OFFICE OF STATE HUMAN RESOURCES

PANDEMIC SAFETY FOR STATE WORKSITES

BARBARA GIBSON
State Human Resources Director

SCARLETTE GARDNER, ESQ.
Division Director, Safety Health & Workers’ Compensation

Report compiled by the North Carolina Office of State Human Resources
Issued December 15, 2020 | Revised March 3, 2021
Introduction

The health and safety of state employees is the highest priority and shared responsibility of employees and State agencies. State agencies should demonstrate their commitment to working collectively with employees toward improving the physical environment of shared worksites. These improvements are for the benefit of all and to make employees feel confident of their health and safety at work given COVID-19 related workplace safety measures implemented in response to the COVID-19 pandemic State of Emergency declared on March 10, 2020.

The Occupational Safety and Health Act’s (OSHA) general duty clause requires employers to provide worksites free from recognized hazards likely to cause death or serious bodily harm. State agencies will make many decisions pertaining to onsite conditions for mandatory and nonmandatory employees who must report to their worksite. Changing circumstances may require agencies to be flexible and alter their original plans to ensure public health and safety.

This document provides general guidance to State agencies concerning issues pertaining to mandatory and non-mandatory state employees reporting to work at non-healthcare and non-corrections/custody worksites pursuant to the State’s current and evolving guidance regarding worksite safety and COVID-19 public health issues.
In order to reduce the risk of COVID-19 exposure to state employees, visitors, contractors, vendors, and volunteers entering State owned and leased property, this guidance should be considered based on individual agency functions, physical layout, and available resources to implement public health measures best suited for the specific worksite.

Agencies may wish to permanently implement parts of this guidance as some issues may continue beyond the duration of ongoing public health concerns for the COVID-19 pandemic.

As the State continues its dimmer-switch approach to the reopening process, employers are encouraged to continue teleworking to the greatest extent possible and maintain all DHHS recommended public health measures pertaining to employee behavior expectations, maintaining physical distancing in workspaces, and enhanced sanitation measures. Current and regularly updated general guidance for businesses is provided by DHHS: https://files.nc.gov/covid/documents/guidance/businesses/NCDHHS-Interim-General-Guidance-for-Businesses-and-Organizations.pdf

Every effort has been made to ensure updated information and resource links are included in this document as of the date of issuance; however, as the COVID-19 pandemic continues to develop, please be advised that this guidance is subject to change pursuant to newly issued or revised federal or state guidance. OSHR will update this document periodically; however, agencies are advised to recheck all listed sources to obtain the most recently updated information.

OSHR encourages all State agencies to require that their employees follow DHHS’s **Know Your Ws** guidance:
1. Wear a cloth face covering over your nose and mouth.
2. Wait six feet apart. Avoid close contact.
3. Wash your hands or use alcohol-based hand sanitizer when hand washing facilities are unavailable.
# Table of Contents

## Agency Designation of COVID-19 Coordinators for Worksites

## Worksite Physical Alteration Considerations – State Owned and Leased Worksites

## Employee Time and Leave Management

## Agency Considerations Regarding Onsite Work

### Daily Operations Considerations

**Part A. Use of Face Coverings**

**Part B. Social Distancing**
- High Traffic or Public/Consumer Facing Areas
- Individual Workspaces
- Common Areas
- Employee or Public Entrance/Lobby/Reception Areas
- Elevators
- Breakrooms/Kitchens
- Fitness Facilities
- Lactation Rooms
- Conference Rooms/Classrooms
- In-person Meetings
- Travel
- Shared Equipment/High Touch Surfaces

**Part C. Building Cleaning**

**Part D. Personal Hygiene**

**Part E. State Agency Purchases of Personal Protective Equipment (PPE)/Cleaning/Supplies/Floor Markers**

**Part F. Schedule Management**

**Part G. Daily COVID-19 Self Screening for Employees Reporting Onsite**
- NC State Employee Screening Tool for Employees Reporting Onsite
- Customized Agency Self Screening for Employees Reporting Onsite

**Part H. Handling of COVID-19 Symptomatic Employee at Worksit**

**Part I. Worksite Cleaning Response for COVID-19 Symptomatic/Positive Employee**

**Part J. Handling of COVID-19 Positive Employee Notification**

**Part K. Multi-agency Worksite COVID-19 Coordination**

**Part L. Employee Relations, EEO and ADA Considerations**
- Responding to Increased-risk Employees Regarding COVID-19
- Employee Relations (ER)
- Equal Employment Opportunity (EEO) Considerations
- ADA and COVID-19 FAQs
- Summary of Important Issues Addressed by the EEOC
- Employee Assistance Program (EAP)

**Part M. Workers’ Compensation**

## Communications Planning and Execution

**Part A. Training**

**Part B. Signage**

**Part C. FAQs**

**Part D. Governor’s Executive Orders**

**Part E. Applicable OSHR Policies – https://oshr.nc.gov/policies**

## COVID-19 Research References
Agency Designation of COVID-19 Coordinators for Worksites

OSHR encourages State agencies to designate a Human Resources staff member for each worksite as “COVID-19 Coordinator.” This HR staff member should be fully aware of the agency’s plans, processes, and ongoing actions to protect mandatory and non-mandatory employees from COVID-19 exposure at their worksite and serve as a point of contact for all employees with questions or concerns.

The worksite COVID-19 Coordinator should be identified clearly in communications to employees and supervisors/managers as their contact for all questions or concerns regarding COVID-19 worksite related matters. State agencies should instruct employees to contact their designated COVID-19 Coordinator(s) with COVID-19 related questions and provide easily accessible contact information via worksite signage, email notification, etc. State agencies may wish to set up a separate email account that is constantly monitored to facilitate receipt of questions and expedite appropriate responses.

The worksite COVID-19 Coordinator may delegate questions/concerns to appropriate staff members for proper and timely handling but should ensure a response is always provided to each question.

Worksite Physical Alteration Considerations – State Owned and Leased Worksites

After performing a health and safety risk assessment and BEFORE making any physical facility changes or enhancements to promote COVID-19 safety (i.e. installation of physical barriers, space reconfiguration, etc.), state agencies should:

For State owned worksites: Obtain approval from State Construction or other appropriate building maintenance designee for approval of any physical changes to facilities as such alterations could potentially cause ADA, egress, and life safety issues.

For leased worksites: Consult with the State Property Office, Leasing and Space Planning, and the property management company regarding such matters.
Each agency is responsible for ensuring adherence to applicable building and safety codes with regard to all proposed physical worksite alterations.

State agencies may implement any social distancing guidelines for individual workspaces included in these Guidelines without consultation or approval. Agencies should consult with DOA Facilities Maintenance on their availability to assist with moving employees to alternate office space or moving furniture.

Facilities Maintenance is assisting with installing plexiglass in public facing areas only in DOA maintained facilities on a first come, first serve basis as resources allow. Agencies will be invoiced for all associated costs.

DOA Safety staff have installed some necessary signage in public facing areas in DOA maintained buildings. Additional signage will be distributed to agencies upon request while supplies last.

