# Human Resource Policies and Procedures for Federally Qualified Health Centers During Public Health Emergencies

Template and Guidance Document

Developed by the Community Healthcare Association of New York State (CHCANYS)

With development support by ARH Health Consulting LLC

Legal review by Feldesman, Tucker, Leifer, Fidell LLP

DRAFT v2. March 2021

|  |
| --- |
| *Note: This template and guidance document should be used to develop an annex to the federally qualified health center’s (FQHC’s, health center’s) Emergency Operations Plan (EOP) that is meant to supplement its existing Human Resource Policies and Procedures. These policies and procedures will only be* *activated* *when a public health emergency is declared by local, state, and/or federal authorities. The annex should be reviewed and updated at least every 2 years. Shaded areas within brackets indicate where FQHCs should edit and customize this document for their organization. “For Consideration” questions are provided to assist FQHCs with addressing issues likely to arise during public health emergencies. Additional information in response to the questions should be added to this document accordingly, and as applicable. FQHCs should delete or modify anything in this template that does not apply to them. The annex that is developed should be written to be shared with employees.* |

|  |
| --- |
| **Disclaimer:** This template and guidance document is published with the understanding that CHCANYS is not engaged in rendering le­gal, financial or other professional service. If legal advice or other expert assistance is required, the services of a competent pro­fessional should be sought. This document is not a substitute for legal advice. |

This document is supported by the Department of Health and Human Services Office of the Assistant Secretary for Preparedness and Response under award number U3REP190597-02. The content is solely the responsibility of the authors and does not necessarily represent the official views of the Department of Health and Human Services Office of the Assistant Secretary for Preparedness and Response.​

# Human Resource Policies and Procedures for [Name of Federally Qualified Health Center] During Public Health Emergencies

|  |  |
| --- | --- |
| **Policy HR-EM-1:** This document describes Human Resource policies and procedures for [Name of FQHC] during public health emergencies. It is an addendum to [Name of FQHC]’s existing (i.e., “standard”) HR policies and procedures. The **policies and procedures contained in this document will be activated and put into effect** when a public health emergency is declared by local, state, and/or federal authorities. “Standard” HR policies will be back in effect at the conclusion of the declared public health emergency or as otherwise determined by [Name of FQHC]. | |
| **Date:** [Insert date] | **Contact:** For questions about any of the policies contained in this document, please contact [Insert name of document “owner”]. |

The policies and procedures described in this document will be activated by [Title of individual authorized to activate these policies and procedures] when a public health emergency is declared by local, state, and/or federal authorities, and such emergency adversely affects the employees and/or operations of [Name of FQHC]. All employees will be notified of the activation of these policies and procedures [via e-mail or other communication] from [Title of individual authorized to activate these policies and procedures]. Notification will also be posted to [Name of FQHC]’s intranet page.

[Title of individual authorized to activate these policies and procedures] may deactivate these policies and procedures when the emergency declaration is rescinded or expires, or sooner if the health center’s employees and/or operations are no longer adversely impacted by the emergency. Notification of deactivation and return to “standard” HR policies and procedures will be made via e-mail to all employees and if available posted to [Name of FQHC]’s intranet page.

|  |
| --- |
| **Policy HR-EM-2:** [Name of FQHC] will follow incident-specific guidance from public health, and labor authorities throughout the duration of the public health emergency. |

[Name of FQHC] will refer to the best available incident-specific recommendations from local, state, and federal public health, and labor authorities to inform any additions or modifications to these policies and procedures throughout the course of the public health emergency. Sources will include:

* New York City Department of Health and Mental Hygiene (NYC DOHMH)
* New York State Department of Health (NYS DOH)
* U.S. Centers for Disease Control and Prevention (CDC)
* New York State Department of Labor (NYS DOL)
* Occupational Safety and Health Administration (OSHA)
* [Add any others here, if desired.]

[If part of a network, indicate if guidance will come to each site from the main administrative office.]

|  |
| --- |
| **Policy HR-EM-3:** [Name of FQHC] will take into consideration any current collective bargaining agreements to which [Name of FQHC] is party when developing the policies and procedures described in this document (and any incident-specific addenda). |

[Name of FQHC] will consider any current collective bargaining agreements to which it is party in the development and implementation of the policies and procedures described in this document, and in any incident-specific addenda that may be added to this document. [Add to this section as needed using the questions below, and/or any other related resource.]

