise

New Technologies and Measuring Outcomes

- UV Light
- Electrostatic spraying
- Anti-microbial coatings
- Measuring outcomes via markers
- Measuring outcomes via ATP Hygiene Monitoring

CONTACT INFO



Richard M. Volin

rich@volinemploymentlaw.com

(703) 988-1460



Phil Harper

phil@gowellnest.com

(703) 431-0504