**Employee Time and Leave Management**

State agencies should consult the most recently updated guidance from OSHR and OSC regarding utilization of Integrated HR Payroll System (also referred to as BEACON) new and existing specific codes and recording requirements related to employee time, leave, workers' compensation leave of absence, etc. for COVID-19 related situations.

**Agency Considerations Regarding Onsite Work**

Phase 3 of the State’s reopening includes the same guidance for State Government worksites as previously stated including continuing teleworking to the greatest extent possible and wearing cloth face coverings when an employee is or may be within six feet of another person. In addition, previously published guidance related to social distancing, frequent hand washing and use of hand sanitizer, regular cleaning of high-touch surfaces, and limits on mass gatherings remains in effect in light of ongoing public health concerns and the State’s coordinated pandemic response.
The need for employees to be physically present at a State worksite to perform work duties should be balanced against the risk of the employee contracting or exposing others to COVID-19.

It is recommended that State agencies enable employees to self-identify as being at increased risk for severe disease and to consider reassigning work where possible to minimize face-to-face contact and allow them to maintain a distance of six feet from others, or to telework.

If a worksite has frequent outside visitors, consider designating a specific time for employees at increased risk to arrive or leave the office with less exposure to the general population (such as early morning or late afternoon).

**Daily Operations Considerations**

**PART A. Use of Face Coverings**

Employees who are able to do so are expected to wear cloth face coverings that cover the nose and mouth at all times while inside agency worksites, unless alone in an office or personal space. Here are some common scenarios when employees should wear cloth face coverings:

- Traveling to/from vehicle and worksite and where social distancing of six feet or greater cannot be maintained
- In common areas (hallway, restroom, elevator, lobby, etc.)
- In an office, breakout room, meeting room, or training room where two or more are gathered even if distance of six feet or greater can be maintained.

Face shields are not an acceptable substitute for cloth face coverings. Face shields may be used in addition to cloth face coverings.

NCDHHS has additional recommendations to improve mask wearing based on guidance from the CDC. To ensure masks are protective as possible, NCDHHS recommends:

- Make sure your mask fits snugly against your face and covers your nose and mouth. To help with a snug fit, you can use a mask with a metal strip along the top of the mask.
- Use two or more layers for your face covering. You can do this by wearing a cloth face covering with two or more layers or by wearing one disposable mask (sometimes referred to as a surgical mask or a medical procedure mask) underneath a cloth mask.
• Do not wear two disposable masks.
• Make sure you can see and breathe easily.
• For additional information on how to improve mask wearing, please see updated guidelines from the CDC.

Employees required to work in increased risk settings with possible close contact with COVID-19 positive individuals or infected materials must be supplied the appropriate PPE by the agency. PPE is provided to onsite state employees at no charge.

Employees may utilize cloth face coverings and other PPE of their choice that do not interfere with completion of work duties so long as it is in good taste and any designs, graphics, or logos present a professional image acceptable to the general public.

Individual worksites may provide disposable face coverings that cover the nose and mouth for visitors.

PART B.
Social Distancing

Intentional actions to decrease density and alter traffic patterns within worksites with the goal of maintaining at least six feet of space between persons present.

High Traffic or Public/Consumer Facing Areas
Conduct a detailed worksite health and safety risk evaluation of the physical workspace layout to determine areas where modifications may be considered.

Reduce number of worksite entrances while maintaining code compliance to direct occupants to use monitored routes.

In areas where lines may form (entry doors, elevators, food areas, break rooms, waiting queues, etc.), use floor markers approved by facility services or the property management company to demark at least six feet between persons.

Post signage with directional and social distancing instructions where lines may form.
Install one-way directional signage including floor markers (stickers or tape) to direct foot traffic in locations where maintaining social distance is difficult.

**Individual Workspaces**
Increase space between desks.

Avoid desk sharing.

Cubicles with minimum 65-inch high partitions are recommended for open areas or workstations within six feet of each other.

Suggestions to accomplish social distancing in workspaces:
- Make new seating reassignments to different locations.
- Assign staggered work schedules to ensure minimum distancing.
- Only use alternate desks/tables and chairs (checkerboard), disable or remove unused alternate desks/tables and chairs altogether.
- Add physical barriers between workstations (height adjustable panels for sit/stand desks).
- Consider arranging workspaces so that staff sit back to back in lieu of facing each other.

If you need additional workstations, add desks/tables to spaces previously used for group activities. For example, repurpose large conference rooms, training/meeting rooms, cafes or breakrooms, and other common areas.

Post signs with conference/meeting/training room space occupancy limit of a minimum of 50 square feet person. This exceeds the CDC Guidance of six feet physical distance (36 square feet) per person. (Source: https://www.cdc.gov/coronavirus/2019-ncov/daily-life-coping/returning-to-work.html)

Prohibit shared use of small spaces by groups and convert to single occupant use only. Close/forbid use of some spaces.

**Common Areas**
Access to and utilization of common areas should adhere to social distancing and cleaning/hygiene guidelines.

Instruct employees to only use common areas closest to their workstation.

Employees should wait to use common areas until they can maintain a safe distance, at least six feet away, from other individuals.

**Employee or Public Entrance/Lobby/Reception Areas**
Install physical barriers at reception areas/customer service counters.
Disable/decommission/remove registration kiosks/touchscreens or devise a way to cover with plastic or vinyl and decontaminate frequently.

Where feasible, install touchless visitor registration systems via personal mobile phone or other options in lieu of paper process.

Use disposable, one-time use sticker security tags rather than reused clips or lanyards. Remove magazines and pamphlets to reduce public touchpoints.

Maintain process for handling of personal deliveries to individual employees, i.e. food, florist, etc.

Maintain process for handling of business deliveries from other state agencies, vendors, delivery services (FedEx, UPS, U.S. Postal Service), etc.

**Elevators**
Encourage persons to observe social distancing guidelines when using elevator cars.

Encourage persons to use stairs when possible.

Monitor capacity, especially during high traffic times.

Post signage with passenger limits.

Utilize floor markers approved by facility services or the property management company denoting where to stand and capacity monitoring, especially during high traffic times.

**Breakrooms/Kitchens**
Ban communal food items for sharing including as part of office events, i.e. birthday/retirement/special occasion.

Offer prepackaged foods or foods in sealed containers.

Provide disinfecting wipes and cleaning supplies in areas with shared refrigerators, microwaves, coffee machines, dishes, silverware, food storage containers, etc., with instructions to disinfect individual items after each use.

Provide disinfecting wipes in vending machine areas with instructions to wipe touchpads and change slots after use.

Reduce capacity, i.e. tables and chairs, to allow for social distancing given square footage.

Disable, cover or otherwise prevent the use of water fountains that do not include touchless features.
Fitness Facilities
Temporarily close fitness facilities.

Lactation Rooms
Determine if procedural changes need to be made to ensure strict compliance with thorough sanitization protocols.

Conference Rooms/Classrooms
Communicate room capacity with a minimum of 50 square feet person via signage and room reservation tools. This exceeds the CDC Guidance of six feet physical distance (36 square feet) per person. (Source: https://www.cdc.gov/coronavirus/2019-ncov/prevent-getting-sick/social-distancing.html)

Decommission and re-purpose large gathering spaces.

