

Coming Back Safe and Strong

Returning Remote Workers to Campus Working Together to Promote a Safe Work Environment June 2020

When Employees Will Return - A Phased Approach

As we prepare for those working remotely to return to the campus we will be implementing a gradual or incremental /phased return based upon operational need, and employee safety. To that end, a phased approach will allow us to monitor operational issues and workplace safeguards and adjust as needed prior to returning additional employees to the campus

The 5 phases:

Phase 1 Employees who have remained working on campus.

It is important to note that while many worked remotely during the last few months those designated as essential (including first responders, healthcare workers, facilities, and transportation personnel) remained on campus. These employees will be:

- Advised of the new health screening requirement which will begin at the onset of Phase 2.
- Reminded about the continued importance of social distancing and face covering as their colleagues return.

Phase 2 Researchers and supporting staff.

Researchers will be among our first "returning" cohort.

 For these employees the lab preparedness plan must be completed and approved following the phased approach identified in that plan as we await final guidance and approvals from SUNY and the local regional control group.

<u>Phase 3</u> High Priority – employees for whom one or more core duties cannot be performed remotely.

<u>Phase 4</u> Medium Priority – employees for whom one or more core duties are most effectively performed onsite.

<u>Phase 5</u> Low Priority – employees for whom effectiveness of duties is least impacted by work location.

Progression through all phases will be dictated by NYS, SUNY and SBU policies and by the department's readiness to operate safely.

Special Considerations

Any requests to continue full-time remote work for non-medical reasons should be referred
to Human Resources, and Human Resources will work collaboratively with the supervisor
and employee to explore whether options may be available. Requests for remote work
related to medical reasons or high risk factors on the part of the employee or a member of
the employee's family should be referred to the COVID-19 Health Information Line.
Requests for accommodation under the Americans with Disabilities Act will be referred to
the Office of Equity and Access (OEA), formerly OIDE. Employees may also contact OEA
directly.

Safeguarding the Campus Workforce

Guidance from the <u>CDC</u> states that the virus is thought to spread mainly from person-to-person:

- Between people who are in close contact with one another (within about 6 feet).
- Through respiratory droplets produced when an infected person coughs, sneezes or talks.
- These droplets can land in the mouths or noses of people who are nearby or possibly be inhaled into the lungs.
- Studies have shown that COVID-19 may be spread by people who are not showing symptoms.

The plan requires safe work practices to be introduced and followed to minimize the risk of transmission of the coronavirus in the workplace in accordance with guidance from the CDC, State health authorities, and Stony Brook leadership.

1. Face Coverings / Masks

Employees must wear face coverings which cover their nose and mouth when required social distancing is not possible. Particular care must be taken to wear face protection when transiting public spaces (e.g., hallways, elevators, bathrooms) in case of unexpected infringement of social distancing. Employees will be provided with two (2) cloth face coverings. Employees may also opt to wear their own face coverings.

2. Physical Separation / Social Distancing

- Separation of personal workspaces to achieve minimum 6' distance, or other barriers between personnel when otherwise needed. Examples include:
 - Staggered use of space.
 - Use of tape on benchtops and/or floors to delineate space and maintain separation of personnel.
 - Procurement of "sneeze barriers" (e.g., plexiglass).
 - Separation of or limited access to commonly used equipment to avoid close contact and cross-contamination.
 - Separate storage of individuals' PPE.
- Post appropriate signage at entrances and at essential locations on campus and within buildings to remind personnel of safeguard procedures.
- Ensure adequate air flow in offices and buildings.

3. Health Screening

In accordance with current CDC guidance, the following health screening measures have been adopted:

- In order to help protect our campus colleagues from exposure to the coronavirus while at work, all non-health care employees will be required to conduct a brief health care self-screening before coming to campus. This daily self-screening will involve a temperature check and a review for COVID-19 related symptoms. These currently include shortness of breath, cough, body aches/muscle pain, sore throat, new loss of taste and/or sense of smell, fatigue, and headache. For an employee who returns or remains on campus after 12 hours this screening must be repeated.
- If the temperature recorded is less than 100 F without the use of fever reducing medication, and no other symptoms are present, the employee should confirm to their supervisor/PI that they screened negative, and may come to campus. An employee who screens positive for a temperature of 100 F or one or more symptoms must notify their supervisor and must not come to campus. If during the day an employee begins to feel unwell they should notify their supervisor/PI and leave the campus immediately with instructions to follow. Supervisors must remind employees that their daily health screening must be completed in order to support the health and safety of their team and our campus community.
- Employees may elect to use the online health screening tool or must complete a <u>daily log</u> in order to confirm that they have completed a self-screening, and that they are free of symptoms prior to reporting to work. Employees will receive a separate email detailing the online self-screening option
- Employees who identify themselves as symptomatic are provided information about diagnostic testing, including the testing currently available to employees at South P lot, or where designated. They must contact the Health Information Line (HIL) at 631-632-5000 and will also be advised to seek guidance from their health care provider. The employee may not return to campus without a clearance from their healthcare provider or the HIL which must be shared with HR Time and Attendance at <a href="mailto:hrst://hrst.nime.org/linearing-testing-tes
- If an employee reports that they are symptomatic, or has tested positive within the past 14 days, or has knowingly been in close contact with anyone who has tested positive or who has had symptoms of COVID-19, the employee should be directed to contact the Health Information Line at 2-5000 for instructions including possible quarantine. The supervisor is encouraged to call the Health Information Line for further guidance regarding the workplace.

