CORONAVIRUS EMPLOYER COMPLIANCE FORMS PACKAGE

By

Larry Grudzien Attorney at Law

Howard Lapin
Attorney at Law

The documents in this Coronavirus Employer Compliance Form Package reflects the law as of April 20th, 2020 and does not reflect developments after that date.

Table of Contents

| Important Coronavirus Websites | 1 |
|---|-------|
| Employer Action Checklist | 2 |
| Sample Long Communication to Employees | 5 |
| Short Communication to Employees | 8 |
| Supervisor Coronavirus Reporting Form | 10 |
| Short-Term Telecommuting Policy | 11 |
| Infectious Disease Control Policy | 15 |
| Temporary Suspension of Nonessential Business Travel | ., 18 |
| Declination of Flu/influenza vaccination for Medical Contraindication | 19 |
| Notice of Layoff or Furlough Due to Coronavirus | 21 |
| Health Screening Form for Visitors | 22 |
| Emergency Paid Sick Leave and Emergency FMLA Leave Policy | 23 |
| Explanation of Available Tax Credits | 29 |
| Request for Leave of Absence Form | 31 |
| Essential Business Letter | 32 |
| Code of Conduct Reminder | 33 |
| Protecting Data and Information When Teleworking/Working Remotely | 35 |
| Flexible Work Schedule Policy | 36 |
| Coronavirus Report a Concern Form | 38 |
| Work From Home Request Form | 39 |

Important Coronavirus Websites

The following is a list of Coronavirus websites from various governmental agencies.

| They should be check frequently for new developments and guidance, |
|--|
| Federal Government: |
| https://www.usa.gov/coronavirus |
| |
| Centers for Disease and Control and Prevention (CDC): |
| https://www.cdc.gov/coronavirus/2019-nCoV/index.html |
| |
| World Health Organization (WHO): |
| https://www.who.int/emergencies/diseases/novel-coronavirus-2019 |
| |

Centers for Medicare & Medicaid Services (CMS):

https://www.cms.gov/About-CMS/Agency-Information/Emergency/EPRO/Current-Emergencies-page

Department of Health and Human Services (HHS):

https://www.hhs.gov/about/news/coronavirus/index.html

Department of Labor (DOL):

https://www.dol.gov/coronavirus

Internal Revenue Service (IRS):

https://www.irs.gov/coronavirus-tax-relief-and-economic-impact-payments

Employer Action Checklist

Employers are facing unprecedented challenges in responding to the Coronavirus and its implications for their workplaces in the United States. The checklist below will assist in thinking through the issues most likely to need attention in the immediate future. Information, agency guidance, and potential responses to Coronavirus are changing rapidly.

Communication and Planning

well

| | Disseminate, as appropriate, CDC, WHO, OSHA, and local health authority websites, including the below guidance from the CDC: | | | |
|---|--|--|--|--|
| | | Updated information on Coronavirus | | |
| | | Interim Guidance for Businesses and Employers: Plan and Respond to Coronavirus Disease | | |
| | | Public Health Recommendations for Community-Related Exposure | | |
| | | Information regarding employee travel: Traveler's Health | | |
| | Adjust business operations and staffing levels in accordance with government- ordered closures of non-essential businesses and "shelter in place" orders | | | |
| | Develop a written plan of action to implement if a worker becomes sick with Coronavirus | | | |
| | Review or adopt telework policy, and evaluate workforce to determine which jobs can be performed remotely via telework and which cannot | | | |
| | Evaluate ability to provide technological support and access for significant numbers of employees performing remote work | | | |
| | Revi | ew or adopt emergency preparedness policy | | |
| | | ermine availability of Employer vacation and statutory paid sick leave while employees ain out of work (quarantine or office closure); consider any needed flexibility | | |
| | | municate with employees about safety precautions and procedures to follow in the event prious scenarios | | |
| W | orkpla | ace Safety | | |
| | | ew applicable OSHA (and state OSHA) and CDC standards, including OSHA's "Guidance reparing Workplaces for Coronavirus | | |
| | Enco | ourage employees to check themselves for symptoms, and to stay home when not feeling | | |

Educate employees regarding best practices for hygiene in the workplace

| | Per | form routine environmental cleanings of office, including high-touch surfaces |
|----|------|---|
| | | form enhanced cleaning and disinfection if an employee is suspected or confirmed to have onavirus |
| | Tak | e immediate steps to protect workers who are exposed to Coronavirus in the workplace |
| | Cor | nsider providing masks, gloves, sanitizer wipes and other protective equipment |
| | Tot | the extent possible (and as required by state or local authorities), permit telework |
| | | the extent possible, implement social distancing requirements for the workplace, and sider staggering shifts and other practices to lower the risk of contact/exposure |
| Le | ave | Benefits |
| | | ate new sick leave and medical leave policies in light of new legislation, including the nilies First Coronavirus Response Act (FFCRA) and any applicable state paid sick leaves |
| | | nsider creating leave policies to accommodate employees' potential need for leave due to rantines, isolation orders, or school closures related to Coronavirus |
| | Tra | ck each employee's use of leave, including the duration and reasons for the leave |
| | | ep in mind that leave taken under the FFCRA and under certain state sick leave laws are protected and employees should be reinstated to their prior positions once they return |
| | | ow procedures for claiming tax credits established by the IRS and discussed in planation of Available Tax Credits on page 29 |
| Re | spo | nse to Potential Exposure Incidents and Disclosure of Information |
| | Cor | nsult guidance from state and local public health departments |
| | | courage employees to self-report if they have been diagnosed with or exposed to onavirus or have recently traveled to high-risk locations |
| | risk | nsider asking any employees who have been exposed to Coronavirus or traveled to a high- location to work from home for the Coronavirus incubation period (currently 14 days from date of exposure, according to the CDC) |
| | If a | n employee has been diagnosed with Coronavirus: |
| | | Ask the affected employee to identify all individuals (co-workers, contractors, customers, clients, vendors) who have worked in close proximity with the employee for the period beginning two days prior to the onset of symptoms to the present |
| | | Inform other employees of their possible exposure to Coronavirus in the workplace, but keep the identity of the infected or exposed individual confidential |

- If needed, consider implementing non-invasive screenings of employees (such as body temperature checks or symptom questionnaires) entering the workplace; consult guidance from the EEOC and other federal, state, or local agencies regarding permissible medical inquiries in light of Coronavirus
- Monitor employee conduct and enforce anti-harassment and anti-discrimination policies

Individual Quarantine and Return to Work Policies

- □ If an employee is suspected or confirmed to have Coronavirus, request self- quarantine or mandatory quarantine pursuant to CDC guidelines and any quarantine/isolation orders from federal, state, or local health authorities
- Consider requiring medical clearance from a doctor before the employee returns to the workplace, but note that this may delay return because health care providers will be overwhelmed; consider instead requiring employees be completely symptom-free and past the incubation period before returning
- Consult guidance from CDC and state and local health authorities before allowing the employee to return to work

Reductions in Pay, Furloughs, or Closures

- □ Consider whether employees who are sent home due to an office closure will be paid or unpaid
- Follow all applicable wage and hour rules for employees who telework; be aware of differences concerning exempt and non-exempt employees with respect to time worked and furloughs
- To avoid layoffs, consider adopting a short-time compensation program (also known as work share) that may permit employees whose hours or pay have been reduced to receive partial unemployment benefits from the state
- Assess potential applicability of federal and state WARN Act requirements if a mass layoff or plant closing is necessary
- Inform workers who have been laid off, furloughed, or have had their hours or pay reduced about their potential eligibility for federal and state unemployment insurance benefits, including expanded benefits under the CARES Act

Sample Long Communication to Employees

Coronavirus Memo To Employees

To: Our Valued Employees

Subject: Coronavirus: Keeping Our Workplace Safe

As global concern about the current Coronavirus outbreak grows, we're doing our best to keep everyone healthy and safe in the workplace while also minimizing the disruptions to our day-to-day operations.