Reduce capacity, i.e. remove tables, desks and chairs, to allow for social distancing given square footage.

Cover or otherwise prohibit the use of or remove unnecessary fabric upholstered chairs.

Remove shared conference phones and encourage use of State issued laptop softphones for teleconferences.

Remove remote control handsets and provide instructions for manual equipment use instead.

Remove whiteboard pens and erasers and encourage employees to bring and manage their own.

Provide whiteboard cleaning solution and disposable wipes adjacent to every board.

Disable/decommission room reservation panels outside meeting rooms.

In-person Meetings
Agency sponsored in-person workshops, trainings, or events for employees should be modified to teleconference format unless attendance limits are met and social distancing can be maintained.

If on-site training is considered mandatory for continuation of a required certification/license and meets state, local, or agency requirements, agency trainings should only be held for small groups where social distancing can be practiced.

Assess the need for in-person meetings within worksites and utilize non-contact options to the extent possible, i.e. phone calls, video conferencing, etc.
Restrict or consider limiting any nonessential visitors, volunteers, and activities involving external groups or organizations.

Employees and visitors attending in-person meetings should wear a face covering that covers the nose and mouth and maintain at least six feet distancing between attendees.

**Travel**
Employees should ride separately when using state vehicles unless supervisor approval is obtained for two or more persons to ride together for a business purpose.

Employees must wear cloth masks when in vehicles with anyone while performing work duties.

State vehicles are considered shared spaces, so it is critical that you clean and disinfect high-touch surfaces in vehicles before and after each use. A personal, state, or rental vehicle used to transport another occupant for business purposes should be treated the same way.

**Shared Equipment/High Touch Surfaces**
Use shared equipment closest to workstation or as specifically assigned and decontaminate frequently with sanitizer wipes or an EPA approved disinfectant.

Pay special attention to areas where printers, copiers and other types of shared equipment are located, and consider moving the equipment to separate locations or to a larger room with social distancing space.

Consider limiting shared office supplies.

Clean and disinfect frequently touched objects and surfaces. Solid surfaces like workstations, handrails, doorknobs, etc. can be cleaned with soap and water before disinfection.

Soap and water should not be used on electronic equipment such as telephones, keyboards, etc. Cleaning and disinfecting wipes are the safer option.

To disinfect, use these EPA-registered disinfectants. A list is available at List N: Disinfectants for Coronavirus (COVID-19), https://www.epa.gov/pesticide-registration/list-n-disinfectants-coronavirus-covid-19.

**PART C.**
**Building Cleaning**

Ongoing awareness and partnership between employees and agencies to prevent the physical spread of COVID-19 at worksites will help maintain a healthy workforce.
Provide job safety analysis to protect employees conducting cleaning operations.

Provide appropriate PPE and determine additional cleaning duties.

Provide training to meet additional requirements.

Secure PPE/supplies storage and designate specific staff to manage stock and distribute items.

Provide individual workspaces with necessary cleaning/disinfection and PPE supplies to eliminate supply room visits.

DOA Facilities Management has provided the following cleaning guidelines for State owned facilities:

**Routine Cleaning/Sanitizing:** Performed on an on-going basis throughout the day.

a. All janitorial staff instructed to use EPA approved COVID-19 cleaning products to sanitize and disinfect.

b. All janitorial staff instructed to perform routine environmental cleaning of the buildings focusing on high touch areas in the workplace such as doorknobs, water fountains, handrails, elevator wall/buttons. In bathrooms, dispensers and faucets are sanitized.

**Enhanced Cleaning/Sanitizing:** Performed immediately after person(s) confirmed or suspected to have COVID-19 have been in a worksite.

a. Disinfection of the affected person(s) workstation(s) to include keyboard(s), telephone(s), mouse(s).

b. Common Area Disinfection to be performed in areas the affected person may have been – rest rooms, conference rooms, lobbies, elevators, break rooms. Items disinfected: tabletops, chairs (soft and hard surface), file cabinet handles, etc., doorknobs, doors, railings, office machine touch pads (fax and copiers), water fountains, etc.

c. Agencies have discretion to hire contractors to perform additional cleaning. All costs incurred as a result of using cleaning/disinfection services are the responsibility of the requesting agency.

Preferably, COVID disinfection services should occur after hours to ensure all areas can be accessed.

Building closures until disinfection work is completed is at the discretion of the agency.

Agencies that hire contractors for cleaning services may be eligible for reimbursement through the FEMA Public Assistance Program administered by the North Carolina Emergency Management (NCEM) Recovery Section. Guidance on what expenses are
eligible for reimbursement on any given date and how to apply for FEMA Public Assistance can be found at: https://www.ncdps.gov/our-organization/emergency-management/disaster-recovery/covid-19-public-assistance.

**Below is a Summary of the FEMA Public Assistance Program Process:**

1. Register as an applicant in the FEMA Grants Portal.
2. Participate in an Applicant Briefing. Applicant briefings are available on demand at the webpage listed above. Applicant Briefings can be requested through the Public Assistance Hotline at 919-825-2548 or email pahotline@ncem.org. The Applicant Briefing will provide greater details about the Public Assistance grant program.
3. Submit a Request for Public Assistance.

   The FEMA Public Assistance Emergency Protective Measures grant was activated as a result of the President’s national emergency declaration for the coronavirus (COVID-19) pandemic on March 13, 2020. The effective date for expense eligibility is January 20, 2020. Currently, there is no deadline to submit a Request for Public Assistance. The deadline will be announced at a later date. Expenses eligible for reimbursement may vary based on FEMA Guidance in effect on any given date.

**IMPORTANT UPDATE:** FEMA issued an interim policy, COVID-19 Pandemic: Work Eligible for Public Assistance, to clarify eligible work under the Public Assistance program in response to COVID-19 that will apply to work performed on or after September 15, 2020. A copy of this policy is available at: https://www.fema.gov/sites/default/files/2020-09/fema_policy_104-009-19_PA-eligibility-policy-covid.pdf.

NCEM Public Assistance will work with eligible State agencies.

For agencies in leased space, the property owner is responsible for infected worksite cleaning and disinfection. Agencies should communicate with property management to obtain details.

Contact the facilities maintenance personnel or contractor for your facility to ensure ventilation systems operate properly and increase circulation of outdoor air as much as possible. Do not open windows and doors if they pose a safety or health risk to people using the facility. (DHHS Interim General Guidance for Businesses and Organizations issued December 8, 2020).


Determine areas that require thorough and more frequent cleaning due to heavy usage such as event centers, conference rooms, and restrooms and communicate needs to housekeeping staff.
PART D.  
Personal Hygiene

Post signage promoting healthy hygiene/COVID-19 spread prevention measures such as:
- Frequent and thorough handwashing with soap and water for at least 20 seconds.
- Respiratory etiquette: covering coughs and sneezes.
- Use of cloth face coverings, especially if social distancing cannot be maintained.
- How to properly clean cloth face coverings.
- Do not touch eyes, nose, and mouth with unwashed hands.
- Use tissues once and then discard.
- Clean, sanitize, and disinfect frequently touched surfaces at least daily and shared objects between use.
- Discourage physical contact between employees, i.e. handshakes and hugs.
  Increase awareness around the six-foot rule.

