HR Policy Association Return to Workplace Series: Barriers to Re-Entry
Webinar Summary
May 7, 2020

The Association’s member-wide webinar highlighted the barriers employers face when designing and implementing their return to the workplace frameworks. Several members shared the top barriers they are considering, including commuting via mass transit, employee fear, travel, office layouts, testing and approaches to tiering employees. A summary of their comments and the questions asked by members are below.

COMPANY A (Financial Services, New York, NY)

- 9/11 was the last time where people really felt scared to go to work—management style has changed significantly since then.
- Increased work from home capabilities—more tools to promote long term remote work.
- Leadership is more sensitive to mental health and wellbeing concerns of employees.
- One issue we face now is that we don’t have entities in multiple states with varying responses to the pandemic. Because of our business, ultimately we need a number of people in our physical workspace and we are limited in terms of space flexibility. For now, people can work from home, and we are considering how we will tier employees for a staggered return and how we will deal with those that are still not ready to return to the workplace when their state opens.

COMPANY B (Health Care Services)

- Vast majority of employees are frontline employees.
- Back to work framework is guided by four things:
  - Federal government regulations
  - External benchmarks
  - State directives
  - Metrics
- Reconfiguring offices is most likely necessary and demonstrates how problematic the open floor plan has been with COVID-19.
- Considering tiering employee groups based on criteria starting with local COVID trends—concern with ADA accommodations here.
- Medical protocols and testing—have ideas around testing not only for employees as they return to work but also how do we want to think about testing for new hires.
- Employee safety and wellbeing—we may have to provide a box of gloves next to the coffee machine, will provide a PPE kit to sales employees, and are considering how to provide flexibility while running our business, which provides essential services related to the crisis.
COMPANY C

- Headquarters based in NYC, but many offices, including executive offices, in nearby states.
- Many challenges when returning to workplace
- Two critical components in navigating this:
  
  - **Communication**: Important to find the right balance, too much communication can also be overwhelming. Lead with trust, empathy and transparency. Started communicating frequently with all employees through short weekly CEO chats and business leader videos, pulse surveys (every 6-8 weeks). One example to show we are all in this together: all leadership changed their corporate photos to work from home selfies.
  
  - **Manager training**: We operate on a decentralized basis and site leaders and local managers make key decisions. We conduct monthly manager forums to go over privacy and legal issues in navigating this and provide them with resources needed to effectively manage remote teams. We also brought in managers from offices in South Korea and China to go over their experiences in returning employees to the workplace.

- **Transportation and commuting** is a major barrier and will be until there is a vaccine.
  
  - Need to increase flexibility for remote work right now including adjusting schedules and changing working hours. We ask employees to use good judgment and to discuss concerns with their manager.
  
  - Asking those who have a personal vehicle to drive to work and we will reimburse the costs of parking. Also providing reimbursement for Uber/Lyft/etc currently.
  
  - **General guidance**: All should work remotely when it is feasible and all employees whether in office or at a manufacturing site will be issued PPE by the company.
  
  - **Travel guidance**: Expectation is to wear PPE at all times in public when traveling. Business travel is limited to critical travel only. Not tracking personal travel but asking all to self-isolate for 14 days if they have symptoms or believe they have been exposed.
  
  - National and local government mandates will take precedence over our guidelines.
QUESTION AND ANSWER

Q: What are you doing for employees that don’t want to go back to NY offices or are in states where they can’t do their job remotely but do not want to go into the office?

A: They are working remotely, our work from home strategy has the bandwidth to allow them to work from home. However, issue is when state and federal governments start allowing more people to go into the office, we may not be as flexible with work from home arrangements.

Q: Are companies considering letting employees who can work remotely for even the rest of the year?

A: Yes, we don’t see people really coming back before the fall especially in NY. Once we get to fall, there will be a conservative re-entry to the workplace.

Q: You mentioned that you are making special accommodations for high risk employees. How are you designating this given the potential legal ramifications?

A: We use our benefits team/HIPAA officers to do that work and guide the process. Currently, we are not asking for information from individuals but we understand we may need to in the future. Many employees had fears about being told they need to come in the next day with little notice, we won’t do that and are being flexible in creating a more employee centric plan. Our operations and risks are secure with employees working at home. If they weren’t it would be a different dynamic but it is working for now.