We're closely monitoring the situation and know that misinformation and fear can spread more virulently than the virus itself, and we want to discourage false information from circulating. If you're looking for trusted, up-to-date information, we recommend visiting the specific coronavirus websites of the CDC or the WHO.

We understand the current outbreak is worrying, and we want to take a moment to share the ways we can all help keep the workplace safe, as well as the steps we'll take as an organization if and when necessary.

Since the virus is highly contagious and there's currently no vaccine, we all need to:

Stay home if we are sick

If you experience cold, flu-like symptoms, or simply a running nose, please stay home. Because the coronavirus produces cold-like symptoms in 80% of infected individuals, it's important to remain at home when ill regardless of how mild your symptoms are. If you have a fever over 100.3 degrees, please stay home for 14 days to ensure you have not contracted the coronavirus.

Refrain from visiting the workplace after travel to an infected city or high-risk country

Please do not come into the workplace for 14 days if you've visited a city or country with a confirmed case of the virus, whether the trip was business-related or for personal travel. Additionally, if you've visited any city — with or without confirmed cases —please refrain from entering the workplace for 14 days.

Stay home if we've had contact with a potentially infected person

The virus spreads easily from person to person. Please stay home for 14-days if you've had contact with a confirmed case or potentially infected person. This includes persons returning from high-risk countries.

Refresh ourselves on proper cough and sneeze hygiene

Cover your nose or mouth with a tissue or your elbow — not your hand — and discard the issue immediately after.

Wash our hands regularly

Proper hand washing remains the best way to prevent transmission of the virus. Wash your hands after using the restroom, touching your face, eating, drinking, coughing, or sneezing, and at regular intervals throughout the day. Use warm soapy water and wash your hands for at least 20 seconds, or the time it takes to sing "Happy Birthday" twice. Alternatively, alcohol-based hand sanitizer is effective as well.

Stop touching our faces

Fomites — objects that we commonly touch — are tone of the ways the disease is spreading. Reduce the chance of transmission from a fomite, like a doorknob, by keeping your hands away from your eyes, nose, and mouth.

Other ways -Coronavirus can also spread from close contact with people who are talking or coughing

Rely on virtual communication when possible

In an effort to cut down on human-to-human contact, please cancel in-person meetings and communicate via videoconferencing or phone calls.

Get the flu vaccine

Healthy individuals are less susceptible to contracting the coronavirus. Keep yourself healthy by getting this year's vaccine.

In turn, the measures we're taking as an Employer will be:

- -Increase supplies of sanitizer wipes
- -We'll ensure the workplace has ample sanitizer wipes and ask that employees regularly wipe down their workstations.
- -Provide ample hand sanitizer and tissues around the office
- -Please cough and sneeze into tissues and immediately discard them. Use hand sanitizer after coughing, sneezing, touching your face, and regularly throughout the day.
- -Temporarily ban visitors and non-essential personnel from the property
- --This includes personal visitors and non-essential business visits from vendors, clients, and suppliers.
- -Increase the frequency of cleanings
- -We'll be increasing the frequency of our cleaning service from once per week to twice to ensure the workplace remains as hygienic as possible.
- -Consider remote work arrangements

While we don't have a work from home policy currently in place, we will evaluate the option if the virus continues to spread. In the meantime, if you have concerns please contact HR and we will evaluate telework requests on a case-by-case basis.

Of all these measures, we cannot stress enough the importance of staying home when you're sick. Please do your part to keep everyone safe and healthy by refraining from coming into work with symptoms even if you "feel fine."

As always, please contact the HR departments with any questions or concerns.

Thanks for your continued support in this uncertain time.

Short communication to employees

Coronavirus and Flu Prevention

| Da | ite: | |
|----|------|--|
| | | |

To: All employees

From:

The world health community continues to monitor closely the emergence of the SARS-CoV-2 virus and the disease it causes, named Coronavirus. At this time, no one knows how severe this outbreak will be. Given this uncertainty, and the fact that the seasonal influenza (flu) virus is also widespread, we are taking proactive steps to address a number of business concerns. First and foremost, we want to maintain a safe workplace and encourage and/or adopt practices protecting the health of employees, customers, visitors or others. We also want to ensure the continuity of business operations in the event of a pandemic.

We ask all employees to cooperate in taking steps to reduce the transmission of communicable diseases in the workplace. Employees are reminded of the following:

- Stay home when you are sick.
- Wash your hands frequently with warm, soapy water for at least 20 seconds.
- Cover your mouth with tissues whenever you sneeze, and discard used tissues in the trash.
- Avoid people who are sick with respiratory symptoms.
- Clean frequently touched surfaces.

[Employer name] will provide alcohol-based hand sanitizers throughout the workplace and in common areas. Cleaning sprays and wipes will also be provided to clean and disinfect frequently touched objects and surfaces such as telephones and keyboards.

Employees are encouraged to use telephone and video conferencing instead of face-to-face meetings as much as possible during this outbreak. IT support services are available to employees who need assistance with this technology.

It is critical that employees do not report to work while they are experiencing respiratory symptoms such as fever, cough, shortness of breath, sore throat, runny or stuffy nose, body aches, headache, chills or fatigue. Currently, the Centers for Disease Control and Prevention recommends that employees remain at home until at least 24 hours after they are free of fever (100 degrees F or 37.8 degrees C) or signs of a fever without the use of fever-reducing medications. Many times, with the best of intentions, employees report to work even though they feel ill. We provide paid sick time and other benefits to compensate employees who are unable

to work due to illness. Employees who report to work ill will be sent home in accordance with these health guidelines.

While we currently do not offer formal telework arrangements, [Employer name] will consider, on a case-by-case basis, requests from employees to work from home during this time. While not all positions are conducive to telework, those positions with primary job duties that can be effectively performed remotely will be given consideration.

Please contact the human resources department with any questions or concerns.

Supervisor Coronavirus Reporting Form

| On, I | _ observed Employee with the |
|---|-------------------------------------|
| following Corona symptoms (check all that apply): | |
| □ runny nose | |
| □ sore throat | |
| □ cough | |
| □ fever over 100 degrees | |
| □ difficulty breathing (severe cases) | |
| I advised him or her condition and instructed him or her to call her doctor to be tested. | leave work to go home ASAP and to |
| I advised him or her that he or she can to return to work u fourteen days if he or she tests positive for the virus | intil tests negative Coronavirus or |
| I further advised him or her that I will follow-up with a phore | ne. |
| | |
| | |
| Name | |

Short-Term Telecommuting Policy

Eligibility for Short-Term Telecommuting

Supervisors, at their own discretion, may allow some or all of their staff to telecommute on a short-term basis during the outbreak. Supervisors are responsible to ensure that their departments perform critical work to care for the Employer and maintain operations to the appropriate extent communicated by the Employer; flexibility may be given to non-essential work.