Provide employees space to store and secure personal items separately from others while at their worksite.

Make hand sanitizer (at least 60 percent alcohol) readily available in portable or wall-mounted dispensers at common touch points including doorways both inside and outside, stairs, elevator lobbies, and all other common areas.

Maintain tissues and provide plastic-lined, touchless trash cans for disposal.

Provide disposable disinfectant wipes at common and shared touchpoints throughout the worksite, i.e. doorknobs, light switches, keypads, printer/copier/scanner/fax machines, remote controls, and more, etc.

Provide disposable disinfectant wipes for employees to daily wipe down personal workspace, i.e. phone, keyboard, mouse, mousepad, wrist rest, desk, chair, etc.

Limit any sharing of tools, equipment, or supplies that are not easily cleaned, sanitized,
or disinfected.

Install plastic or vinyl covers over shared keypads or keyboards that can be easily disinfected after each individual use.

PPE may be needed for employees who clean or remove trash along with separate trash receptacles for its disposal.

PART E.
State Agency Purchases of Personal Protective Equipment (PPE)/Cleaning Supplies /Floor Markers

Ordering Personal Protective Equipment (PPE)
DOA State Purchase & Contract (P&C) has established a portal for State agencies to continually order the following PPE supplies as needed:

- Alcohol wipes
- Bleach wipes
- Cloth face covers
- Liquid disinfectant
- Disinfectant spray
- Face shields
- Gloves
- Gowns
- Hand sanitizer
- Disposable masks – non-surgical, surgical
- Shoe covers
- Theraworx advanced hygiene and barrier system, liquid foam
- Thermometer – disposable, non-contact

All orders for PPE must be placed by accessing the Service Now Portal website, https://ncgov.service-now.com/sp_ppe

All registered Purchasing Directors and delegates can place orders for their respective agencies. If a Purchasing Director or delegate is not registered to access the portal they can send an email to ppesupplyquestions@doa.nc.gov to request access.

PPE items can be delivered locally in Raleigh by agency request or picked up by the agency.

PPE items can be shipped to various agency locations which will result in billing of shipping charges to the agency by the Mail Service Center.

A website has been established that includes guidance, frequently asked questions
(FAQs) and instructions to access and navigate the Service Now Portal: https://ncadmin.nc.gov/about-doa/divisions/purchase-and-contract/consolidated-ppe-supply-service-portal

All questions regarding PPE, delivery, or portal access should be directed to: ppesupplyquestions@doa.nc.gov or the PPE Consolidated Supply Management Warehouse at: 919.733.6540, EXT 4640.

Multiple designs of floor decals demonstrating and encouraging six feet social distancing and arrow decals to direct one-way foot traffic with non-damaging adhesive may be purchased from Correction Enterprises: www.correctionenterprises.com or 1-800-241-0124.

**PART F.**

**Schedule Management**

Implement flexible work schedules to reduce the number of employees at worksites at any given time.

- Split employee workdays between teleworking and worksite and rotate employee attendance on alternate days. Stagger work shifts or start times so that fewer employees are on site during any given time interval.
- Reduce number of in-person appointment times for the public.
- If multiple employees perform the same or similar tasks, have one person work on-site each day performing those

**PART G.**

**Daily COVID-19 Self Screening for Employees Reporting Onsite**

State agencies may adopt procedures pursuant to their individual needs regarding on-site employee participation in COVID-19 symptom screening, reporting of COVID-19 symptoms, and reporting of COVID-19 positive test results. Such procedures may include disciplinary measures for failure to comply or for providing erroneous and misleading information.

**NC State Employee Screening Tool for Employees Reporting Onsite**

The NC State Employee COVID-19 Symptom Screening Tool is available for use by all State agencies for employees working onsite to perform daily COVID-19 self-health screening via the following web address, https://oshr.nc.gov/NC-Employee-Screening. It is accessible by mobile phone, tablet, or laptop computer. The Symptom Screening Tool does not use an app that requires downloading or require the employee to log in to the State computer network.

**Tool Configuration**

The Symptom Screening Tool requires the employee to respond to five questions including:

1. Whether the employee is currently experiencing COVID-19 symptoms included on the current DHHS Symptom Screening Checklist, [https://covid19.ncdhhs.gov/guidance#phase-1-easing-of-restrictions](https://covid19.ncdhhs.gov/guidance#phase-1-easing-of-restrictions),
2. Whether employee has had close contact (at least 15 cumulative minutes over a 24-hour period) with a COVID-19 positive person within the last 14 days,
3. Received instructions to isolate or quarantine by a health department or health care providers,
4. Received a close contact notification from the SlowCOVIDNC app within the last 14 days [https://covid19.ncdhhs.gov/slowcovidnc](https://covid19.ncdhhs.gov/slowcovidnc), or,
5. Been diagnosed with COVID-19 in the last 14 days.

The Tool does not record the employee's answers to these COVID-19 related questions.

If an employee responds they are currently experiencing any COVID-19 symptoms or affirmatively answers any of the questions, a message appears instructing the employee to contact their supervisor immediately to obtain guidance regarding whether the employee should report to their worksite given their individual circumstances.

If an employee responds that none of the questions are currently applicable, a message appears instructing the employee to report to their worksite.

**Tool Reports**

Agencies may designate a maximum of 10 employees to have full access to their agency’s SharePoint database to track daily onsite employee Screening Tool completion. *Agencies may modify their list of Tool designees anytime by emailing OSHR Safety Health & Workers’ Compensation Division Director Scarlette Gardner at scarlette.gardner@nc.gov.*

OSHR will email each agency designee Tool database access information. Individual agencies may only access their agency’s employee Tool response data.

The database records only non-confidential information associated with each employee response. The Tool does not record the employee's responses regarding COVID-19 related information.

Tool database reports may be generated and exported to Excel including only the following data fields:

1. First Name
2. Last Name
3. State Email Address
4. Agency
What if an employee does not have a mobile phone, tablet, or laptop to use to complete the NC State Employee COVID-19 Symptom Screening Tool or fails to do so for any reason prior to arrival at their worksite?
State agencies may provide an electronic device at a designated worksite entrance for employees to complete the Symptom Screening Tool. Disinfectant wipes should be provided next to the device to ensure it is disinfected between each individual use. Employees should also immediately wash their hands.

How may Cabinet agencies obtain exception approval for use of a customized daily Symptom Screening Tool for their employees reporting onsite?
An agency using an alternate daily COVID-19 symptom screening Tool that is similar or more stringent than the OSHR Symptom Screening Tool may request an exception by sending detailed information regarding the symptom screening process to State Safety & Health Director Eddie Johnson via email, edward.h.johnson@nc.gov, or call 984-236-0845.