*For Consideration*

* Are you familiar with the related provisions in any collective bargaining agreements to which your FQHC is party?
* Will your FQHC seek modifications to collective bargaining agreements to ensure employee safety and meet business needs during and after a public health emergency?
* Does your FQHC have an established protocol for collaborating with union representatives and FQHC employees on modifications to any such collective bargaining agreements?

|  |
| --- |
| **Policy HR-EM-4:** [Name of FQHC]’s existing sick leave policies and procedures will be modified as described in this document when a public health emergency is declared by local, state, and/or federal authorities, and for the duration of the emergency. |

During a declared public health emergency, [Name of FQHC] may implement modified sick leave policies and procedures, as follows:

* [Insert here a bulleted list to describe modified sick leave policies and procedures that will be enacted by your FQHC during a public health emergency.]

*For Consideration*

* How much time will “Exempt” (i.e., salaried) employees sent home with symptoms suggestive of illness related to the public health emergency be paid for)?
* How much time will “Non-Exempt” (i.e., paid hourly) employees sent home with symptoms suggestive of illness related to the public health emergency be paid for?
* Will employees out sick in compliance with isolation and/or quarantine guidelines or orders require a doctor’s note for their absence to be excused and paid?
* Will employees out sick in compliance with isolation guidelines or orders be paid for all related sick days, regardless of sick leave balance at the time they must begin isolation?
* Will employees out sick in compliance with quarantine guidelines or orders be paid for all related sick days, regardless of sick leave balance at the time they must begin quarantine, and the route of exposure (e.g., if infected at work vs. infected in the community)?
* Will there be any annual limits to isolation/quarantine-related benefits provided to employees during an extended public health emergency?
  + Are such limits applicableto situations where an employee is required to quarantine because of exposure in the workplace (vs. voluntary participation in community activities) while performing his or her assigned duties?
* Will employees who must care for dependent minors and/or other family members requiring assistance when those family members must comply with isolation and/or quarantine guidelines or orders be paid for sick days?
  + Will they be paid regardless of sick leave balance at the time of their isolation or quarantine?
  + Will be there be annual limits to this “dependent care” benefit? Would additional leave to care for family members who must isolate, or quarantine may need to be taken in accordance with your FQHC’s standard sick leave policies and procedures?

|  |
| --- |
| **NOTE:** The number of days for which employees may be paid for compliance with isolation and/or quarantine guidelines or orders should be determined by the best available incident-specific recommendations from local, state, and federal public health authorities, and current applicable labor laws, at the time the sick leave occurs. |

* Will an employee out sick due to illness unrelated to the public health emergency, be required to take leave in accordance with your FQHC’s standard sick leave policies and procedures?
* Will an employee who wishes to use sick leave to care for ill family members unrelated to the public health emergency, be required to take leave in accordance with your FQHC’s standard sick leave policies and procedures?
* If an employee needs to take additional time off after accessing benefits through modified and/or existing sick leave policies and procedures to care for themselves and/or other family members (including for dependent minors attending school from home due to the public health emergency), who may he or she speak with to determine eligibility for leave under local, state, and/or federal legislation? Will an employee’s time off start while he or she is completing the paperwork to request leave?

|  |
| --- |
| **NOTE:** This may include:   * Federal Family and Medical Leave Act (FMLA) * New York State Family and Medical Leave Act (NYS FMLA) * NYS Paid Sick Leave * NYS Temporary Disability Program * New York City (NYC) Paid Sick Leave. |

* Will employees who become ill due to exposure in the workplace while performing their assigned duties be eligible for Workers’ Compensation? If so, whom at your FQHC should they speak with for assistance?

|  |
| --- |
| **NOTE:** This document should refer employees to your FQHC’s standard sick leave policies and procedures for more information on eligibility and applying for leave under local, state, and/or federal law. Any incident-specific changes to eligibility and application procedures should be communicated to employees and included in an addendum to this document. |

|  |
| --- |
| **Policy HR-EM-5:** [Name of FQHC] may need to close one or more sites temporarily, and/or furlough employees. |

A decrease in patient visits may result from suspension of non-urgent services, local- or state-issued “Stay-at-Home” orders, and/or general fear of seeking medical care among [Name of FQHC]’s patient population. In addition, unavailability of staff due to illness, risk factors for illness, fear of coming to work, and/or need to stay home to care for dependents may necessitate modification of workflows. To meet business needs, [Name of FQHC] may need to close one or more sites and/or to furlough employees temporarily. In such instances, [Name of FQHC] will do the following:

* [Insert a bulleted list of what your FQHC will do if sites need to be closed and/or employees need to be furloughed]

*For Consideration*

* Defining and providing to employees clear and documented criteria for determining who will be furloughed.
* Will any employees be reassigned to a different function and/or location? If so, which employees may be included? Pregnant employees? Employees in defined risk groups for severe illness and death?
* Will your FQHC consider volunteers first for furloughs?
* Will your FQHC honor voluntary furlough requests if business needs allow?
  + Would an employee who takes a voluntary leave of absence be eligible for paid sick leave under local, state, and/or federal legislation? Should he or she speak with someone in your FQHC’s HR department for assistance?
* Are there defined increments of time for which non-exempt employees will be furloughed (e.g., half a day vs. full day)?
* Are there defined increments of time for which exempt employees will be furloughed (e.g., 1 full day)?
* Have labor laws been reviewed to confirm legal requirements regarding furlough policies and procedures? If so, what are the rules?
* How much notice will employees that are to be furloughed be given prior to the start of their furlough period? Will notice be given in writing?
* Will furloughs occur on a “rolling” basis? If so, will a schedule be provided to all staff, if applicable?
* Will a pre-determined furlough schedule be subject to change? If so, will staff be notified that the schedule may change to meet patient demand and/or potential staff shortages that may arise?
* Will your FQHC keep care teams together for workflow continuity and to cohort staff to limit illness exposure and spread?

[Name of FQHC] will recall employees as follows:

* [Insert here a bulleted list of the policies and procedures for recalling staff]

*For Consideration*

* Has your FQHC defined and documented clear criteria for return to work for employees?
* Will your FQHC bring all staff back at the same time, or will a phased approach be used?
* Will your FQHC create a ranked list of employees for recall based on clearly defined criteria that supports business needs and reflects the status of the public health emergency when recalls are implemented? If so, is the ranking protocol documented in the return-to-work criteria?
* How will return to work orders be communicated to employees (e.g., via e-mail, post to the intranet, and/or weekly live meetings)?
* Will each employee receive an official letter from your FQHC describing the terms of their employment upon recall?
  + Will this letter and/or any other communications contain the most current scientific knowledge about the status of the emergency, known risk to employees, and safety measures being taken by your FQHC to reduce the risk to returning employees (e.g., by providing personal protective equipment (PPE) and teaching employees how to effectively use it)?
* Will employees be asked to respond to symptomatic and risk assessment screening questions and/or provide evidence of a negative test result before returning to work, in accordance with the most current public health guidelines? If so, will applicable screening or testing requirements be included in recall letters and/or other communications?
* Will employees be asked to respond to symptomatic and risk assessment screening questions and/or laboratory testing to determine infection status each day that they report for work? If so, will this requirement be included in recall letters and/or other communications?
* Will employees be asked to comply with PPE, infection control, and social distancing requirements as “essential functions” of their job? If so, will this requirement be included in recall letters and/or other communications? Will employee job descriptions be changed permanently to reflect this?
* Will employees be asked to complete an attestation confirming that they have read and understand the requirements for returning to work before they may do so?
* Will your FQHC review requirements with employees before they are recalled? How will this meeting occur (e.g., live, phone, video call)? Will employees be paid for time spent learning about recall requirements?
* If an employee cannot return because they lack childcare, will your FQHC hold their job for them? If so, for how long? Will the employee be paid while their position is being held? If so, how/how much?
* Discuss with Legal Counsel if an employee that feels unsafe to return to work upon being recalled may file for unemployment without losing their job. Clearly note policy in this document.

|  |
| --- |
| **NOTES:** If an employee is recalled and refuses to return to his or her job, that employee may no longer be eligible to receive state unemployment benefits. An employee who cannot return to work due to lack of childcare may be eligible to take unpaid leave and have their job held for them, pending incident-specific extensions of the federal and/or state family and medical leave acts. Refer employees to your FQHC’s HR representative for more information. |

Compensation of furloughed employees, either due to site closure or to meet changing business needs will be handled as follows:

* Furloughed employees not receiving compensation from [Name of FQHC] may file for unemployment benefits.
* Furloughed employees who continue to be paid by [Name of FQHC] while a site is closed and/or they are furloughed may not file for unemployment.
* If an employee that is still being paid during a site closure and/or while furloughed, and files for unemployment, [Name of FQHC] will assume that the employee has resigned from [Name of FQHC] and will cease to pay that employee and hold their job for him or her. A letter will be sent to the employee to document this.
* Furloughed employees do not qualify for benefits under the federal FMLA.