Typical eligibility criteria for telecommuting (for example, one year of service) do not apply in such circumstances, and an approved Telecommuting Agreement is not necessary.

Supervisors should regularly communicate with their staff regarding the fluidity of such situations, as well as changing business needs (such as the need to report to campus). Supervisors or employees may revoke a short-term telecommuting agreement at any time and for any reason.

Expectations for All Staff

Telecommuting staff members are responsible to:

Fulfill the expectations agreed upon with their supervisor regarding the scope of their telecommuting assignment, such as:

Duties and responsibilities

Hours of work (rest/meal breaks, overtime, and other wage and hour requirements still apply)

Hours of availability to communicate regarding employer's business

Communication of work assignments and personal needs, including reporting absences of work due to injury, illness, or caring for a family member

The use of the employer's equipment and materials.

Appropriately complete their timecard. For instructions on how to complete timecards during a pandemic, please contact your supervisor.

Protect Employer's information by following the employer's policies governing information security, software licensing, and data protection; ensuring that unauthorized individuals do not access Employer's data, either in print or electronically; and not accessing restricted-level information in print or electronically unless approved by the supervisor and protected by policy-compliant encryption and/or physical controls.

Maintain a safe environment in which to work.

Sample Expectations for Supervisors

Supervisors should communicate specific expectations to individual team members based on each person's needs and circumstance. To ensure that the telecommuting assignment is mutually

beneficial to both the Employer and its members, planning and communicating expectations in advance of the telecommuting is crucial.

For sample expectations that you may tailor for your staff members, please see Appendix A.

General Agreement

Employees must comply with Employer's rules, policies, practices, and instructions and understand that violation of same may result in termination of telecommuting privileges and/or discipline up to, and including, dismissal from the Employer.

Short-term telecommuting in extraordinary circumstances does not change the basic terms and conditions of employment with the Employer. Telecommuting assignments do not change a staff member's classification, compensation, or benefits. The accrual and charging of leave time are subject to the same policies and procedures applicable to non-telecommuting staff members.

The employer is an "at-will" employer, meaning that the employment relationship between the Employer and each of its staff members may be terminated at any time by either the Employer or the staff member, with or without notice or cause. Telecommuting assignments are not contracts or promises of employment. Nothing in a telecommuting assignment guarantees employment for any specific term, nor alters the "at-will" nature of employment.

Appendix A

Telecommuting During the Coronavirus Outbreak

Sample Supervisor Expectations

Dear Supervisors:

Should you grant your employees the opportunity to work from home on a limited basis during the Coronavirus outbreak, you must plan the telecommuting assignment ahead of time to ensure it will be mutually beneficial to both the employee and the Employer. Circumstances can change quickly during such fluid situations, and you are responsible to ensure that your department maintains adequate business operations. You should speak with your employees now to plan business coverage, should some of your employees be personally affected by the outbreak and unable to perform their duties partially or totally.

Additionally, emotions can run high with employees experiencing stress from their personal circumstances, in addition to any anxiety from disruption to normal routines. Without clear communication, it is easy for people to make assumptions, misinterpret directions, or further compound issues by not being on the same page. Please take the time to speak with each of your team members in advance to ensure seamless transitions during this potential time of change.

The expectations you have for each telecommuting assignment may vary among your team members, based on their role, needs, and unique circumstance. Please communicate clear expectations to your team members prior to the telecommuting assignment beginning.

Below are sample expectations; some of these may apply to some of your staff members and not others. Please tailor and add to the sample expectations below to meet the needs of each of your team members. Human Resources is pleased to answer any questions and assist in any way.

Sample Expectations

The opportunity to work from home will be granted for a limited period of time (list dates).

The opportunity to work from home may be withdrawn at any time.

If you cannot work remotely due to you being ill or caring for a family member who needs assistance, notify me no later than the beginning of your scheduled shift.

Adhere to all Employer timekeeping policies and procedures. For instructions on how to complete your timecard during a pandemic.

For non-exempt employees:

You may work up to eight (8) hours each business day. Refrain from working over eight hours in one day, or over 40 hours in one week., unless you obtain permission form your Supervisor

Take one fifteen (15) minute break near the middle of each four- hour segment of work.

Take one 30-60-minute meal break prior to the end of your fifth hour of work.

For exempt employees:

Only record full-day absences with the correct code on your timecard.

Be available by phone and/or e-mail during the agreed upon hours (list hours).

Respond to all e-mails and voicemails within one business day.

You do not need to provide an answer within one business day; but you must respond to each e-mail indicating that you have received the message and that you will respond fully in a timely manner.

E-mail your supervisor at the end of each business day providing a progress report on your work, including:

- -projects you have completed during the day
- -pending projects and their estimated date of completion
- -items on which you seek supervisory approval and insight

Infectious Disease Control Policy

[Employer name] will take proactive steps to protect the workplace in the event of an infectious disease outbreak. It is the goal of [Employer name] during any such time period to strive to operate effectively and ensure that all essential services are continuously provided and that employees are safe within the workplace.

[Employer name] is committed to providing authoritative information about the nature and spread of infectious diseases, including symptoms and signs to watch for, as well as required steps to be taken in the event of an illness or outbreak.

Preventing the Spread of Infection in the Workplace

[Employer name] will ensure a clean workplace, including the regular cleaning of objects and areas that are frequently used, such as bathrooms, breakrooms, conference rooms, door handles and railings. A committee will be designated to monitor and coordinate events around an infectious disease outbreak, as well as to create work rules that could be implemented to promote safety through infection control.

We ask all employees to cooperate in taking steps to reduce the transmission of infectious disease in the workplace. The best strategy remains the most obvious—frequent hand washing with warm, soapy water; covering your mouth whenever you sneeze or cough; and discarding used tissues in wastebaskets. We will also install alcohol-based hand sanitizers throughout the workplace and in common areas.

Unless otherwise notified, our normal attendance and leave policies will remain in place. Individuals who believe they may face particular challenges reporting to work during an infectious disease outbreak should take steps to develop any necessary contingency plans. For example, employees might want to arrange for alternative sources of child care should schools close and/or speak with supervisors about the potential to work from home temporarily or on an alternative work schedule.

Limiting Travel

All nonessential travel should be avoided until further notice. Employees who travel as an essential part of their job should consult with management on appropriate actions. Business-related travel outside the United States will not be authorized until further notice.

Employees should avoid crowded public transportation when possible. Alternative scheduling options, ride-share resources and/or parking assistance will be provided on a case-by-case basis. Contact human resources for more information.

Telecommuting

Telework requests will be handled on a case-by-case basis. While not all positions will be eligible, all requests for temporary telecommuting should be submitted to your manager for consideration.

Staying Home When III

Many times, with the best of intentions, employees report to work even though they feel ill. We provide paid sick time and other benefits to compensate employees who are unable to work due to illness. [Insert any specific policy guidance here].