Customized Agency Self Screening for Employees Reporting Onsite
When arriving at worksites, employees may be instructed to use designated entrances to undergo a health screening. The health screening process may include a symptom screening checklist, on-site temperature check, or other measures.

Issues for Agencies to Consider When Developing a Customized COVID-19 Screening Process for Their Employees:
1. How will screening process be administered? Paper or via electronic means, i.e. email or website?
2. How will confidential medical information be stored and protected?
3. Is screening process feasible for all employees reporting to the worksite or will ADA accommodations be needed for some employees?
4. Will employees be required to complete screening process prior to or after entering the worksite?
5. How many employees must be involved in the screening process to ensure it is uniformly applied?
6. Will screening process occur only during designated hours (i.e. 7:00-9:00am) or throughout the workday?
7. How will six feet social distancing be maintained during screening process?
8. How will screening process occur each day without undue delay for employees to start their work shift on time?
9. If screening process indicates employee is unsafe to be onsite and should leave, how will the following occur?
   a. Supervisor/Human Resources notification;
b. Employee instructed to leave the worksite;
c. Steps taken to clean/disinfect employee’s workspace per CDC Guidelines; and
d. Steps taken to notify close contacts of employee per CDC Guidelines.

10. What happens if the screening process indicates an employee is not safe to enter the worksite but the employee refuses to leave when requested?

11. If screening process indicates an employee is safe to enter the worksite, is notification provided to Human Resources staff?

12. Who will monitor daily employee participation in the screening process?

13. How will daily employee participation in the screening process be enforced?

14. Will screening process change or remain the same throughout different stages of the pandemic?

15. How will all persons entering the worksite complete the screening process?

16. How will necessary resources be provided to employees performing the screening process outside worksites, i.e. security, food, water, supplies, etc.?

17. How will monitoring process be performed in the event of inclement weather if occurring outside worksite?

Information provided by employees during any COVID-19 screening process related to underlying health conditions, medical certification, doctor’s notes, etc., is protected health information under HIPAA and the employer should designate a person on site to ensure this information is protected.

All employees (trained medical staff or others) involved in any screening process must have proper personal protective equipment (PPE) and adhere to CDC Guidance for safe communicable disease screening procedures.

Employees should be notified and receive information regarding any daily screening process prior to returning to their worksite.

Employees reporting onsite at agencies that are not participating in any formal COVID-19 symptom screening process should still conduct a daily health self-screen:

a. Every day before leaving home for onsite work, with self-monitoring throughout the day;
b. Before entering a state agency facility; and
c. Before attending a worksite meeting or event.

Health self-screening is only effective when done thoroughly and consistently. It is advisable for employees to continue self-monitoring while at worksites throughout the day for the potential onset of COVID-19 symptoms.

Agencies should post signage at worksite entrances including guidance on entry/no-entry guidelines, list of COVID-19 symptoms to screen for, and reminders regarding close contacts with COVID-19 positive or exposed persons.
PART H.
Handling of COVID-19 Symptomatic Employee at Worksite –
Check Most Recently Revised CDC Guidelines for Updated Information

Maintain a process to immediately send home an employee at a worksite who appears to have or states they are experiencing COVID-19 symptoms: Fever (100.4°F or 37.8°C or greater), chills, shortness of breath or difficulty breathing, new cough, new loss of taste or smell.

Maintain a plan to isolate at the worksite any employee(s) who experiences symptoms or illness while awaiting safe transport elsewhere.

Maintain a plan for safe transport of any employee(s) exhibiting such symptoms to their home or a healthcare facility.

Per CDC guidelines, if an employee is diagnosed with COVID-19 or is presumed positive by a medical professional due to symptoms, the person shall be excluded from providing in-person or on-site services and shall not report to work until the employee’s supervisor, Agency Human Resources representative, and the employee agree on the employee’s return to worksite date per current CDC and/or NC DHHS guidance.

It is important to note that the criteria have changed over time and are likely to change again. Be sure to confirm current guidance online at the CDC’s Discontinuation of Isolation for Persons with COVID-19 Not in Healthcare Settings https://www.cdc.gov/coronavirus/2019-ncov/hcp/disposition-in-home-patients.html or the NC DHHS COVID-19 Response website, https://covid19.ncdhhs.gov/. Questions about specific situations should be directed to the Agency’s Human Resources Office.

Notify local health officials immediately of a possible COVID-19 case any time a state employee or temporary employee appears symptomatic and is required to leave their worksite. State-owned facilities in Wake County should call the Wake County Epidemiology Task Force, 919-856-7032. State agencies located in other counties should contact local departments, contact information available at https://www.ncdhhs.gov/divisions/public-health/county-health-departments. Callers should explain that they are calling per OSHR guidance to contact their local health department as an employee appears symptomatic and has been required to leave the agency worksite.

Follow most recently updated CDC Guidance including DHHS Non-Healthcare Worker Symptom Screening Checklist for guidelines regarding when employee should return to worksite. This checklist is available at https://www.ncdhhs.gov/divisions/public-health/covid19/covid-19-guidance#phase-1-easing-of-restrictions.
PART 1.
Worksite Cleaning Response for COVID-19 Symptomatic/Positive Employee -
Check most recently revised CDC Guidelines for updated information

Close off affected worksite areas used by the employee. Agencies do not necessarily need to close operations if they can close off affected areas.

Call housekeeping or vendor to request cleaning/disinfection services for work areas used by the symptomatic/positive employee.

Untrained agency employees should not participate in cleaning or disinfecting of affected areas as this process follows specific and rigorous protocols.

For questions: State-owned facilities in Wake County should call the Wake County Epidemiology Task Force, 919-856-7032. State agencies located in other counties should contact local departments, contact information available at https://www.ncdhhs.gov/divisions/public-health/county-health-departments. Callers should explain that they are calling per OSHR guidance to contact their local health department so that the agency can confirm that they are taking appropriate control measures, sanitation, etc., as recommended by the local health department.

Employees should be timely notified when the cleaning process has been completed to provide reassurance that their worksite is safe.
PART J.
Handling of COVID-19 Positive Employee Notification –
Check Most Recently Revised CDC Guidelines for Updated Information

The local health department in the positive employee’s county of residence will handle contact tracing.

Agencies should send out a general email notification to employees emphasizing the need to continue COVID-19 prevention measures.

Follow most recently updated CDC guidance including Non-Healthcare Employee Symptom Screening Checklist for guidelines regarding when the employee should return to worksite.

PART K.
Multi-agency Worksite COVID-19 Coordination

OSHR recommends that agency human resources directors, safety professionals and chief deputies in various agencies with shared worksites collaborate to compare and discuss in detail their individual Safe Return to Worksites plans and adopt a mutually agreed upon COVID-19 Safety Return To Work plan for that worksite, to ensure proper handling of COVID-19 positive employees in buildings with multiple state agency occupants. This agreement can be in an MOU (Memorandum of Understanding) format between the agencies. Specifically, agencies should focus on:

1. Demonstrating and documenting how notification will be provided to all building occupants; and
2. Demonstrating and documenting how notification will be made and executed regarding worksite cleaning when notice is received of a COVID-19 positive employee assigned to that worksite.