|  |
| --- |
| **Policy HR-EM-6:** [Name of FQHC] may reassign staff and/or modify the duties of some staff to meet business needs during a public health emergency. |

[Name of FQHC] may deem it necessary to reassign staff and/or modify the duties of some staff to meet business needs during a public health emergency. Some [Name of FQHC] employees may request to have their duties modified, or to be reassigned to different roles due to personal health and safety concerns. In any such instances, [Name of FQHC] will notify employees in writing that they are being reassigned and/or their duties are being modified; clearly state how their duties are being modified; and indicate how long their duties will be modified. Employees being reassigned/having their duties modified will be provided with all necessary training before beginning their new or modified assignments. [Name of FQHC] may cross-train staff in different roles to meet emergency-related scheduling and shift changes, or to implement modified workflows to maintain the safety of all employees and patients through adherence to public health guidelines for infection control, cleaning, social distancing, and PPE use.

Changes to employees’ assigned duties will be made in accordance with all licensure, registration or certification requirements defined by the NY State Office of the Professions, including any emergency modifications to professional scopes of practice. Add to this section as needed using the questions below, and/or any other related resource.]

*For Consideration*

* Will your FQHC offer hazard pay for individuals assigned to care for patients suspected of having the illness of concern?
* What happens if an employee refuses to accept reassignment or modified duties?
* Does reassignment affect National Health Service Corps (NHSC) or other loan repayment requirements? If so, describe them in this document or note where employees can find the information.

|  |
| --- |
| **Policy** **HR-EM-7**: [Name of FQHC] employees out sick with illness resulting from the public health emergency may be subject to symptomatic and risk assessment screening and/or proof of a negative laboratory test result before they may return to work after being ill, in accordance with local, state, and or federal public health guidelines. |

[Name of FQHC] employees returning to work after being out sick with illness resulting from the public health emergency may be subject to symptomatic and risk assessment screening and/or proof of a negative laboratory test result before they may return to work, in accordance with local, state, and or federal public health guidelines.

[Name of FQHC] employees returning to work from furlough may also be subject to symptomatic and risk assessment screening and/or proof of a negative laboratory test result before they may return to work, in accordance with local, state, and or federal public health guidelines. Incident-specific screening and testing requirements will be noted in an addendum to this document and shared with employees to ensure that they understand post-illness and post-furlough return to work requirements. Add to this section as needed using the question below, and/or any other related resource.]

*For Consideration*

* If an employee requires accommodations upon returning to work, will a note from a physician describing what is needed specifically be required?
* How does the Americans with Disabilities Act (ADA) process get triggered at the health center? (Redirect to standard HR Policies and Procedures, as applicable.)

|  |
| --- |
| **NOTE:** All screening and testing protocols must be devised to maintain employee confidentiality. |

If [Name of FQHC] conducts screening and/or on-site testing, procedures will be put in place to ensure that it will be confidential and in accordance with federal, state, and local laws and public health guidelines:

* There will be a dedicated space for employees to undergo screening or testing.
* Only the employee responsible for conducting screening and/or testing will discuss screening questions with the employee being screened and/or or tested.
* Specific individual responses to screening questions will not be recorded.
* Daily temperature information (if applicable) will not be recorded.
* Only a log that includes the employee’s name and whether they “passed” screening will be maintained.
  + Daily logs will be stored separately from other personnel files.

[Add to this section as needed using the questions below, and/or any other related resource.]

*For Consideration*

* Discuss with Legal Counsel how long screening logs should be kept on file and who should have access to them. Add the information to this document.
* May employees may be tested by approved medical providers, pharmacies, or laboratories if that is their preference?
* Do results of outside tests need to be provided to your FQHC? If so, how?

|  |
| --- |
| **Policy HR-EM-8:** [Name of FQHC] employees returning from vacations to locations deemed “high risk” for community transmission as per local, state, and/or federal health authorities may be subject to quarantine, symptomatic and risk assessment screening and/or proof of a negative laboratory test result before they may return to work, in accordance with local, state, and or federal public health guidelines. |

Any employee that travels to a location deemed “high risk” for community transmission may be subject to quarantine, symptomatic and risk assessment screening and/or proof of a negative laboratory test result before he or she may return to work. The following will be considered when determining if an employee must quarantine, be screened and/or produce a negative test result before allowing an employee to return to work after travel outside the home community:

* Incident-specific local, state, and or federal public health guidelines regarding what defines “high risk” locations during the public health emergency, and what actions should be taken upon return from these locations.
* What travel method(s) was/were used to travel to and from the location?
* What activities were undertaken while traveling?
* How often did employee go out into the community?
* Was employee exposed to anyone who was ill or had symptoms suggestive of infection?
* Did employee take all recommended mitigation actions while traveling (e.g., wearing a face covering; staying at least 6 feet from others outside of household group; practicing proper hand hygiene)?