During an infectious disease outbreak, it is critical that employees do not report to work while they are ill and/or experiencing the following symptoms: [Enter as warranted. Examples include fever, cough, sore throat, runny or stuffy nose, body aches, headache, chills and fatigue]. Currently, the Centers for Disease Control and Prevention recommends that people with an infectious illness such as the flu remain at home until at least 24 hours after they are free of fever (100 degrees F or 37.8 degrees C) or signs of a fever without the use of fever-reducing medications. Employees who report to work ill will be sent home in accordance with these health guidelines.

Requests for Medical Information and/or Documentation

If you are out sick or show symptoms of being ill, it may become necessary to request information from you and/or your health care provider. In general, we would request medical information to confirm your need to be absent, to show whether and how an absence relates to the infection, and to know that it is appropriate for you to return to work. As always, we expect and appreciate your cooperation if and when medical information is sought.

Confidentiality of Medical Information

Our policy is to treat any medical information as a confidential medical record. In furtherance of this policy, any disclosure of medical information is in limited circumstances with supervisors, managers, first aid and safety personnel, and government officials as required by law.

Social Distancing Guidelines for Workplace Infectious Disease Outbreaks

In the event of an infectious disease outbreak, [Name of Employer] may implement these social distancing guidelines to minimize the spread of the disease among the staff.

During the workday, employees are requested to:

- 1. Avoid meeting people face-to-face. Employees are encouraged to use the telephone, online conferencing, e-mail or instant messaging to conduct business as much as possible, even when participants are in the same building.
- 2. If a face-to-face meeting is unavoidable, minimize the meeting time, choose a large meeting room and sit at least six feet from each other if possible; avoid person-to-person contact such as shaking hands.
- 3. Avoid any unnecessary travel and cancel or postpone nonessential meetings, gatherings, workshops and training sessions.
- 4. Do not congregate in work rooms, pantries, copier rooms or other areas where people socialize.

- 5. Bring lunch and eat at your desk or away from others (avoid lunchrooms and crowded restaurants).
- 6. Encourage members and others to request information and orders via phone and e-mail in order to minimize person-to-person contact. Have the orders, materials and information ready for fast pick-up or delivery.

Outside activities

Employees might be encouraged to the extent possible to:

- 1. Avoid public transportation (walk, cycle, drive a car) or go early or late to avoid rush-hour crowding on public transportation.
- 2. Avoid recreational or other leisure classes, meetings, activities, etc., where employees might come into contact with contagious people.

Temporary Suspension of Nonessential Business Travel

Due to [Employer Name]'s commitment to employee safety in light of the Coronavirus outbreak, effective immediately, all nonessential business travel will be suspended until further notice. [Employer Name] will continue to monitor the situation and provide guidance as more information on the extent and severity of the outbreak becomes available.

Travel Cancellation Procedures

If nonessential business travel has already been booked, please work with [your manager/HR/our travel coordinator/etc.] to cancel properly to receive an airfare and hotel refund or credit if applicable. Set up phone or online conferencing with clients or other business units to replace the in-person meetings, if possible. Please make sure your manager knows the status of all meetings cancelled due to this temporary suspension.

Essential Travel

Essential business travel should be limited to those situations where business cannot reasonably be conducted without face-to-face interaction or visits to specific locations. Your manager must approve all travel (including trips that were previously approved) until further notice.

Procedures Upon Return from Travel

Employees who become ill during or upon returning from travel with virus-like symptoms will need to contact a health care provider as well as the HR department for direction as soon as possible.

[Optional, and not CDC recommended at this time due overburdening doctors: Employees may not return to work without obtaining clearance from their health care provider.]

Employees returning from travel who do not exhibit virus-like symptoms must still contact the HR department upon return and may be directed to remain away from the workplace for fourteen days to determine whether or not they have been exposed. The returning employee should work with his or her manager to set appropriate telecommuting arrangements or request time off from work.

Please contact the human resources department with any questions or concerns.

DECLINATION OF FLU/INFLUENZA VACCINATION FOR MEDICAL CONTRAINDICATION

Introduction

Date

Flu/Influenza vaccination is a condition of employment for all workers. Depending on the type of vaccination offered, specific medical contraindications may exist for certain individuals. The Employer will only accept evidence-based medical contraindication against flu/influenza vaccination confirmed by a licensed health care provider as a medical exception to the mandatory flu/influenza policy. It is necessary to re-assess medical contraindication each year

The employee's primary healthcare provider must complete this medical declination form and return it to [Name].

The Employer will endeavor to place an updated declination form in the employee's file annually.

My employer (the Employer) has recommended that I receive flu/influenza vaccination to protect myself, my co-workers, the Employer's customers, and the community.

I understand that because of where I work, I may place coworkers and customers at risk if I work while infected with the flu/influenza virus.

I understand that since I have an evidence-based medical contraindication to flu/influenza vaccination that I must wear a mask at all times through the duration of the flu/influenza season

| [dates]. | · · | |
|-----------------------|-----|--|
| Employee Name (print) | | |
| Employee Signature | | |

THE EMPLOYEE'S HEALTH CARE PROVIDER MUST COMPLETE THIS SECTION

I have evaluated [Employee name] and can verify that this employee has a medical contraindication to flu/influenza vaccination.

This employee has one or more of the following contraindications:

• Documented severe (life-threatening) allergy to eggs, egg products, or to other components of the flu/influenza vaccine

Notice of Layoff or Furlough Due to Coronavirus

Dear [Employee name],

Due to the economic impact of Coronavirus), [Employer name] is implementing measures to ensure the financial stability of the Employer. The current pandemic situation has impacted our business significantly, and as a result, we find that we must make some difficult personnel decisions.

Example language for a layoff:

Effective [date], [Employer name] is implementing a temporary layoff of certain positions. This notice is to inform you that your position is included in this layoff, effective beginning [date]. We expect the layoff to last until at least [date]; however, we will reassess the circumstances regularly and may lessen or extend this timeframe. We will recall laid-off employees as business needs warrant based first on job function and then by seniority.

Example language for a furlough:

Effective [date], [Employer name] is implementing a temporary furlough of certain nonessential positions. This notice is to inform you that your position is included in this furlough and as such, you are being placed on a temporary, unpaid leave of absence effective, beginning [date]. This furlough is expected to last through [date]. It is important to note that your employment continues to be at-will and nothing in this notice or other furlough communications is intended as an express or implied contract.

You may be eligible for unemployment benefits under these circumstances. Contact your local unemployment office for information on eligibility and applying for unemployment benefits. Present this letter to your local unemployment office as evidence of your employment status.

[Employer name] will communicate with you regularly during this period. If your personal phone number, email or mailing address has changed recently, please provide your current contact information to human resources immediately. Please feel free to contact human resources at [contact information] with any questions.

If you find alternate employment during this period and do not intend to return to work at [Employer name], please notify human resources immediately of your voluntary resignation.