PART L.
Employee Relations, EEO and ADA Considerations

Responding to Increased Risk Employees Regarding COVID-19

- Employees at increased risk of severe illness from COVID-19 may present significant concerns to their agency about being asked to return to the workplace. These requests present a myriad of considerations for the employer.
- Based on CDC Guidance, People with Certain Medical Conditions, https://www.cdc.gov/coronavirus/2019-ncov/need-extra-precautions/people-with-medical-conditions.html, adults of any age with the following conditions are at an
increased risk of severe illness from the virus that causes COVID-19:
  o Cancer
  o Chronic kidney disease
  o COPD (chronic obstructive pulmonary disease)
  o Heart conditions, such as heart failure, coronary artery disease, or cardiomyopathies
  o Immunocompromised state (weakened immune system) from solid organ transplant
  o Obesity (body mass index (BMI) of 30 kg/m2 or higher but < 40 kg/m2)
  o Severe obesity (BMI≥ 40 kg/m2)
  o Smoking
  o Type 2 diabetes mellitus

• Agencies are strongly encouraged to utilize all available options for alternative work assignments to protect employees at increased risk, if requested, from exposure to the COVID-19 disease including but not limited to telework, alternative or remote work locations, reassignment, and social distancing measures.
• It is imperative that agencies demonstrate their good faith efforts to reduce or eliminate COVID-19 hazards in the workplace. Employers should communicate their support of any additional actions needed when at work to minimize exposure for employees at increased risk.
• The Americans with Disabilities Act (ADA) may cover employees considered at increased risk of severe illness if they contract COVID-19. If an employee is at increased risk because of a qualifying disability, such as chronic lung disease, diabetes, or serious heart conditions, the employee (or a third party, such as the employee’s doctor), must let the agency know that they need a change for a reason related to a medical condition (here, the underlying medical condition). After receiving the request (in writing or in conversation), the employer may ask questions or seek medical documentation to help decide if the individual has a disability and if there is a reasonable accommodation, barring undue hardship.
• Human Resources should address issues related to the Family and Medical Leave Act (FMLA) if the employee requests leave related to COVID-19 or an underlying health condition.

Employee Relations (ER)
• Communication and compassion are central to an effective ER response to COVID-19 concerns raised by employees.
• Documenting tracking of employee issues will be key. This will help analyze patterns and provide objective information for addressing employee issues. Issues to track:
  1. Requests for accommodations and decisions regarding grant or denial;
  2. Personal conduct;
3. Leave management; and

- Even during COVID-19, workplace investigations must continue. Fortunately, virtual investigations can be conducted utilizing commonplace teleconferencing software. Some best practices to consider:
  1. Use video conferencing whenever possible – it is always best to see the interviewee.
  2. Use a split screen while taking notes.
  3. Acknowledge any awkwardness from noise up front, including establishing communication ground rules.
  4. Ensure privacy and confidentiality.

- Supervisors/managers should consult with their worksite’s EEO Officer regarding all questions they receive pertaining to COVID-19 related employee relations issues.
- Can a non-mandatory employee *without increased risk indicators unilaterally* decide not to come to work based on safety considerations? Agencies should allow teleworking to the maximum extent possible as indicated by Executive Orders, NC DHHS and CDC. Additionally, agencies should always address safe and healthy working conditions as a priority, and this may be subject to assessment on a case-by-case basis while considering operational needs. However, once these concerns have been addressed, a refusal to report to the designated work location may be grounds for disciplinary action.

**Equal Employment Opportunity (EEO) Considerations**

- All EEO related laws remain in full effect with EEOC instructions to account for specific public health needs related to the COVID-19 pandemic. EEOC has issued guidance allowing employers to:
  1. Exclude employees from the worksite who are infected with, symptomatic from, or have been exposed to COVID-19;
  2. Require employee use of personal protective equipment (PPE) within certain limits based upon job tasks, types of job exposure, and risk assessment to reduce risk of COVID-19 exposure; and
  3. Administer COVID-19 specific health screening at worksites to identify employees with COVID-19 symptoms so that they can be sent home immediately to reduce the risk to others and return to worksites in accordance with CDC Guidance.

- Agencies must ensure that decisions regarding the employees’ return to worksite schedules during reopening are based on legitimate business reasons.
- Agencies may consider non-discriminatory, objective criteria when determining which employees should return to the worksite and when including:
  1. Is telework available for the employee?
  2. Is the employee involved in mission critical operations?
3. Does this employee have specialized skills?
4. Can this employee’s job duties be fully performed when teleworking or is access to worksite equipment or other resources required to do so?

- Some agencies know that an employee has an increased risk condition and may be concerned that the employees’ health will be jeopardized upon returning to the worksite. First, the employee must request an accommodation before an agency may take action. The ADA does not allow the agency to exclude the employee, solely because the employee has a disability identified by the CDC as being at an increased risk for severe illness. Under the ADA, this action cannot be considered unless the employee’s disability poses a “direct threat” to their health that cannot be eliminated or accommodated.

- Employers cannot select employees for disparate treatment based on a protected class, including national origin. For instance, some studies suggest higher rates of COVID-19 positive test results based upon demographic groups, including race, and gender. Employers will need to closely monitor any concerns that employees are being subjected to disparate treatment or harassed in the workplace because of membership in a protected class.

- Employees should be informed that all EEOC, ADA, or other employee relations concerns should be communicated directly to their EEO Officer, or the worksite’s designated COVID-19 Coordinator to obtain EEO Officer contact information.

ADA and COVID-19 FAQs
The Americans with Disabilities Act (ADA), which protects applicants and employees from disability discrimination, is relevant to COVID-19 pandemic workplace preparation in at least three major ways.

1. The ADA regulates employers’ disability-related inquiries and medical examinations for all applicants and employees, including those who do not have ADA disabilities.
2. The ADA prohibits covered employers from excluding individuals with disabilities from the workplace for health or safety reasons unless they pose a “direct threat” (i.e. a significant risk of substantial harm even with reasonable accommodation).
3. The ADA requires reasonable accommodations for individuals with disabilities (absent undue hardship) during the COVID-19 pandemic.

Summary of Important Issues Addressed by the EEOC
Disclaimer: The information below has been sourced directly from the following three sources and may contain specific quotes. Please check these source documents for updates to verify relevance and timeliness of this information.

Sources:
1. **Who can receive reasonable accommodation under the ADA?**
   - COVID-19 alone may not be considered a disability under the ADA, due to the illness being transitory and having limited impact on major life activities in ordinary circumstances. However, individuals that can demonstrate some connection between the impairment and a specific need for accommodation may be eligible for coverage. For example, the individual might have an underlying impairment and limitation that, if infected with coronavirus, would lead to serious complications.
   - If an increased risk employee requests a change in worksite or other accommodation because their medical disability under ADA places them at an increased risk for complications from COVID-19 exposure, then the request must be treated as a request for accommodation and the agency must determine if the accommodation is reasonable. Agencies may continue to verify the existence of the disability and discuss the reason for and type of COVID-19 related accommodation requested by the employee. Whether to require documentation of the disability is in the agency’s discretion.
   - Older adults and women who are pregnant are also at increased risk for developing complications from coronavirus but will not qualify to receive accommodations under the ADA solely on the basis of age or ordinary pregnancy. Employers receiving accommodation requests from employees in these increased risk groups will need to consider their remaining responsibilities under additional federal, state and local requirements.
   - Caregivers of individuals with disabilities are not entitled to receive workplace reasonable accommodations under the federal ADA but may be entitled to leave under the federal Family and Medical Leave Act (FMLA).
   - Employers may want to discuss their non-disability related questions about making workplace modifications in response to the coronavirus with agency legal counsel to decide how to manage situations involving increased risk employees and caregivers of individuals with disabilities who do not fall under the ADA.