4. Cleaning Protocols

Protocols for regular cleaning and/or disinfecting of buildings

Cleaning definitions in accordance with CDC guidelines:

- Disinfection (or Deep Cleaning) a process that eliminates pathogenic microorganisms, except bacterial spores, on inanimate objects. Objects are usually disinfected by liquid chemicals or wet pasteurization. Custodial staff use an EPA-approved disinfectant to coat and wipe down all accessible/visible surfaces. Disinfectant is known to kill COVID-19 on hard non-porous surfaces.
- **Regular cleaning** the removal of visible soil (e.g., organic and inorganic material) from objects and surfaces and normally is accomplished manually or mechanically using water with detergents or enzymatic products.
- **Sterilization** describes a process that destroys or eliminates all forms of microbial life and is carried out in health-care facilities by physical or chemical methods. Steam under pressure, dry heat, EtO gas, hydrogen peroxide gas plasma, UV lighting exposure and liquid chemicals are the principal sterilizing agents used in health-care facilities.

Cleaning protocol for areas where someone suspected of having (or confirmed to have) COVID-19 has been:

- Access to the immediate work area should be restricted. Supervisors should call the Health
 Line at 2-5000 to determine if other employees should leave the area until after the
 cleaning and disinfecting.
- Cleaning staff will wait 24 hours after the person has left the area before entering to clean
 and disinfect. If 24 hours is not feasible, cleaning staff will wait as long as possible. Cleaning
 staff will wear face masks, disposable gloves, gowns and goggles for all tasks in the cleaning
 process, including handling trash.
- Cleaning and disinfection will be performed in accordance with guidelines from the NYSDOH and CDC. This includes the use of EPA-approved disinfectants, following the manufacturer's instructions for all cleaning and disinfection products for concentration, application method and contact time, etc.
- Disinfecting these areas (i.e. deep cleaning) includes safely providing a full saturation of disinfectant to all surfaces including walls, ceilings, fixtures, floors, under cabinets, behind machines, tops of cabinets, etc. In some larger areas, electrostatic sprayers and UV foggers with disinfecting agents are also used.
- If it has been more than 7 days since the person with suspected/confirmed COVID-19 was present, neither additional cleaning nor disinfection is necessary according to the CDC. In these cases, cleaning staff will follow normal procedures for regular cleaning including disinfection of high-traffic, high-touch areas.

Regular cleaning protocol:

- Regular cleaning, as prescribed by building occupancies, continues. Priorities have been adjusted to provide for increased cleaning and disinfecting of high-traffic, high-touch surfaces.
- Examples of high-touch surfaces include:
 - Stair railings
 - Exterior and interior door hardware and surfaces
 - Light switches
 - o Restroom fixtures, partitions, faucets, toilet paper/paper towel dispensers
 - Elevator control panels and call buttons
 - Common area kitchen countertops and appliances
 - ADA handicap door push plates
 - Water fountains and bottle filling stations
- Examples of high-traffic areas include:
 - Restrooms
 - Building entrances
 - Classrooms, lounges, and meeting spaces
 - Hallways
 - Dining areas
- Disinfecting high-touch surfaces in high-traffic areas is performed at least daily (and more frequently as schedules allow).
- Regular cleaning follows check-outs from all residential rooms, with additional focus to disinfect surfaces which are not normally accessible under occupancy.
- Hand-sanitizing stations are installed throughout the campus at main entry/exit points of buildings. Additional hand-sanitizing stations will be provided in high-traffic areas as supplies become available.
- The Campus Community is encouraged to practice preventative cleaning in their personal
 offices and/or residential spaces which are not normally accessible to the cleaning staff.
 Supplemental cleaning of teaching spaces and office spaces not regularly accessible to the
 custodial staff should be performed as needed by room occupants / faculty with supplies
 provided by their department.
- The cleaning protocols can be viewed here.

Expanded Business Hours and Flexible Schedules

Current administrative business hours typically span from 8:00 a.m. to 5:00 p.m. To facilitate a safe restart to the workplace, an expansion of business hours may be implemented, extending business hours from 6:00 a.m. through 8:00 p.m. The expansion of business hours provides management and staff greater flexibility in meeting work obligations and personal obligations while supporting social distancing requirements. This flexibility in no way serves to require

employees to work extended/longer hours. Employees will continue to perform their normal professional obligation. Employees should be encouraged to report to their worksites within the above-noted window with requested schedules subject to supervisor's approval.

Supervisors are encouraged to work collaboratively with employees in determining flexible scheduling arrangements which meet the operational needs of the University, optimize social distancing, and consider the needs of the employee. Supervisors must follow applicable seniority provisions where required under collective bargaining agreements. All approved work schedules must be maintained by the supervisor. Employees requesting a change from the approved schedule require approval from their supervisor. Questions concerning work schedules should be directed to the Office of Employee and Labor Relations or the Department of Human Resources.

Flexible schedule options include:

- Staggered workweeks/workdays
- Rotating schedules, i.e. staff teams working alternating weekly/ bi-weekly schedules
- Full-time or intermittent remote work assignments (telecommuting)

Alternative work schedules are expected to be temporary during the COVID event and shall have no impact on the employee's overall professional obligation.

COVID-19 Return to Work Plan

The Department Return to Work Plan

The Return to Work Plan provides guidance on helping to create a pathway to the safe return to the workplace. Please consider/evaluate all items set forth in the template and check off items/ boxes that are applicable, adding notes where necessary to outline any additional/alternate measures in the notes section. Once completed this plan must be signed by the Department Head/Chair and submitted to the Dean of your College/School or Senior /Vice President for review and approval.

For further information contact:

- West Campus/HSC/SOM Human Resource Services: (631) 632-6161
- Hospital Human Resources: (631) 444-4700
- Long Island State Veteran's Home Human Resources: (631) 444-8617

This document is subject to revision as new information and guidance arises.