Health Screening Form for Visitors

| all visitors must complete the follo | | ei namej ei | прюуссь, |
|--|----------------------------------|--------------|----------|
| Date: | | | |
| Visitor's name: | Visitor's phone numb | oer: | |
| Person/department visiting: | | | |
| Sel | lf-Declaration by Visitor | | |
| | | YES | NO |
| Have you traveled to [insert Employ or been in close contact with anyon within the last 14 days? | _ | | |
| Have you had close contact with or with Coronavirus within the last 14 | · · | | |
| Have you experienced any cold or f days (fever, cough, shortness of bre | * * | | |
| Visitors answering yes to any of the [Employer name]'s facility. | ne above questions will not be p | ermitted acc | cess to |
| Visitor signature: | | | |
| For internal use: | | | |
| Access to facility (circle one): | Approved | Denied | |
| Employee name: | Employee's signature: | | |

Emergency Paid Sick Leave and Emergency FMLA Leave Policy

(Only applies to Employers with fewer than 500 employees)

Purpose

To comply with the Families First Coronavirus Response Act and to assist employees affected by the Coronavirus outbreak with job-protected leave and pay, where applicable. This policy will be in effect from April 1, 2020, until December 31, 2020. Our existing paid sick pay and FMLA leave policy still applies to all other qualifying reasons for leave outside of this policy.

Emergency Paid Sick Leave

Eligibility

All current full- and part-time employees scheduled but unable to work (or telework) due to one of the following reasons for leave:

- 1. The employee is subject to a federal, state or local quarantine or isolation order related to Coronavirus.
- 2. The employee has been advised by a health care provider to self-quarantine due to concerns related to Coronavirus.
- 3. The employee is experiencing symptoms of Coronavirus and seeking a medical diagnosis.
- 4. The employee is caring for an individual who is subject to either number 1 or 2 above.
- 5. The employee is caring for his or her child if the school or place of care of the child has been closed, or the child care provider of such child is unavailable, due to Coronavirus precautions.
- 6. The employee is experiencing any other substantially similar condition specified by the secretary of health and human services in consultation with the secretary of the treasury and the secretary of labor.

"Child" means a biological, adopted or foster child, a stepchild, a legal ward, or a child of a person standing in loco parentis, who is:

- Under 18 years of age.
- 18 or older and incapable of self-care because of a mental or physical disability.

"Individual" means an immediate family member, roommate or similar person with whom the employee has a relationship that creates an expectation that the employee would care for the person if he or she self-quarantined or was quarantined. Additionally, the individual being cared for must: a) be subject to a federal, state or local quarantine or isolation order as described above; or b) have been advised by a health care provider to self-quarantine based on a belief that he or she has Coronavirus, may have Coronavirus or is particularly vulnerable to Coronavirus.

Furloughed employees are not eligible as there is no work available from which to take leave.

Amount of Paid Sick Leave

All eligible full-time employees will have up to 80 hours of paid sick leave available to use for the qualifying reasons above. Eligible part-time employees are entitled to the number of hours worked, on average, over a two-week period.

For employees with varying hours, one of two methods for computing the number of hours paid will be used:

- If the employee has worked 6 months or more, the average number of hours that the employee was scheduled per day over the 6-month period ending on the date on which the employee takes leave, including hours for which the employee took leave of any type.
- If the employee has worked less than 6 months, the expected number of hours to be scheduled per day at the time of hire.

[The following section on increments and intermittent use of leave is optional. Employers do not have to offer intermittent leave, but the DOL encourages employers to be as flexible as possible.]

Increments and Intermittent Use of Leave

When working from home, employees may take emergency paid sick leave intermittently and, in any increment, agreed to with their manager. As in the example for FMLA leave, an employee may only need 4 hours per day of leave to care for his or her child or may only need to do so on Tuesdays and Thursdays. Managers and employees are expected to be flexible in scheduling wherever possible.

For those not teleworking and currently working onsite, an employee may only take intermittent leave for reason 5 above, to care for his or her child when the school or place of care is closed, or the caregiver is unavailable due to Coronavirus-related reasons. Per the regulations, as all other reasons for emergency paid sick leave could potentially expose an employee or others in the workplace to the virus, employees must either use the full amount of paid sick leave or use it in full-day increments until the reason for leave is over and it is safe for the employee to return to work.

Rate of Pay

Emergency sick leave will be paid at the employee's regular rate of pay, or minimum wage, whichever is greater, for leave taken for reasons 1-3 above. Employees taking leave for reasons 4-6 will be compensated at two-thirds their regular rate of pay, or minimum wage, whichever is greater. Pay will not exceed:

- \$511 per day and \$5,110 in total for leave taken for reasons 1-3 above.
- \$200 per day and \$2,000 in total for leave taken for reasons 4-6 above.

Interaction with Other Paid Leave

The employee may use emergency paid sick leave under this policy before using any other accrued paid time off for the qualifying reasons stated above.

Employees on expanded FMLA leave under this policy may use emergency paid sick leave concurrently with that leave. Emergency paid sick leave may also be used when an employee is on leave under traditional FMLA for his or her own COVID-19-related serious health condition or to care for a qualified family member with such a condition.

Procedure for Requesting Emergency Paid Sick Leave

Employees must notify their manager or the HR manager of the need and specific reason for leave under this policy. A form will be provided to all employees on the Employer intranet and/or in a manner accessible to all. Verbal notification will be accepted until practicable to provide written notice.

Documentation supporting the need for leave must be included with the leave request form, such as:

- A copy of the federal, state or local quarantine or isolation order related to Coronavirus applicable to the employee or the name of the government entity that issued the order.
- Written documentation by a health care provider advising the employee to selfquarantine due to concerns related to Coronavirus or the name of the provider who advised the employee.
- The name and relation of the individual the employee is taking leave to care for who is subject to a quarantine or isolation order or is advised to self-quarantine.
- The name and age of the child or children being cared for; the name of the school, place of care, or child care provider that closed or became unavailable; and a statement that no other suitable person is available to care for the child during the period of requested leave.
 - o For children over age 14, a statement indicating the special circumstances that require the employee to provide care during daylight hours.

Once emergency paid sick leave has begun, the employee and his or her manager must determine reasonable procedures for the employee to report periodically on the employee's status and intent to continue to receive paid sick time.

Carryover

Paid emergency sick leave under this policy will not be provided beyond December 31, 2020. Any unused paid sick leave will not carry over to the next year or be paid out to employees.

Job Protections

No employee who appropriately utilizes emergency paid sick leave under this policy will be discharged, disciplined or discriminated against for work time missed due to this leave.

Emergency FMLA Leave

Employee Eligibility

All current employees who have been employed with [Employer Name] for at least 30 days and are actively scheduled for work are eligible for leave under this policy.

Employees laid off or otherwise terminated on or after March 1, 2020, who are rehired on or before December 31, 2020, are eligible for leave upon reinstatement if they had previously been employed with [Employer name] for 30 or more of the 60 calendar days prior to their layoff or termination.

Reason for Leave

Eligible employees who are unable to work (or telework) due to a need to care for their child when a school or place of care has been closed, or when the regular child care provider is unavailable due to a public health emergency with respect to COVID-19.

"Child" means a biological, adopted or foster child, a stepchild, a legal ward, or a child of a person standing in loco parentis, who is:

- Under 18 years of age.
- 18 or older and incapable of self-care because of a mental or physical disability.

"Child care provider" means a provider who receives compensation for providing child care services on a regular basis, including:

- A center-based child care provider.
- A group home child care provider.
- A family child care provider (one individual who provides child care services for fewer than 24 hours per day, as the sole caregiver, and in a private residence).
- Other licensed provider of childcare services for compensation.
- A childcare provider that is 18 years of age or older who provides child care services to children who are either the grandchild, great grandchild, sibling (if such provider lives in a separate residence), niece or nephew of such provider, at the direction of the parent.