[Name of FQHC] will work with an employee before he or she travels, and upon his or her return to the home community, to identify ways to minimize risk to the employee and to ensure that the most appropriate course of action to maintain the safety of all employees and patients of [Name of FQHC] is taken. All related communications and decisions will be documented by [Title of HR contact].

*See Policy HR-EM-7 for additional information regarding confidential screening and/or on-site testing protocols.*

|  |
| --- |
| **Policy HR-EM-9:** [Name of FQHC] employees may be subject to symptomatic and risk assessment screening in accordance with local, state, and/or federal public health guidelines and/or regulations each day that they report for work during the public health emergency. [They may also be subject to [weekly/bi-weekly] laboratory testing in accordance with local, state, and/or federal public health guidelines and/or regulations (pending test availability).] |

[Name of FQHC] employees may be subject to symptomatic and risk assessment screening, as well as laboratory testing each day that they report for work during the public health emergency in accordance with local, state, and/or federal public health guidelines and/or regulations.

Incident-specific screening and testing requirements will be noted in an addendum to this document and shared with employees to ensure that they understand screening and testing requirements intended to support a safe workplace environment for [Name of FQHC] employees.

*See Policy HR-EM-7 for additional information regarding confidential screening and/or on-site testing protocols.*

*For Consideration*

* Will employee arrival times be staggered to minimize the amount of time each employee will spend to be screened and/or tested?
* Will employees who spend more than 15 minutes to go through the screening and/or testing process be paid for their time at their normal pay rate?
* Will employees that are authorized to work remotely (see Policy HR-EM-11 on remote work below) be instructed to screen themselves for symptoms and risk of exposure and report their results to your FQHC daily?
  + If so, what will the process be for self-screening and reporting? Online screening tool? Email to HR? Call-in number? Describe in this document.
* Will your FQHC provide a weekly count of employees who test positive for illness via e-mail to all employees and a post to its intranet?
  + If so, will this communication include the last day any employee known to have tested positive was on site at his or her work location?

|  |
| --- |
| **NOTE:** Unless an employee gives permission for his or her positive test result to be shared, no identifying information may be provided to other employees. |

|  |
| --- |
| **Policy HR-EM-10:** [Name of FQHC] will make every effort to maintain a safe working environment during a public health emergency, in accordance with the best available guidance from local, state, and/or federal public health authorities. |

[Name of FQHC] will take the following actions to maintain a safe working environment during a public health emergency, in accordance with the best available guidance from local, state, and/or federal public health authorities:

* [Insert here a bulleted list of how your FQHC will strive to maintain a safe working environment for its employees]

*For Consideration:*

* Describe how your FQHC will adhere to all PPE requirements/recommendations from public health authorities.
  + Will your FQHC procure the appropriate PPE for its employees?
  + Will your FQHC fit-test its employees as necessary, and provide PPE to its employees (based on fit-testing results pending availability of that specific PPE)?
  + Will your FQHC provide training to all employees in the proper donning, doffing, and use of the PPE they are expected to wear in performance of their duties?
  + Will employees be re-trained if supply chain issues require that substitutions be purchased?
  + If there is insufficient quantity or types of PPE, will PPE be prioritized for employees that have direct interaction with patients?
  + Will approved PPE conservation strategies (e.g., mask re-use, mask sanitization) be implemented if warranted?
  + Will your FQHC work with employees who require and/or request a reasonable accommodation related to PPE to find a solution that ensures the safety of all its employees and patients?
    - Will this include use of alternative PPE and/or modification of duties?
    - Do employee requests for accommodation, and all related communications, need to be submitted in writing to your FQHC’s HR department?

|  |
| --- |
| **NOTE:** Employees are requested to adhere to all PPE requirements of [Name of FQHC], in performance of their professional duties as an employee of [Name of FQHC], which shall be based on guidance provided by public health authorities. |