2. **During the COVID-19 pandemic, must an employer continue to provide reasonable accommodations for employees with known disabilities that are unrelated to the pandemic, barring undue hardship?**
   Yes. An employer’s ADA responsibilities to individuals with disabilities continue during any pandemic. Only when an employer can demonstrate that a person with a
disability poses a direct threat, even after reasonable accommodation, can it lawfully exclude him or her from employment or employment-related activities.

The rapid spread of COVID-19 has disrupted normal work routines and may have resulted in unexpected or increased requests for reasonable accommodation. Although employers and employees should address these requests as soon as possible, the extraordinary circumstances of the COVID-19 pandemic may result in delay in discussing requests and in providing accommodation where warranted. Employers and employees are encouraged to use interim solutions to enable employees to keep working as much as possible.

3. **May an agency send employees home if they display influenza-like symptoms during a pandemic?**
   Yes. Requiring such employees to go home is not a disability-related action. Applying this principle to current CDC guidance on COVID-19, this means an employer can send home an employee with COVID-19 or symptoms associated with it.

4. **During the COVID-19 pandemic, how much information may an agency request from employees who report feeling ill at work or who call in sick?**
   Agencies may ask employees who report feeling ill at work, or who call in sick, questions about their symptoms to determine if they have or may have COVID-19. Currently these symptoms include, for example, fever or chills, cough, shortness of breath or difficulty breathing, fatigue, muscle or body aches, headache, new loss of taste or smell, sore throat, congestion or runny nose, nausea or vomiting, or diarrhea.

5. **During the COVID-19 pandemic, may an agency take its employees’ temperatures to determine whether they have a fever?**
   Because the CDC and state/local health authorities have acknowledged community spread of COVID-19 and issued attendant precautions as of March 2020, employers may measure employees’ body temperature. As with all medical information, the fact that an employee had a fever or other symptoms would be subject to HIPAA and ADA confidentiality requirements.

6. **May an employer encourage employees to telework (i.e., work from an alternative location such as home) as an infection-control strategy during a pandemic?**
   Yes. Telework is an effective infection-control strategy that is also familiar to ADA-covered employers as a reasonable accommodation. In addition, employees with disabilities that put them at increased risk for complications of pandemic COVID-19 may request telework as a reasonable accommodation to reduce their chances of infection during a pandemic.
7. If an agency is hiring, may it screen applicants for symptoms of COVID-19?
Yes. An agency may screen job applicants for symptoms of COVID-19 after making a conditional job offer, if it does so for all entering employees in the same type of job.

8. May an agency take an applicant’s temperature as part of a post-offer, pre-employment medical exam?
Yes. Any medical exams are permitted after an employer has made a conditional offer of employment. However, employers should be aware that some people with COVID-19 do not have a fever and that all fevers are not indicative of COVID-19 infection.

9. May an agency delay the start date of an applicant who has COVID-19 or symptoms associated with it?
Yes. According to current CDC guidance, an individual who has COVID-19 or symptoms associated with it should not be in the workplace. The ADA does not interfere with employers following recommendations of the CDC or public health authorities, and employers should feel free to do so.

10. May an agency withdraw a job offer when it needs the applicant to start immediately but the individual has COVID-19 or symptoms of it?
Based on current CDC guidance, this individual cannot safely enter the workplace, and therefore the employer may withdraw the job offer.

11. As a best practice, and in advance of having some or all employees return to the workplace, are there ways for an employer to invite employees to request flexibility in work arrangements?
Yes. The ADA and the Rehabilitation Act permit employers to make information available in advance to all employees about who to contact – if they wish – to request accommodation for a disability that they may need upon return to the workplace, even if no date has been announced for their return. If requests are received in advance, the employer may begin the interactive process. An employer may choose to include in such a notice all the CDC-listed medical conditions that may place people at increased risk of serious illness if they contract COVID-19, provide instructions about who to contact, and explain that the employer is willing to consider on a case-by-case basis any requests from employees who have these or other medical conditions.

12. Is an employee entitled to an accommodation under the ADA in order to avoid exposing a family member who is at increased risk of severe illness from COVID-19 due to an underlying medical condition?
No. Although the ADA prohibits discrimination based on association with an individual with a disability, that protection is limited to disparate treatment or harassment. The ADA does not require that an employer accommodate an employee without a
disability based on the disability-related needs of a family member or other person with whom he or she is associated.

13. **Due to the pandemic, may an employer exclude an employee from the workplace involuntarily due to pregnancy?**
   No. Sex discrimination under Title VII of the Civil Rights Act includes discrimination based on pregnancy. Even if motivated by benevolent concern, an employer is not permitted to single out workers on the basis of pregnancy for adverse employment actions, including involuntary leave, layoff, or furlough.

14. **Is there a right to accommodation based on pregnancy during the pandemic?**
   There are federal employment discrimination laws that may trigger accommodation for employees based on pregnancy: https://www.eeoc.gov/laws/guidance/legal-rights-pregnant-workers-under-federal-law

15. **May an employer ask an employee why he or she has been absent from work?**
   Yes. Asking why an individual did not report to work is not a disability-related inquiry. An employer is always entitled to know why an employee has not reported for work.

16. **May an employer ask an employee who is physically coming into the workplace whether they have family members who have COVID-19 or symptoms associated with COVID-19?**
   No. The Genetic Information Nondiscrimination Act (GINA) prohibits employers from asking employees medical questions about family members. GINA, however, does not prohibit an employer from asking employees whether they have had contact with anyone diagnosed with COVID-19 or who may have symptoms associated with the disease. Moreover, from a public health perspective, only asking an employee about their contact with family members would unnecessarily limit the information obtained about an employee’s potential exposure to COVID-19.

**Employee Assistance Program (EAP)**
Living through this pandemic is a challenging experience for all state employees. Learning to adapt to changes in the work environment and workload, as well as addressing personal concerns, is important. The pandemic has brought about both temporary and permanent changes in the personal and professional lives of employees. Some of these changes have led to increased stress, anxiety, depression, and other issues. The consequences of “pandemic fatigue” and ongoing COVID-19 safety concerns present in daily life can impact employees’ emotional well-being. In addition, ongoing uncertainty regarding when it will be safe to transition back to normal work and life activities in light of ongoing public health concerns can worry employees.
All of these challenges may generate emotions in employees that have not been recognized or addressed previously. To assist employees with these concerns, please remember that the NC Employee Assistance Program (NC EAP) is available. NC EAP is a state-sponsored benefit program that offers support and resources to address personal or work-related challenges and concerns. The goal of the EAP program is to help provide tools to strengthen emotional resilience and provide information on resources that can assist employees with work-life challenges. It is free for employees and members of their household and completely confidential. For state agency employees, McLaughlin Young provides this program. Simply call 888-298-3907 to access NC EAP. An employee assistance professional will assess the situation prior to scheduling an appointment to ensure that employees are receiving the most appropriate care.