Duration of Leave

Employees will have up to 12 weeks of leave to use from April 1, 2020, through December 31, 2020, for the purposes stated above. This time is included in and not in addition to the total FMLA leave entitlement of 12 weeks in a 12-month period.

For example, if an employee has already taken 6 weeks of FMLA leave, that employee would be eligible for another 6 weeks of FMLA leave under this policy.

[&]quot;School" means an elementary or secondary school.

[Omit the last two sentences in this section above if the employer has fewer than 50 employees and is not usually covered under the FMLA]

[The following section on increments and intermittent use of leave is optional. Employers do not have to offer intermittent leave, but the DOL encourages employers to be as flexible as possible.]

Increments & Intermittent Use of Leave

Employees may take expanded FMLA leave intermittently and in any increment agreed to with their manager. For example, an employee may only need 4 hours per day of leave to care for his or her child or may only need to do so on Tuesdays and Thursdays. Managers and employees are expected to be flexible in scheduling wherever possible.

Pay During Leave

Leave will be unpaid for the first 10 days of leave; however, employees may use accrued paid vacation, sick or personal leave during this time. The employee may also elect to use the paid leave provided under the Emergency Paid Sick Leave Act, as further explained below. After the first 10 days, leave will be paid at two-thirds of an employee's regular rate of pay for the number of hours the employee would otherwise be scheduled to work. Pay will not exceed \$200 per day and \$10,000 in total, or \$12,000 in total if using emergency paid sick leave for the first two weeks. Any unused portion of this pay will not carry over to the next year.

For employees with varying hours, one of two methods for computing the number of hours paid will be used:

- If the employee has worked 6 months or more, the average number of hours that the employee was scheduled per day over the 6-month period ending on the date on which the employee takes leave, including hours for which the employee took leave of any type.
- If the employee has worked less than 6 months, the expected number of hours to be scheduled per day at the time of hire.

[Optional: Employees may also supplement the two-thirds pay with accrued Employer paid time off (PTO) not to exceed 100% of regular pay. For example, an employee may choose to use one-third of an hour of PTO for each hour of expanded FMLA leave taken to reach 100% of normal pay per hour.]

Employee Status and Benefits During Leave

While an employee is on leave, the Employer will continue the employee's health benefits during the leave period at the same level and under the same conditions as if the employee had continued to work. While on paid leave, the employer will continue to make payroll deductions to collect the employee's share of the premium. During any unpaid portions of leave, the employee must continue to make this payment per instructions from the HR department.

If the employee contributes to a life insurance or disability plan, the employer will continue making payroll deductions while the employee is on paid leave. During any portion of unpaid leave, the employee may request continuation of such benefits and pay his or her portion of the premiums,

or the employer may elect to maintain such benefits during the leave and pay the employee's share of the premium payments. If the employee does not continue these payments, the employer may discontinue coverage during the leave. If the employer maintains coverage, the employer may recover the costs incurred for paying the employee's share of any premiums, whether or not the employee returns to work.

Procedure for Requesting Leave

All employees requesting FMLA leave must provide written notice of the need for leave to the HR manager as soon as practicable. Verbal notice will otherwise be accepted until written notice can be provided.

Notice of the need for leave must include:

- The name and age of the child or children being care for.
- The name of the school, place of care, or child care provider that closed or became unavailable due to Coronavirus reasons.
- A statement representing that no other suitable person is available to care for the child or children during the period of requested leave. For children over the age of 14, a statement indicating the special circumstances that require the employee to provide care during daylight hours.

On a basis that does not discriminate against employees on FMLA leave, the Employer may require an employee on FMLA leave to report periodically on the employee's status and intent to return to work.

Employee Status After Leave

Generally, an employee who takes FMLA leave will be able to return to the same position or a position with equivalent status, pay, benefits and other employment terms. The Employer may choose to exempt certain key employees from this requirement and not return them to the same or similar position when doing so will cause substantial and grievous economic injury to business operations. Key employees will be given written notice at the time FMLA leave is requested of their status as a key employee.

[Employers with fewer than 25 employees may wish to adopt the following language in lieu of the preceding paragraph:]

Generally, an employee who takes FMLA leave will be able to return to the same position or a position with equivalent status, pay, benefits and other employment terms. If the position the employee held before leave started no longer exists due to economic conditions or operational changes that are made because of the public health emergency, and no equivalent position is available, the employee will not be returned to employment. However, for the period of one year after qualifying leave under this policy ends, [Employer Name] will make reasonable efforts to contact the employee if an equivalent position becomes available.

Please contact the HR department with any questions.

Explanation of Available Tax Credits

The Families First Coronavirus Response Act (FFCRA) provides small and midsize businesses with refundable tax credits to reimburse them for the costs of paid sick and family leave wages to their employees for Coronavirus related leave. The Coronavirus Aid, Relief and Economic Security Act (CARES Act) was then enacted to encourage eligible employers to keep employees on their payroll, despite economic hardship caused by COVID-19, by providing eligible employers with an employee retention tax credit.

Tax Credits under the FFCRA

The FFCRA provides tax credits for the Emergency Paid Sick Leave and the Emergency Family and Medical Leave. Certain employers required to provide up to 80 hours of qualified sick leave wages to employees for qualifying purposes. The amount of Emergency Paid Sick Leave wages paid are capped at \$511 per day, or up to \$5,111 in the aggregate (\$200 per day, or up to \$2,000 in the aggregate, if the leave is for caring for a child or family member), for each employee. In addition, certain employers are required to provide up to 12 weeks of Emergency Family and Medical Leave wages to employees for qualifying purposes, though the first two weeks may be unpaid. The amount of Emergency Family and Medical Leave wages paid are capped at \$200 per day for each individual, up to \$10,000 in the aggregate for each employee. For purposes of these acts, the wages must be paid between April 1, 2020 and December 31, 2020.

Generally, employers subject to paid leave requirements are entitled to fully refundable tax credits to cover the cost of the leave required to be paid for the periods of time during which employees are unable to work for various Coronavirus related conditions. The credit is allowed against the employer's portion of Social Security taxes and is equal to 100 percent of the Emergency Paid Sick Leave wages paid and/or 100 percent of the Emergency Family and Medical Leave wages paid. In addition to the amount of Emergency Paid Sick Leave wages paid and the Emergency Paid Family and Medical Leave wages paid, the credit is increased by the employers' share of the Medicare taxes imposed on those wages and any qualified health plan expenses allocable to those wages.

Employers claiming the credits for qualified leave wages, plus allocable qualified health plan expenses and the eligible employer's share of Medicare taxes, must retain records and documentation related to and supporting each employee's leave to substantiate the claim for the credits for at least four years.

To claim the credits, the eligible employers report their total qualified leave wages (and allocable health plan expenses and the employer's share of Medicare tax on the qualified leave wages) for the calendar quarter on their federal employment tax returns (Form 941 for quarterly filers). However, in anticipation of receiving the credits, eligible employers can fund qualified leave wages by first accessing the federal employment taxes that are set aside for deposit with the IRS. Employment taxes subject to retention include federal income tax withheld from employees, the employees' share of Social Security and Medicare taxes, and the employer's share of Social Security and Medicare taxes with respect to all employees. This means that the eligible employer can reduce the amount of federal employment taxes it would otherwise be required to deposit for that quarter before it is required to make the federal tax deposit.