* Describe how your FQHC will adhere to all infection control and cleaning protocols defined by public health authorities as being effective in curbing the spread of the infectious agent associated with the public health emergency.
* Will your FQHC adjust workplace hours, implement staggered shifts, stagger lunch breaks, modify workflows, and/or eliminate points of congregation (e.g., coffeemaker; water cooler) to reduce density in the workplace?
* Will your FQHC send a sick employee home and advise all sick employees, or employees showing symptoms suggestive of illness due to the public health emergency, to remain home in accordance with public health guidelines and recommendations? (See Policy HR-EM-4 for additional information on modified sick leave policies and compensation.)
* Will your FQHC prohibit employees from bringing their children to work?
  + Has your FQHC discussed with employees the need for them to create a Family Plan to determine how they will address any childcare, pet care, and/or eldercare needs to allow them to come to work during an emergency or disaster?
* Will your FQHC reassign and/or modify duties of pregnant employees, and employees in defined risk groups for severe illness and death? (See Policy HR-EM-6 for additional information on reassignment and/or modification of duties.)
* If an employee feels unsafe for any reason, whom should he or she notify? Should this notification be in writing, and include the specific concerns he or she has?
* Ensure that additional incident-specific safety measures, or modifications to these safety measures, are recorded in an addendum to this document.

Any employee reporting unsafe working conditions will not be retaliated against for making such a report.

|  |
| --- |
| **Policy HR-EM-11:** [Name of FQHC] may authorize certain employees for remote work during the public health emergency, as necessary and appropriate. |

[Name of FQHC] may authorize certain employees to work remotely during the public health emergency. This may include employees whose job duties do not include direct patient care, and those employees who may provide direct patient care via telehealth. Specific criteria for determining which employees qualify for remote work, by job title/classification, will be noted in an addendum to this document. [Add to this section as needed using the questions below, and/or any other related resource.]

|  |
| --- |
| **NOTE:** The incident-specific circumstances will dictate who may work from home, and how many days per week they may do so. |

*For Consideration*

* Will employees be authorized to work remotely on a weekly/monthly basis?
* Will additional authorizations to work remotely be given only to employees who meet certain expectations, and the incident-specific criteria determined at the time of an emergency?
* Can providers work remotely from out of state?

Will employees authorized to work remotely be expected to:

* Have a positive performance review within the past 12 months, with a demonstrated ability to work independently and meet the productivity expectations for their job title/classification?
* Adhere to your FQHC’s dress code policy (e.g., pajamas are not acceptable attire for employees working remotely)?
* Adhere to your FQHC’s drug and alcohol use policy? Will use of illicit drugs or alcohol during the time an employee is performing his or her duties on behalf of your FQHC be cause for immediate termination?
* Have a private space in which patient information may be kept confidential?
* Demonstrate proficiency in the use of technology required to successfully complete their assigned work remotely?
* Work all assigned hours and be available during their scheduled working hours (to be determined at the time employee is authorized to work remotely)?
* How, and how often should Non-exempt employees track their hours (e.g., online vs. paper timesheets; daily vs. weekly tracking)?
* How should Exempt employees track their time? Do they need to track their time?
* Log into any internal systems and/or tracking software during their assigned working hours? If so, provide details on what they need to log into, when they need to log in, and how they log in.
* Use FQHC-issued equipment/WiFi (e.g., computer, phone, internet hot spot) in the performance of their assigned duties, in accordance with your FQHC’s Technology Acceptable Use policies?
* Participate in regular (online? phone? E-mail?) check-ins with their supervisor on an agreed-upon schedule between the supervisor and employee?
* Consistently meet milestones and deadlines for assigned work?
* Be on time for all patient-related meetings and appointments (e.g., telemedicine appointments; pre-visit meetings), as well as all internal FQHC meetings?
* Come to your FQHC to obtain work-related supplies? If so, where exactly may they get supplies from? If not, do they have a stipend for purchasing supplies?
* Report to their onsite work location, if directed to do so by their supervisor?

|  |
| --- |
| **NOTE:** Employees who are unable or unwilling to meet the expectations described in this policy document and incident-specific criteria determined at the time of an emergency may have their remote working privileges revoked at any time. |

To support employees working remotely, [Name of FQHC] will:

* [Insert here a bulleted list of how your FQHC will support its remote employees]