Q: Given the fact that NYC and so many people use mass transit to get to work, is there anything that the city is doing in working with companies to allay those fears?

A: They are starting nighttime cleaning and sanitization of subways and are redirecting homeless to shelters. We have recommended that employees commute during off-peak hours, so the cleaning may limit that flexibility. The concern about mass transit cleanliness and public transmission of the virus will certainly be there for a while but in time it will likely dissipate.

Q: What conversations are the leadership team having about reoccurrence of COVID-19 in the fall/winter?

A: We want to keep the conversation about our culture which has always said if you feel sick, don’t come to work. We will provide masks for staff if they are in an office. We plan to take leads from the government but we are prepared that people may need to return to the work from home strategy if there is a spike.

Q: Have you started to reconfigure your office spaces?

A: Yes, we have started to put up Plexiglas partition since our space is a more open floor design to promote collaboration. Looking at phases of reopening so we won’t put people right next to each other at first and will have limits on the number of people in the cafeteria and coffee machine area or need to close certain areas altogether.
Q: Do you have insight yet as to how your testing protocol team will work? What kind of tests are you considering?

A: We think an important part of our back to work playbook is testing. Have made serology testing available to all employees, started with our phlebotomists but will make it open to all employees at no cost to them. Not mandatory so we are starting with a voluntary option for people. We are also working on offering the molecular PCR test for COVID, at will for all employees. Have submitted to the FDA a self-collection kit that is very easy to do and doesn't require temperature management so you can mail it to a lab and get a quick result. Right now, this is only offered to those with symptoms but soon we want to offer to all employees. We want it to be as easy as possible for employees to get results if they have concerns. We also want to make serology tests available to spouses and dependents and we are discussing if we should make PCR tests required for new hires.

Q: People have been talking about taking blood oxygen levels as a way of determining if employees are infected instead of temperature checks, have you heard about this?

A: Oxygen levels highly correlate with risk of COVID and based on the symptoms of COVID, someone who has it doesn't know that they have low oxygen levels often until there is more organ damage, particularly in elderly people. We understand the rationale behind that type of test but question the practicality of it. Oximeters are very difficult to get so on a practical basis I think it would be difficult to operationalize on large scale.

Q: For the PCR tests, how often are you planning to offer?

A: Periodically. Trying to get at the fear that you could be exposed in many different ways. We would ask employees to state why they think they need the test and would then authorize it.

Q: You mentioned populations that must go back to work, what are you doing for those that don’t have childcare, for example?

A: We don't have good answer yet because our workforce is essential to our business and very distributed around the country, so we are trying to be flexible to accommodate the individual circumstances. Economics of job shares can get complicated in terms of reduced salaries. Have thought about staggering shifts so there are less people in the office at once so that there is less density in the workplace.

Q: You mentioned pulse surveys, how often are you doing them?

A: Did one in April and we are about to run one in two weeks so every 6-8 weeks with 10-15 questions.

Q: Are you also expecting employees to quarantine after personal domestic travel?

A: Have not given stringent guidance on that yet but will have to more of that when we bring workforce back. Will most likely depend on where they go.

Q: Is there a limit to Uber/Lyft reimbursements?
A: No. Individuals that are going into work right now are the ones that are in plants producing medicines, so they are essential and we need them. Going forward, will need to be time bound.

Q: What about people who are incurring costs at home that you would incur in office like Wi-Fi, paper?
A: Trying to be light touch on this. If an employee thinks they have something that should be reimbursable we are asking them to talk to manager and go from there. A lot of manager judgement is required here which is why we are spending a lot of time training and working with them.

Q: Are monthly manager meetings held more often now?
A: Yes, two times a month and participation is at highest volume it’s been in two years

Q: Has anybody heard of quarantine periods needing to be increased from 14 days?
A: We are not quarantining longer than 14 days, not many going to 21 days. At end of day, 14 days seems to be the predominant threshold.

Q: Are you looking to require virus tests or serology tests when employees return?
A: Right now only testing is temperature testing and we are doing it primarily because local governments are requiring it.

A: Faced with different issue since we do drug screen on the onboarding side. We have paused that because of social distancing concerns. Now discussing if we should retroactively test them.