Advance payment of the credit is also available. If the employment tax deposits are not sufficient to cover the credit, the employer can submit Form 7200, Advance Payment of Employer Credits

Due to COVID-19 to receive an advance payment from the IRS. This form must be submitted by fax.

Tax Credits under the CARES Act

The CARES Act provides many businesses with the opportunity to claim an Employee Retention Credit (ERC) if the business was financially impacted by Coronavirus. The ERC was designed to assist businesses in keeping employees on their payroll during the pandemic.

ERC is available to all employers with two exceptions. State and local governments, along with their instrumentalities, are not entitled to ERC nor are small businesses who take small business loans under the Payroll Protection Program. In addition, qualifying employers for ERC must fall into one of two categories:

- the employer's business is fully or partially suspended by government order due to COVID-19 during the calendar quarter;
- the employer's gross receipts are below 50 percent of the comparable quarter in 2019.

The amount of ERC is 50 percent of qualifying wages paid up to \$10,000 (maximum credit of \$5,000 per employee) for wages paid after March 12, 2020 and before January 1, 2021. Included in the calculation of qualifying wages is a portion of the cost of employer-provided health care allocable to the wages.

Qualifying wages are based on the average number of employees in 2019. For employers with less than 100 employees on average in 2019, ERC is based on the wages paid to all employees, regardless if they worked or not. For employers with over 100 employees on average in 2019, ERC is based only on the wages paid to employees who did not work during the calendar quarter.

To claim the credit, the eligible employer reports their total qualified wages and the related credits for the calendar quarter on their federal employment tax returns (Form 941 for quarterly filers). However, in anticipation of receiving the credits, eligible employers can fund qualified wages by first accessing the federal employment taxes that are set aside for deposit with the IRS. This means that the eligible employer can reduce the amount of federal employment taxes it would otherwise be required to deposit for that quarter before it is required to made the federal tax deposit.

Advance payments of ERC are also available. If the employment tax deposits are not sufficient to cover the credit, the employer can submit Form 7200, Advance Payment of Employer Credits Due to COVID-19 to receive an advance payment from the IRS. This form must be submitted by fax.

Request for Leave of Absence Form

| Employee Name | Phone Number: |
|--|--|
| Address: | ······································ |
| Email Address: Emergency Con | tact:Phone Number: |
| TYPE OF LEAV | E REQUESTED |
| Emergency Paid Sick Leave | Emergency Paid FMLA Leave |
| Time Permitted: Two weeks (10 days) maximum | Time Permitted: Twelve weeks total |
| Type of Leave: Paid Leave | Type of Leave: Two weeks unpaid. Ten weeks paid. |
| I am unable to work (or telework) for the following reason: | I am unable to work (or telework): |
| □ I am subject to a federal, state or legal quarantine or isolation order related to CORONA. □ I have been advised by a health care provider to self-quarantine due to concerns related to CORONAVIRUS. □ I am experiencing symptoms of CORONAVIRUS and am seeking diagnosis. □ I am caring for an individual who is subject to self-quarantine by a federal, state, or local order or was advised by a health care provider to self-quarantine* □ I am caring for my son or daughter (under the age of 18) because school or place of care has been closed due to CORONAVIRUS precautions. □ I am experiencing other conditions substantially similar to CORONAVIRUS as specified by the Secretary of HHS. Date Leave Will Begin: Date You Will Return: □ Continuous □ Intermittent* Explain proposed schedule for intermittent leave: | □ I am caring for my son or daughter (under the age of 18) because school or place of care has been closed due to CORONAVIRUS precautions, and □ I have been employed by this employer for at least 30 calendar days. Date Leave Will Begin: Date You Will Return: □ Continuous □ Intermittent* Explain proposed schedule for intermittent leave: |
| *Employer and employee must agree to intermittent leave. | *Employer and employee must agree to intermittent leave. |
| Job Protected Leave: Employers with 25 or more employees at taking leave under the Emergency FMLA. If the position does not or operating conditions, the employer is obligated to make a reason Maximum Leave of Absence Rights: An employee is entitled to a | nable effort to find an equivalent position. a combined maximum of 12 weeks, including any additional federal |
| Provide Documentation Supporting Eligibility: Please include reserves the right to tentatively approve your request for leave per your doctor, the health care provider's name, or evidence that the employer is responsible for substantiation and tax credit submission. I certify that the above information is accurate and complete. I under the date or fail to contact Human Resources at # | documentation supporting eligibility for this leave. The employer nding receipt of doctor's confirmation that you qualify. A letter from daycare is closed will help expedite approval of your request. The ons. derstand if I fail to report to work on or before the scheduled return |
| Employee Signature: Date | Employer Signature Approved Denied Date |

Essential Business Letter

[Disclaimer: Businesses should consult the relevant guidelines to determine whether they are an essential business.]

| [date] |
|--|
| [employee name and address] |
| To whom it may concern: |
| The employee identified above is employed by [name of business], which [describe services your business provides] and is continuing operations at [address of business] during the shelter-in-place order as an essential business under relevant law. |
| [Employer name] is committed to complying with the relevant requirements and appreciates your assistance in enabling our employee to continue to provide essential functions to the community. |
| This employee generally works a schedule of [X to X] plus travel to and from work and this letter does not apply to time outside of normal working hours. If you have any questions, please contact me at the number below. |
| Sincerely, |
| [Name of executive] |
| [Phone number] |

Code of Conduct Reminder

Many employers are updating policies and procedures in response to the Covid-19 pandemic—for instance, allowing all or part of their workforce to telework in order to slow the spread of coronavirus. It's important that employers continue to communicate to their employees the fundamentals of the organization's code of conduct. The sample reminder below is a communication that can be sent quarterly, semi-annually or annually in normal circumstances and that may be modified to reference any set of circumstances.

To: All Employees

From: [CHIEF COMPLIANCE OFFICER]

Date: MM/DD/YY

Subject: Code of Conduct—Reminder

Relevant Policy:

[EMPLOYER] Code of Conduct

Our Employer has various compliance and ethics resources to help employees understand what is expected and required of them. These include policies and procedures, training programs, specific groups, our employee hotline and our Code of Conduct.

We are issuing this reminder on our Code of Conduct, a critical centerpiece of our compliance and ethics program that outlines the minimum compliance and ethical standards employees must follow as well as what to do if they have concerns or questions. While not exhaustive of all issues that apply to your day-to-day activities, the Code is an important starting point of key principles that will help you avoid either an appearance of or actual misconduct. These include:

- supporting our values and commitments;
- complying with the laws, rules, and regulations that apply to our Employer as set out in our Employer policies, procedures, and related controls;
- promoting our corporate governance controls;
- assuring for the preparation and reporting of our financial information;
- maintaining integrity and fairness in the workplace;
- protecting and properly using Employer information and opportunities;
- preserving the confidentiality of Employer information;
- avoiding conflicts of interest;
- dealing with customers, suppliers, competitors and other employees fairly;

- preventing anti-competitive practices, corruption, fraud, money laundering and terrorist financing;
- · promoting sustainability and social responsibility; and
- reporting of any improper or unethical behavior.