*For Consideration*

* Will your FQHC provide employees with equipment or WiFi (e.g., computer, phone, internet hot spot?) to perform their assigned duties, in accordance with its Technology Acceptable Use policies?
* Will your FQHC provide clear expectations and instructions to employees working remotely to support the successful completion of their assigned duties?
* Will your FQHC provide clear evaluation criteria for assessing remote work performance?
* Will your FQHC cross-train employees to allow as many staff as possible to have the opportunity to work from home?

|  |
| --- |
| **Policy HR-EM-12:** [Name of FQHC] may determine that a need for a Reduction in Force (RIF), or salary reductions exist upon facility/facilities’ reopening after a temporary closure due to the public health emergency to reflect changes in patient demand; changes in how patient care is delivered; and/or inability to offer certain patient care services during and/or after the public health emergency. |

If [Name of FQHC] determines that a Reduction in Force (RIF) is needed to reflect updated business needs and care delivery models, [Name of FQHC] will do the following:

[Insert here a bulleted list of what your FQHC will do if it determines that a RIF is needed]

*For Consideration*

* Will your FQHC provide employees with documented rationale and criteria for the determination of which positions will be eliminated?
* Will your FQHC offer severance pay to employees whose positions are being eliminated using a standard formula, and in accordance with applicable federal and state labor laws?
* Will your FQHC provide employees whose positions are being eliminated with written notice, or as soon as is practicable if your FQHC eliminates positions due to unforeseeable business circumstances? How far in advance will notice be given to employees whose positions are being eliminated (90 days is ideal but in no case less than 60 days)?
* Refer to the WARN Act and the NY State WARN Act, as well as the Older Worker Benefit Protection Act for additional guidance.

If salary reductions are deemed necessary:

[Insert here a bulleted list of how salary reductions will be determined and communicated to employees, and how new hires may be addressed]

*For Consideration*

* Will salary reductions be applied using a standard formula by job title?
* Will an employee be given written notice or be notified as soon as is practicable due to unforeseeable business circumstances, if his or her salary will be reduced? How far in advance will notice be provided (90 days is ideal)?
* Will salary reductions be permanent or temporary?
* Will the notices sent to employees state the timeframe for which salary reductions will be in effect?
* If applicable, will wage concession discussions with union representatives occur in accordance with collective bargaining agreements?
* If business needs dictate that new positions be added during, or after, the public health emergency, will your FQHC consider bringing back furloughed staff and/or staff whose positions were eliminated before hiring new individuals?

|  |
| --- |
| **Policy HR-EM-13:** [Name of FQHC] will reference incident-specific legislation and/or regulatory changes as they are implemented and will modify these policies and procedures accordingly. |

Incident-specific circumstances may result in regulatory changes (e.g., extensions of laws related to family and medical leave or unemployment; emergency changes to health professional scopes of practice, etc.) at the federal, state, and/or local level during a public health emergency. [Name of FQHC] will reference any such changes to modify these policies and procedures accordingly. Updates will be noted in an addendum to this document and shared with employees via e-mail and post to [Name of FQHC]’s intranet as they are made.

|  |
| --- |
| **Policy HR-EM-14:** [Name of FQHC] will make every effort to maintain ongoing, timely communication with its employees for the duration of the public health emergency. |

[Name of FQHC] is committed to transparency and ongoing communication with all its employees, and will do the following during a public health emergency:

* [Insert here a bulleted list of things your FQHC will do to maintain ongoing communications with its employees]

*For Consideration*

* How will incident-related communications be sent to employees (e.g., via e-mail and/or posted to the intranet)?
* How frequently will information be shared, at minimum (e.g., weekly)? Will information deemed “urgent” be shared as quickly as possible?
* Will your FQHC hold a weekly live meeting (in person vs. online vs. teleconference) that all employees should attend?
  + How long will the meeting be?
  + What will the format and agenda be (e.g., will your CEO communicate incident-related information, and answer employee questions)?
  + Will your FQHC close during this time so that all employees may participate?
* Will your FQHC provide a weekly count of employees who test positive for illness? If so, how will it be sent (e.g., via e-mail to all employees and a post to the intranet)?
  + Will this communication include the last day any employee known to have tested positive was on site at his or her work location? (Unless an employee gives permission for his or her positive test result to be shared, no identifying information will be provided to other employees.)

|  |
| --- |
| **NOTE:** Unless an employee gives permission for his or her positive test result to be shared, no identifying information may be provided to other employees. |

|  |
| --- |
| **Policy HR-EM-15:** [Name of FQHC] will provide employees with free resources through its Employee Assistance Program (EAP) and other behavioral health initiatives to support employees’ emotional well-being. |