NOTE: Employees of the Judicial Branch use Deer Oaks and UNC System employees use ComPsych.

PART M.
Workers’ Compensation

If an employee becomes ill and it is determined to be work-related in accordance with the Workers’ Compensation Act, the Workers’ Compensation Policy applies. If the employee’s illness is determined not to be work-related, the Sick Leave Policy applies. During a communicable disease outbreak, there may be additional leave options available to employees.

PART N.
COVID-19 Vaccination Mandates

Employers may require employees receive FDA approved vaccines as a condition of employment, subject only to medical exceptions required by the ADA and religious exceptions required by Title VII of the Civil Rights Act of 1964.

If an employer mandates COVID-19 vaccination as a condition of employment, employers should ask employees to provide proof of vaccination. Individuals receiving a COVID-19 vaccination are provided a written document by their vaccinator (e.g., hospital, clinic, local health department, large-scale vaccine event, etc.) as proof of their vaccination. Employers cannot be given access to the COVID-19 vaccine management system – doing so would be a violation of state and federal privacy laws. For employers who already require vaccination against the flu, smallpox, etc., NCDHHS recommends those existing policies be used as a guide for any new requirements specific to COVID-19.

For additional information, please see updated federal EEO Guidance.
Communications Planning and Execution

Positive, repetitive messaging will help achieve the goal of changes in worksite behavior patterns to better protect everyone at worksites from COVID-19 exposure/transmission.

Agencies should keep their workforce informed regarding worksite plans as early as appropriate.

All messaging should clearly convey that the agency genuinely cares and is taking proactive measures to promote employee safety.

Be transparent and provide specific details to employees regarding expected safe worksite behavior expectations and practices in a manner that fully explains the reasoning and value of safety measures being implemented.

Mitigate employee anxieties by recognizing issues, communicating transparently, listening, and ensuring regular responses to concerns.

Positive and repetitive messaging is key.

All messaging should be conveyed to employees presently at worksites as well as those still teleworking to eliminate mixed messages.

Use all available communications channels: employee portals, email, text messages, video, virtual live events, posters/digital displays, intranet, etc.
PART A.
Training

Set expectations by providing detailed information before, during, and after return to worksites via training of all employees and managers concerning their role and expectations regarding participation in the agency’s newly implemented safety measures and procedures.

Provide employees training regarding COVID-19 prevention strategies using videos or webinars such as North Carolina State Government’s Safe Practices for the Pandemic Worksite available via the LMS system.

Only consider in-person training in groups of 10 employees or less if social distancing can be maintained when the training is mandatory and alternate virtual training is not feasible.

PART B.
Signage

Post COVID-19 prevention messages and information regarding help for employees including Employee Assistance Program (EAP), NC 2-1-1, and Hope4NC Helpline in high traffic areas, i.e. main entrances, restroom facilities, elevators, lobbies/reception areas, entrances/exits, hallways, etc. (OSHR has created sample signage available at www.oshr.nc.gov/safe-return.)

Agencies are encouraged to develop their own original communications materials with customized messaging that will resonate with their employees.

Partner with other state agencies for printing of signage and other COVID-19 related communications materials if needed.

To avoid confusion, post special worksite entry instructions at entrances for employees and visitors.

PART C.
FAQs

Updated FAQs are available at www.oshr.nc.gov/safe-return as follows:
Safe Worksites FAQs for State Employees
Safe Worksites FAQs for Managers/Supervisors
General COVID-19 FAQs for State Employees
Furlough and Emergency Lay-off FAQs
PART D.
Governor’s Executive Orders

Visit https://www.nc.gov/covid-19/covid-19-orders to view Governor’s Executive Orders regarding pandemic related measures.

PART E.
Applicable OSHR Policies – https://oshr.nc.gov/policies

Communicable Disease Emergency Policy (most recently updated version)
Employee Assistance Program
Reasonable Accommodation
Reduction-In-Force Policy
Unemployment Insurance
Workers’ Compensation

COVID-19 Research References

A. CDC Guidance
For businesses
Businesses and Workplaces Plan, Prepare, and Respond

COVID-19 Employer Information for Office Buildings

Returning to Work

Public Health Recommendations for Community-Related Exposure

Disinfecting Your Facility Everyday Steps, Steps When Someone is Sick, and Considerations for Employers

Cleaning and Disinfection for Community Facilities

Guidance for Reopening Buildings After Prolonged Shutdown or Reduced Operation

COVID-19 Employer Information for Office Buildings

Guidance For Cleaning And Disinfecting Public Spaces, Workplaces, Businesses, Schools, And Homes
General Business Frequently Asked Questions

For individuals
How to Protect Yourself & Others

Improve How Your Mask Protects You

Prevent the spread of COVID-19 if you are sick

Symptoms of Coronavirus

If You Are Sick or Caring for Someone

What to Do If You Are Sick

People Who Need to Take Extra Precautions

People Who Are at Higher Risk for Severe Illness

Protect Yourself When Using Transportation

Running Essential Errands

Social Distancing, Quarantine, and Isolation

When You Can be Around Others After You Had or Likely Had COVID-19

B. NC DHHS Guidance
DHHS Interim General Guidance for Businesses and Organizations issued December 8, 2020

COVID-19: Information for Businesses and Employers

COVID-19 North Carolina Dashboard
https://covid19.ncdhhs.gov/dashboard

SlowCOVIDNC app
https://covid19.ncdhhs.gov/slowcovidnc

DHHS Non-Healthcare Employee Symptom Screening Checklist
https://covid19.ncdhhs.gov/guidance#phase-1-easing-of-restrictions

DHHS What to Do If You Feel Sick
NCDEQ Demystifying Cleaning in the Age of COVID-19 Webinar and Presentation

C. OSHA Guidance
Guidance on Preparing Workplaces for COVID-19

Ten Steps All Workplaces Can Take to Reduce Risk of Exposure to Coronavirus
https://www.osha.gov/Publications/OSHA3994.pdf

D. FEMA Guidance

E. U.S. EEOC Guidance
Pandemic Preparedness in the Workplace and the Americans with Disabilities Act

What You Should Know About COVID-19 and the ADA, the Rehabilitation Act, and Other EEO Laws

The ADA and Managing Reasonable Accommodation Requests from Employees with Disabilities in Response to COVID-19

F. UNC School of Government
Coronavirus/COVID-19 Resources
https://www.sog.unc.edu/resources/microsites/coronavirus-covid-19/nc-county-covid-work-policies

Coates’ Canons: NC Local Government Law
https://canons.sog.unc.edu