Please make sure to review our Code of Conduct in its entirety for additional guidance. While the Code cannot anticipate every situation that the Employer or an employee may encounter, when facing a decision about the right action to take, employees should be sure they can answer "yes" to the following questions:

- Is this action consistent with our Employer values?
- Will this action protect our reputation as an ethical Employer?
- Can this action withstand public scrutiny if it were reported in the news media?

Additionally, you can refer your question to your manager or <insert link, contact email, or phone number> for further assistance.

Thank you for your ongoing support to promote our Employer's compliance and ethics program.

Protecting Data and Information When Teleworking/Working Remotely

Many employers are allowing all or part of their workforce to telework in order to slow the spread of coronavirus. It's important that employers maintain their data security practices while employees telework both to protect their business and because they may be required to do so by state law. Employers can use this model document in conjunction with their telework policy to remind employees of proper data security practices while teleworking.

When working remotely, it's critical that you remain vigilant when it comes to safeguarding data and information. Please take the following steps:

- Avoid using personal email for work.
- When sending sensitive information via email, please password protect files or encrypt emails.
- Do not allow others, including others in your household, to view or overhear sensitive information.

Because many households are self-isolating or quarantining during the Covid-19 pandemic, it may be especially difficult for employees to shield sensitive information from other members of their household. It is essential to provide guidance for employees about how and when to do so. If employees can't shield sensitive information, it may become necessary to reassign their duties.

- Do not use personal cloud storage accounts to share [Employer] files.
- Never save any [Employer] data or information to a personal computer or application/system. This includes mobile phones.
- Never save any personal data to an [Employer] computer or application/system.
- Do not print sensitive data or information unless absolutely necessary. Ensure hard copies of sensitive data or information are with you at all times and stored securely.
- Shred hard copies of sensitive data or information after use.
- Only allow [Employer] IT department to repair your work computer or phone.
- Pay close attention to all unsolicited electronic messages and attachments to ensure they are legitimate. Confirm the sender's identity.
- If you encounter an email that you know or suspect is a phishing attempt, please notify [Employer] immediately.

During a crisis like the Coronavirus pandemic, there may be an increase in phishing activity. Scams may attempt to exploit the crisis or play on people's fears. Employees should be prepared to recognize and report such scams.

• If you noticed something unusual or if you suspect your device has been compromised while working remotely, contact [Employer] immediately. [Provide contact information]

Flexible Work Schedule Policy

The Employer is committed to providing a workplace environment that fosters employees' work-life balance and allows employees to satisfy their personal and family obligations while still meeting their work responsibilities. To that end, the Employer will offer eligible employees the opportunity to work a flexible schedule.

Examples of the types of flexible work schedules that the Employer may consider include the following:

- Flex-time. An employee works full-time, but at different starting and ending times than the times traditionally worked by employees at the Employer.
- Compressed schedule. An employee works a full workweek in less than five days.
- Job sharing. Two or more employees share one full-time position.
- Part-time work. An employee works less than a full-time schedule.
- Work remotely or telecommute. An employee works some or all of his or her working hours away from the workplace.

Employees seeking a flexible work schedule should make a written request to [insert position].

Flexible work schedules are generally not available to employees who work in the following departments: [insert department names]. This is due to the nature of their job duties and responsibilities. In special circumstances, at the Employer's discretion, or where required by law, the Employer may allow employees in these departments to work a flexible work schedule.

The Employer will grant eligible employees a flexible work schedule on a case-by-case basis, at the Employer's discretion and dependent upon factors such as the employee's job duties, the employee's experience level and work history, and the needs of the Employer. Only those employees who meet the Employer's performance standards will be eligible for consideration for a flexible work schedule.

The Employer will also grant flexible work schedules to employees consistent with its obligations under applicable state, federal, or local law, such as the Americans with Disabilities Act, the Family and Medical Leave Act, or to help protect employees and customers from exposure during the Coronavirus pandemic. Employees seeking a flexible work schedule as a reasonable accommodation should follow the Employer's Americans with Disabilities Act policy. Employees seeking a reduced work schedule pursuant to the Family and Medical Leave Act should follow the Employer's Family and Medical Leave Act policy.

Employees are not eligible to work a flexible work schedule until they have been employed with the Employer for one continuous year. In special circumstances, at the Employer's discretion, or where required by law, the Employer may allow employees with less than one year of service to work a flexible work schedule.

An employee who works remotely must make him or herself available to the Employer at all times during the employee's scheduled work hours. Non-exempt employees working remotely must accurately record all hours worked as required by the Employer.

The Employer may require employees working flexible schedules to adjust their schedules to meet the needs of the Employer.

Employees who work flexible work schedules must abide by all Employer policies.

At its discretion, the Employer may change or revoke an employee's flexible work arrangement at any time.

Employees who violate this policy or do not comply with the terms of their flexible work schedules may be subject to disciplinary action, up to and including termination of employment.

Coronavirus Report a Concern Form

This form is only for Coronavirus concerns. If you are concerned for yourself or someone else, please complete this form. The form cannot be submitted anonymously., but we will keep your name confidential. Whenever possible, please have the person the concern is for complete this form as well.

| Any employee of the Employer who feels they were in a situation where they may have come into direct contact with the virus and any employee of the employee that is experiencing flu-like symptoms (fever over 100.3, cough, shortness of breath) when they are at the Employer should |
|---|
| alert the Employer at or their healthcare provider for assistance. |
| Reporting Party Information |
| Your full name: |
| Your phone number: |
| Your email address: |
| Is the concern for you? (Required): |
| Employer Location of Person (Required): |
| Please answer the below for the person you are concerned about |
| Person of Concern |
| Phone Number |
| Department |
| Does the person of concern have sick symptoms? If yes, please list symptoms fully in information box below. (Required) Yes No |
| Please include full details regarding the concern. (Required) |
| Please list any symptoms this individual may be having. (Required) |
| Has the individual of concern been on the Employer Premise (listed above) in the last 14 days? |
| (Required) Yes No |
| Supporting Documentation Photos, video, email, and other supporting documents may be attached below. 1GB maximum total size. |

.

Work from Home Request Form

| Request Date | <u> </u> | |
|--------------------------------------|-----------------------------|-----------------------------|
| Employee Name | | |
| Position/Title | | |
| Department | | |
| Work from Home Start Date | | |
| Work from Home End Date _ | | _ |
| Proposed Schedule Details | Ctaut Times | Find Times |
| Manday | Start Time | End Time |
| Monday | | |
| Tuesday Wednesday | - - | - |
| Thursday | | |
| Friday | | |
| Saturday | | |
| Sunday | | |
| Employee Signature | | |
| Supervisor Name | | |
| Proposed work from home so | chedule will not affect the | operations negatively. |
| Yes No | | |
| The practice will not cause o | vertime or additional work | doad. |
| Yes No | | |
| Employee performance can l Yes No | be monitored/tracked duri | ng work from home practice. |
| Approval of the Request: The | e request is approved | The request is denied |
| Additional Comments/Consid | derations | |
| Date_ | | |
| Datc | | |
| Supervisor Signature | | |