[Name of FQHC] maintains an Employee Assistance Program (EAP) to aid employees. Our EAP includes the following services:

* [Insert a bulleted list of services available through FQHC’s EAP. Include a brief description for each item, as well as how to get more information/access each service.]

|  |
| --- |
| **Policy HR-EM-16**: [Name of FQHC] will offer vaccination to employees if, and when, a vaccine becomes available during a public health emergency, in accordance with local, state, and or federal guidance, including guidance on risk stratification of employees. |

[Name of FQHC] will offer vaccination to employees if, and when, a vaccine becomes available during a public health emergency, in accordance with local, state, and or federal guidance, including guidance on risk stratification of employees. [Add to this section using the questions below and any other relevant resources.]

*For Consideration*

* Are there any collective bargaining agreements pertaining to vaccination that must be consulted?
* May employees receive their vaccination from a provider outside of your FQHC, e.g., from an approved physician, pharmacy, or laboratory (pending vaccine availability)?
* Would proof of vaccination from outside entities need to be provided to your FQHC?
* Will employees be eligible to take any paid leave to obtain their vaccination from an outside entity during their workday? If so, how much paid leave could they take?

[Name of FQHC] will implement protocols to protect the privacy and safety of employees who choose to receive their vaccination from [Name of FQHC], as follows:

[Insert here bulleted list describing how the vaccination process will run at your FQHC]

*For Consideration*

* Describe provisions for employee privacy and safety.
* How and when should an employee request vaccination?
* How and when does an employee complete vaccination paperwork?
* What is done with paperwork?
* How is vaccination recorded and reported for public health authorities?
* What is the location for vaccination?
* Will there be a post-vaccination waiting area to monitor for adverse events? Will employees need to wait there for 15 minutes post-vaccination?

[Name of FQHC] will provide reasonable accommodations to employees with qualified disabilities and to those who have objections based on religious beliefs, as required by the Americans with Disabilities (ADA) and Title VII of the Civil Rights Act of 1964, respectively. Employees must disclose any such disabilities or objections in writing to [insert Title of HR contact]. [Name of FQHC] will document the decisions of those who choose not to be vaccinated and their reasoning. This information will be kept separately from employee personnel files.

[Employees who receive a vaccination either from [Name of FQHC] or from an approved outside entity will receive [insert incentive here, if desired.]]

# References and Additional Resources

AARP. (2020). [Workers' Rights: What Your Boss Can and Can't Do During the Pandemic](about:blank).

ASPR TRACIE. (2020). [Healthcare System Considerations for Resumption of Services during COVID-19](about:blank).

The Center for Infectious Disease Research and Policy (CIDRAP). (2009). [Doing Business During an Influenza Pandemic: Human Resource Policies, Protocols, Templates, Tools, & Tips](about:blank).

National Association of Community Health Centers. (2020). Reduced Workflows and Staffing Guidance for Non‐Clinical Operations COVID‐19 Resource Packet.

New York City Department of Consumer Affairs. [Paid Safe and Sick Leave Law](about:blank).

New York State. [New York Paid Family Leave](about:blank).

New York State. [New York Paid Sick Leave](about:blank).

New York State. [New York State Worker Adjustment and Retraining (WARN) Act Fact Sheet](about:blank).

New York State. [Worker Adjustment and Retraining Notification](about:blank).

U.S. Congress. (1990.) [S.1511 - Older Workers Benefit Protection Act](https://www.congress.gov/bill/101st-congress/senate-bill/1511).

U.S. Department of Health and Human Services, Office of the Assistant Secretary for Preparedness and Response. (2020). [COVID-19 Healthcare Planning Checklist](about:blank).

U.S. Department of Justice, Civil Rights Division. [Information and Technical Assistance on the Americans with Disabilities Act (ADA)](about:blank).

U.S. Department of Labor. (2020). [Fact Sheet #70: Frequently Asked Questions Regarding Furloughs and Other Reductions in Pay and Hours Worked Issues](about:blank).

U.S. Department of Labor. [Family and Medical Leave Act](about:blank).

U.S. Department of Labor. [Worker Adjustment and Retraining Notification (WARN) Act Compliance Assistance](about:blank).

U.S. Equal Employment Opportunity Commission (EEOC). [Title VII of the Civil Rights Act of 1964](about:blank#:~:text=%20Title%20VII%20of%20the%20Civil%20Rights%20Act,It%20shall%20be%20an%20unlawful%20employment...%20More%20).